

Needs Assessment Tool for Drug Overdose and Related Outcomes

Virginia Department of Health

Updated: 9/11/2023



What is the new tool?

- The Virginia Department of Health (VDH) developed the Needs Assessment
 Tool for Drug Overdose and Related Outcomes
 - Originally called the Right Help, Right Now Prioritization Model
- To help identify which Virginia communities may need extra support from targeted drug overdose-related prevention and intervention strategies
 - Drug overdose and substance use affect all communities in Virginia



How can the tool be used?

- Localities and communities are encouraged to use tool to better understand vulnerability to higher rates of overdose and other negative health outcomes
 - Does not assess a locality's capacity, readiness, or ability to implement prevention and intervention strategies
- VDH uses this tool along with other information to carry out public health programs to reduce the harms associated with drug use:
 - Naloxone distribution
 - Comprehensive harm reduction program expansion
 - Fentanyl wastewater surveillance piloting



How was the tool developed?

- Uses 12 data indicators related to drug overdose and misuse, drug-related infectious disease outcomes, and socioeconomic indicators
- Each city/county locality was ranked, or "scored", compared to the state value for each indicator
- **2021** was used as the data year for all indicators.
 - Data sources: Virginia Department of Health, Virginia Health Information (through VDH), Virginia State Police, Virginia Department of Behavioral Health and Developmental Services, United States (U.S.) Census Bureau, U.S. Bureau of Labor Statistics



Which data indicators are included?

Indicator 1: All-drug overdose deaths (death certificates)	Indicator 2: All-drug overdose emergency department visits	Indicator 3: All-drug nonfatal overdose inpatient hospitalizations	Indicator 4: Poverty estimates
Indicator 5: Unemployment estimates	Indicator 6: Persons prescribed prescription opioids	Indicator 7: Persons prescribed buprenorphine	Indicator 8: Newly reported hepatitis C cases among persons aged 18-30 years
Indicator 9: Newly diagnosed HIV cases	Indicator 10: New all-substance use disorder admissions to community service boards	Indicator 11: Arrestees for drug/narcotic violations	Indicator 12: Naloxone administrations with positive responses



- Step 1: State rate, state average count, or state percentage was calculated for each indicator.
 - State average count = total count divided by 133 localities
- Step 2: Counts, rates, and percentages for all 133 localities were calculated for each indicator.



• Step 3:

- If locality value is above the state value for an indicator, the locality received one (1) point.
- If the locality value was equal to or below the state value for an indicator, the locality received zero (0) points.

Brief

Example (not all indicators included in example): Green indicates		State Average Count for Drug Overdose Deaths: 20	State Drug Overdose Death Rate per 100,000 Population: 30.5	State Percent for Poverty: 10.3%	Score
above the state threshold	Locality A	59	23.9	8.3%	1
Red indicates	Locality B	19	61.6	10.9%	2
equal to or below the state threshold	Locality C	25	31.3	10.3%	2



- Step 4: The points that each locality received from the 12 indicators are summed together to provide an overall score for that locality.
 - The minimum score a locality could get was zero (0).
 - The maximum score a locality could get was 22 (Indicators 1-3 and 6-12 had counts and rates; Indicators 4 and 5 had percentages only for a total of 22 possible points).
- **Step 5:** A state average indicator score was calculated.
 - State average indicator score = total number of points for the state divided by 133 localities
 - The state average indicator score was **9.**



 Step 6: If the locality's indicator score is above the state average score (10 or higher), the locality was identified as at higher need for drug overdose-related outcomes and substance use.

Dhei Example.	
Green indicates above the state	Loca
threshold	Loca
Red indicates	

equal to or below the state threshold

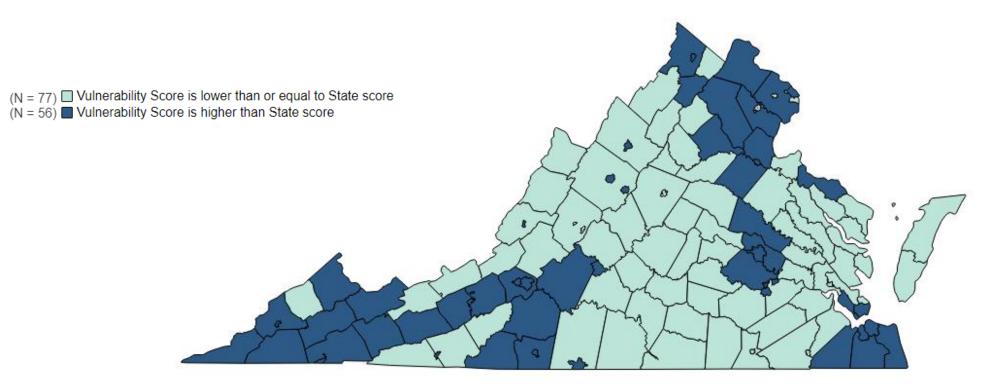
Brief Evample

	State Average Indicator Score: 9	Priority?
Locality A	20	Yes, <u>above</u> state average score
Locality B	9	No, <u>equal to</u> state average score
Locality C	4	No, <u>below</u> state average score



Scoring results

• 56 Virginia localities were identified at higher need and may benefit from targeted resources and support for prevention and intervention services.





Score of 22	Score of 16
Roanoke City	Chesterfield County
Score of 21: None	Danville City
Score of 20	Hampton City
Richmond City	Norfolk City
Score of 19	Petersburg City
Lynchburg City	Spotsylvania County
Portsmouth City	Score of 15
Score of 18	Stafford County
Score of 18 Henry County	Stafford County Tazewell County
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Henry County	Tazewell County
Henry County Newport News City	Tazewell County Score of 14: None
Henry County Newport News City Score of 17	Tazewell County Score of 14: None Score of 13
Henry County Newport News City Score of 17 Henrico County	Tazewell County Score of 14: None Score of 13 Bedford County

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Culpeper County Franklin County Frederick County Harrisonburg City Pulaski County Washington County Score of 12 **Bristol City** Buchanan County Hanover County Hopewell City Suffolk City Warren County Winchester City Wise County

Wythe County Score of 11 Arlington County Fredericksburg City Lee County Montgomery County Norton City Patrick County Prince William County Salem City Virginia Beach City Waynesboro City Score of 10 **Covington City** Fairfax County

Fauquier County Galax City Loudoun County Radford City Russell County Scott County Staunton City Westmoreland County



Recommendations

- VDH recommends using the Vulnerability Assessment Tool to identify localities at higher need for targeted drug overdose prevention and intervention strategies across Virginia.
 - User-friendly
 - Assess rates and counts
 - Includes indicators that show the burden of drug overdose and substance use disorder across localities, infectious disease outcomes associated with drug use, and related socioeconomic factors



Recommendations

- Regardless of score, drug overdose and substance use impact all Virginia communities.
 - Localities and communities are eligible for support from state agencies.
- This tool does not assess a locality's capacity or ability to implement drug overdose prevention and intervention strategies.
- Communities may also want to consider other locally available data, existing programs and partnerships, and known areas of increased need when determining the approaches and strategies that best fit their communities.

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Frequently asked questions

- Why were these indicators selected?
 - Indicators are directly associated with drug overdose morbidity (i.e., nonfatal drug 0 overdoses) and mortality (i.e., drug overdose death), and infectious disease outcomes associated with drug use (i.e., HIV and hepatitis C).
 - Socioeconomic indicators (i.e., poverty and unemployment) are included because these Ο factors are related with a locality being at higher risk for drug overdose and misuse.

Higher poverty and/or unemployment 1 Risk for drug overdose and substance use

- Why does the hepatitis C indicator only include 18–30-year-olds?
 - Injection drug use is the most common risk factor for hepatitis C in younger age groups. 0



Frequently asked questions

• Why were counts and rates considered?

 Counts and rates can more comprehensively identify localities at higher need, than looking only at one option or the other.

Rates	Counts
 Benefits: Used to compare equally across different population sizes Allows for smaller, and sometimes more rural, localities to be considered 	 Benefits: Reflects higher morbidity (like nonfatal drug overdose) and mortality (death) to assess burden Easy to understand by the public
 Limitations: May underestimate burden in localities with larger population sizes 	 Limitations: Counts are typically higher in larger population sizes (more drug overdoses when there are more people) and may leave out smaller, and sometimes more rural localities from being considered



Frequently asked questions

- Why do the indicators include all drugs versus only opioids (e.g., all-drug overdose deaths, all-drug overdose emergency department visits, etc.)?
 - Increasing polysubstance use
 - Increasing trend in stimulant-related drug overdose death (i.e., cocaine, methamphetamine)
 - Less lethal drug used by a person is unknowingly mixed with a more lethal drug (e.g., fentanyl)
 - Not all drug overdose deaths involve an opioid (15% did not involve an opioid in 2021)