

OVERDOSE RESPONSE STRATEGY

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ORS Pilot Projects

Overview

To build the evidence base for promising practices in opioid overdose prevention, CDC and the National Association of City and County Health Officials (NACCHO) work with several ORS states to develop and implement local projects designed to reduce overdoses. CDC provides technical support to these high need areas and works with HIDTAs and ORS PHAS and DIOs to ensure that the pilot projects are smoothly implemented and that their progress and impact are monitored effectively.

In 2020 pilot site activities included

- Jail-based overdose prevention education
- Re-entry wrap around services
- Support and services for next of kin after overdose
- Post-overdose outreach
- Naloxone training and support services for justice-involved individuals
- Use of overdose mapping to target outreach services

To request pilot site deliverables referenced in this document please contact info@overdoseresponse.us

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Grady Mobile Integrated Health Post Overdose Program

ORS Pilot Project in Fulton County, Atlanta, Georgia

Pilot Project Goal

To reduce overdose mortality and morbidity through post overdose engagement and care by providing peer support services to overdose survivors and their families, and training for first responders.

Program Accomplishments

- Established new referral partnerships with law enforcement and social work services within Grady Memorial Hospital Emergency Department
- Delivered SOAR training seminar for law enforcement. SOAR training covers substance use disorder, first-responder self-care, and naloxone administration
- Peer outreach specialists have provided services to 49 participants and made 55 referrals to services including 12-step meetings, residential recovery programs, inpatient treatment centers, and medication for opioid use disorder clinics.
- Peer outreach specialists distributed 31 Naloxone kits.

Evaluation Outcomes

- Referrals were most often successful when participants were contacted the same day as the referral (40% of total participants).
- Twelve participants completed the one-month follow-up outcome survey. Half reported that they had not used opioids in the last month and three-quarters reported they are actually changing their opioid use habits right now.

The program conducted needs assessment interviews with emergency department staff, peer support specialists, and program participants. Barriers to program implementation and using services include:

- Program visibility in the emergency department with over 400 staff members.
- Peer Specialists don't have access to hospital electronic medical records system to identify potential program participants.
- Lack of resources for participants facing immediate housing challenges.

Participants suggested that decreasing wait times, accessing services closer to their home, and decreasing the number of required visits to the MOUD clinic would decrease barriers.

Future Directions

Next steps of this program include enhancing the referral network to increase enrollment volume, and using the results of the needs assessment to develop a training for first responders to address gaps in knowledge and skills about substance use and mental health.

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Available Products and Deliverables

- Protocol for Post-Overdose Program Home Visits
- Pre-Visit Checklist
- Client Intake Form
- Interview Guides
 - Emergency Department Staff
 - Post Overdose Program Staff
 - Program Participants
- Needs Assessment Guide for Focus Groups
 - First Responders
 - Emergency Department

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Jail-Based Overdose Prevention Education and Naloxone Distribution

ORS Pilot Project in Haywood and Catawba Counties - North Carolina

Pilot Project Goal

Reduce fatal and non-fatal overdoses in individuals recently released from incarceration in two North Carolina county jails by distributing naloxone and educating individuals on overdose prevention and harm reduction strategies.

Program Accomplishments

- Developed standardized overdose prevention education curriculum and implementation tool for use in jail settings and iteratively updated it based on lessons learned and evaluation results.
- Between Summer 2019 and February 2020, outreach specialists trained over 209 individuals in two county jails, three quarters of whom had never received overdose prevention training before.
- Participants received naloxone upon release from jail, if desired, with additional opportunities to access naloxone after release during peer outreach visits.
- Shifted protocol by replacing in-person trainings with the dissemination of educational booklets and naloxone kits to allow for social distancing during COVID-19 pandemic.

Evaluation Outcomes

Before and after the overdose education training participants were tested on their knowledge and attitudes about overdose. The knowledge assessment showed:

- Increases in understanding the signs of an opioid overdose and identifying circumstances that may increase risk of having an overdose.
- Significant increases in participants' knowledge on how to use naloxone and their confidence in responding to overdose and administering naloxone.

To assess implementation barriers and facilitators, the program conducted interviews with the peer outreach specialists.

- Facilitators to effective implementation of the overdose prevention and naloxone distribution (OEND) program include program awareness and support among jail staff, an established curriculum, and training received by the outreach specialists to deliver the curriculum.
- Barriers to effective linkage to care post release include unpredictable release times and an inability to provide individualized attention while training in groups.

Future Directions

Next steps in this pilot project include training jail staff to help identify and refer potential participants to the OEND program, improving protocols for follow-up and tracking naloxone distribution, and expanding the evaluation to assess impacts of providing naloxone and overdose education on health outcomes at 30-days post-release.

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Available Products and Deliverables

- Jail-based Overdose Prevention Education and Naloxone Distribution Toolkit
- Pre and Post overdose education survey on knowledge and attitudes
- Interview Guide – Peer outreach specialists
- Jail staff and administration training and feedback survey

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Harm Reduction Re-Entry Wrap Around Services

ORS Pilot Project with Catholic Charities Care Coordination Services (CCCCS) – Albany, New York

Pilot Project Goals

Reduce fatal and non-fatal overdoses, reduce recidivism, and increase use of harm reduction strategies among individuals recently released from incarceration in the Albany County Correctional Facility by connecting individuals to wrap around services. Services include linkage to an MOUD/SUD treatment provider after discharge, harm reduction counseling and safety planning, naloxone training and risk reduction education, access to naloxone at discharge, linkage and referral to housing resources, peer recovery services, and linkage to other vital health care and social services.

Program Accomplishments

- As of December 15th, 2020, over 200 incarcerated individuals were enrolled in the CCCCCS Harm Reduction Re-Entry Wrap Around Project and 93 individuals met with the re-entry specialist post-release.
- Any individual identified to have opioid use disorder upon arrival to the facility is eligible to participate in the program regardless of current MOUD utilization or pending discharge date.
- All incarcerated individuals and jail staff were offered overdose education and naloxone.
- To accommodate social distancing during COVID-19, overdose education and naloxone training was made available by video.
- Driven by program successes documented in 2019-2020, interest in this model has increased across New York State. Because of this, coupled with CCCCCS' commitment to mitigating overdose risk among individuals leaving correctional settings, it has been possible to initiate implementation of additional MOUD programs that include harm reduction wrap around services at a number of county correctional facilities within their catchment area.

Evaluation Outcomes

Surveys were completed at intake by 114 participants, at two weeks post-release by 38 participants, and at one-month post-release by 32 participants.

- Nearly half of respondents reported ever experiencing an overdose at intake (43%), with an average of 1.88 times in the past three months.
- At two weeks and one-month post-release, the rate of self-reported overdose in the prior two weeks was 2.6% and 6.3%, respectively.
- The proportion of clients who reported daily drug use at intake (77.9%) was substantially lower at the two-week (13.5%) and one-month (15.6) follow-ups.
- Most clients reported that they currently carried naloxone at two-week (74%) and one-month (88%) follow-ups. Most naloxone carried by participants was distributed by the program upon or post-release.
- Harm reduction strategies: At one-month follow-up, 54% of respondents reported often using drugs with others instead of alone, an increase from 33% at intake. Similarly, 25% of respondents at one-month follow-up reported they often do a test shot (using a small amount

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first), an increase from 1.3% at intake. Both of these increases indicate improvement in the adoption of harm reduction safer use strategies among program clients, shown to reduce the risk of overdose, and are likely related to program interventions.

Future Directions

Next steps for this pilot project are to extend follow up with individuals to three- and six-months, identify factors associated with risk for overdose, arrest, and incarceration, and ensure that the program is reaching racial and ethnic minority groups.

Available Products and Deliverables

- Client Data Collection Tools
 - Intake Survey
 - Re-entry program post-release assessment
- Re-entry Program Implementation Interview Guides
 - Correctional facility staff
 - CCCCS staff
 - Program clients

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Overdose Reduction in Justice Involved Individuals

ORS Pilot Project in Carroll County, Maryland

Pilot Project Goal

Provide Naloxone training and distribution for justice involved individuals at risk for overdose by partnering with Carroll County Drug Court, Pre-trial, and Re-entry programs. Offer peer support services for interested individuals to provide linkage to services and supporting individuals while they create their own plan for recovery.

Program Accomplishments

- Completely reimagined program objectives to consider COVID-19 safety precautions. Changed project from a post-overdose outreach program to providing justice involved individuals at risk for overdose and loved one's linkage to services and Naloxone training and distribution.
- Developed database to aggregate data collection across the different program referral sources.

Available Products and Deliverables

- Participant evaluation surveys – intake and follow-up.
- Data collection tool

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Cook County Sheriff's Treatment Response Team (TRT)

ORS Pilot Project in Cook County, Illinois

Pilot Project Goal

To reduce overdose related deaths and eliminate barriers to substance use treatment through proactive outreach, education, and support for individuals with SUD, their loved ones, and first responders.

Program Accomplishments

- Developed data collection tools to evaluate services.
- Connected 42 clients to substance use treatment or other recovery-based services.
- Assisted 29 clients with transportation via Uber Health to access treatment and other recovery related services.
- Linked clients to other needed services including stable housing (12 clients), employment (13 clients), and other medical care (7 clients).
- Delivered a three-part online training on substance use disorder, naloxone training, and compassion fatigue to law enforcement at the Cook County Sheriff's Office

Evaluation Outcomes

300 law enforcement officers completed pre and post surveys to assess training

- Officers demonstrated improvement of their knowledge of MAT, the process of long-term recovery, and the impacts of burnout and secondary stress and how to utilize self-care to prevent the effects of compassion fatigue.

The TRT used overdose mapping to identify and target outreach services to areas with a high prevalence for substance use and overdose. The TRT:

- Engaged 48 businesses resulting in 16 clients being connected to the team for services.
- Provided about 100 Naloxone kits to clients and businesses in hotspot areas. A client reported that the Naloxone provided by the TRT was used in response to an overdose.

Available Products and Deliverables

- Client intake assessment and follow-up surveys
- Pre and post surveys for Law Enforcement training

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Law Enforcement-Led Post-Overdose Outreach

ORS Pilot Project in Ocean County, New Jersey

Pilot Project Goal

To reduce overdoses by connecting individuals to substance use treatment and recovery services and collect feedback through a community profile questionnaire through a partnership between the county health department and participating municipal police departments

Program Accomplishments

- Formalized agreements with five police departments and the Ocean County Health Department.
- Identified the need for additional planning and alignment between the public health and public safety partners to reconcile different approaches to project activities like community engagement and data collection. Developed program manual with agreed upon implementation procedures.
- Made 18 in-person outreach attempts between February and March 2020, before outreach was suspended due to COVID-19.
- Used Facebook and Twitter to connect with individuals while COVID-19 lockdown measures were in place.

Future Directions

The focus of this initiative going forward will be to implement outreach via telephone and connect individuals to community recovery services using COVID-19 safety protocols. The police-led questionnaire will be secondary to providing services.

Available Products and Deliverables

- Questionnaire
 - Resident who experienced an overdose
 - Family member
 - Police department
- Participant Satisfaction Survey
- Police department focus group guide
- Program manual

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Supportive Outreach Project

ORS Planning Pilot Project in Springfield, Vermont

Pilot Project Goal

The Supportive Outreach Project seeks to reduce substance use disorder, fatal and non-fatal overdose, and other drug-related incidents through in-person and remote outreach to affected individuals. Outreach provides opportunities for intervention, support, harm reduction education, treatment and recovery, naloxone training and distribution, information about the Good Samaritan Law, and linkage to a recovery coach for ongoing support.

Program Accomplishments

- Established partnership with Springfield Hospital to expand scope of clients referred to the program outside of the emergency department.
- Developed program protocols, data collection tools, and an online client referral form.
- Designed project logo and brand to use on promotional materials.
- Trained and certified two individuals at the Recovery Coach Academy and two individuals in Forensic Peer Support Training.
- Started implementing this planning project and received six applications for recovery coaching, provided multiple referrals for detox, mental health, residential, and family services.
- By December 2020, made 20 successful contacts and 10 referrals to recovery coaching. Referrals were also made to detox and mental health services and to MOUD. One individual engaged in peer services, enrolled in residential treatment, and started MOUD.

Future Directions

This planning project received funding to be implemented in 2021. Future directions of this project are to increase the number of referrals through additional sources including fire, EMS, social service agencies, and other community partners. The Supportive Outreach Project will continue connecting individuals from the Springfield community to services and plans to expand the initiative to the neighboring community of Bellows Falls through an existing partnership.

Available Products and Deliverables

- Intake Data Collection Form
- Outreach Visit Log
- SOP promotional material (rack card, informational wallet card, poster)
- Evaluation Plan and Outcome Measures
- Referral Form for First Responders
- Tutorial for first responders on utilization of online referral system.