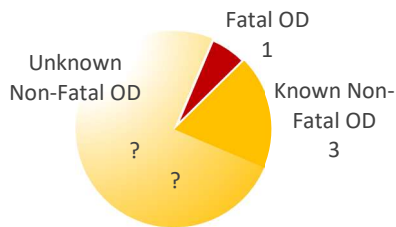


As part of the Mendonoma Opioid Response Consortium’s work in addressing our community’s health needs, Mendonoma Health Alliance provides semi-annual reporting to the federal Health Resources and Services Administration on behalf of ourselves and our partner groups. Mendonoma Health's partners include Mendocino County Public Health, Redwood Coast Medical Services, Coast Life Support District, Bright Heart Health and Santa Rosa Memorial Hospital. Our first report, spanning September 2020 through February 2021, highlighted both the community’s need for expanding quality services, and our consortium’s need for improved information tracking to best inform our decision making. **The following data was reported to MHA directly from our partners.**

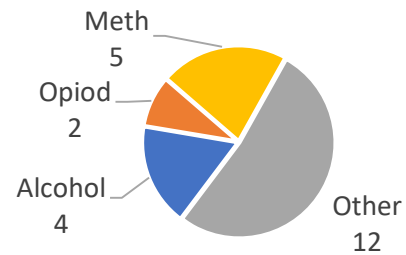
Overdoses Are Often Unreported



- Non-fatal overdoses are often unreported to our consortium and are very hard to track.
- Over 56 doses of Naloxone were distributed to aid in overdose reversal, and many may have been successfully used, but never reported.
- Coroners often classify fatal overdoses as “accidental death” and therefore they are also typically undercounted.
- Fatal overdose info is one of the most vital data sets, and also least tracked, in all of our consortium’s reporting.

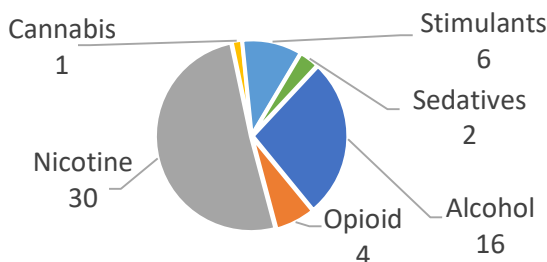
- 14 community members* were screened for substance use disorders (SUDs), which include both opioids and numerous other substances, half were screened outside of the service area by Santa Rosa Memorial Hospital and half remotely via telehealth partner Bright Heart Health.
- No in-person screening occurred within our service area.
- Our 2019 Needs Assessment survey data estimated that 12% of community members had SUDs, which would mean **only 2% of those experiencing addiction were screened.**

All SUD Screens Performed Were Positive



* Many community members screened positively for multiple SUDs.

Only a Fraction Were Diagnosed



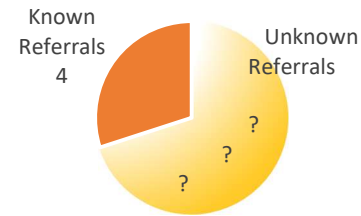
* Many community members were diagnosed with multiple SUDs.

- 40 community members* were diagnosed with a total of 59 SUDs, with 54 diagnoses outside of the service area by Santa Rosa Memorial Hospital, three diagnoses made remotely via telehealth provider Bright Heart Health, and two diagnoses in the service area by Redwood Coast Medical Services.
- Based on our 2019 Needs Assessment survey data, this means **fewer than 8% of those with SUD were diagnosed.**

Referrals provide community members with help they might not have known was available.

- Four known referrals were provided to people diagnosed with SUD by Mendonoma Health Alliance.
- Most partners do not currently track referrals.
- Known referrals were to recovery housing, behavioral health services, primary care, and in-patient treatment

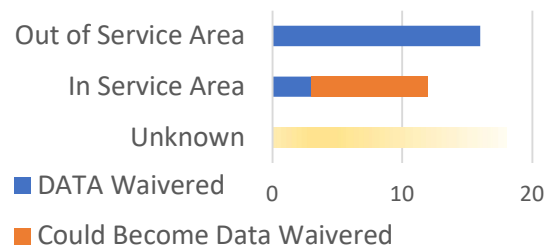
Referrals Are Likely Under Utilized



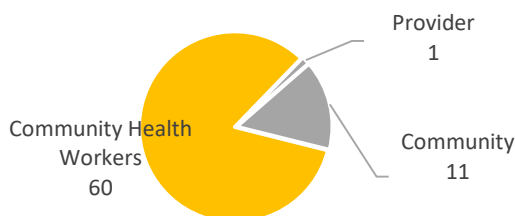
Medication-assisted Treatment (MAT) uses medication coupled with behavioral therapies to treat SUD more effectively while increasing retention. DATA waivers allow providers to use MAT in treating SUD.

- The consortium has over 19 DATA-waivered providers, including 16 available via telehealth
- Three DATA waived providers are available within the service area.
- Our largest consortium members were unable to provide a count of DATA-waivered providers.
- Two patients were reported as receiving MAT for opioid use disorder, but more are known to exist.

Only A Few In-Area Providers Can Provide MAT



More Education Is Available



Our grantor, the Rural Communities Opioid Response Program (RCORP), provides free SUD training.

- Community Health Workers attended 60 trainings on a broad range of SUD topics.
- One provider attended stigma reduction training.
- 11 community members attended stigma reduction and Naloxone training.
- In addition to RCORP training, since this reporting period closed, Coast Life Support District has also begun providing Naloxone training to the community-at-large.

What's next?

The hard work our partners did in assembling this data is already paying dividends. Going forward we can already see that we need to ...

- **Better understand the problem** by establishing improved and broader tracking of non-fatal overdoses.
- **Be proactive with community members** by providing more screenings and diagnoses, especially locally, allowing for the follow up care that will flow from identifying their needs, and more proactively referring community members to additional services.
- **Better understand and expand the treatment that we're already providing** by improving tracking systems and expanding MAT availability
- **Take advantage of free training opportunities** offered by RCORP, particularly at the provider and community level, to improve awareness and strategies in addressing substance use disorder in our community.