

Disparities in Overdose in Region 5

Part 3: Contactless Overdose Prevention Strategies in Wisconsin
and Indiana During COVID-19

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January 2021

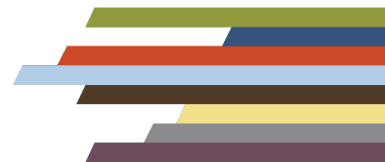
The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.



Thank You for Joining Us!

A few housekeeping items:

- If you are having technical issues, please individually message Kristina Spannbauer or Stephanie Behlman in the chat section and they will be happy to assist you.
- Please put any questions for the speaker or comments in the Q & A section, also at the bottom of the screen. We will respond to questions during the presentation.
- We will be using automated transcriptions for today's webinar.

Thank You for Joining Us!

A few more housekeeping items:

- You will be directed to a link at the end of the presentation to a very short survey – we would really appreciate it if you could fill it out. It takes about 3 minutes.
- We are recording this session and it will be available on our website in a couple of weeks.
- Certificates of attendance will be sent out to all who attended the full session. They will take about 2 weeks.

A close-up photograph of several social media icons on white, 3D keyboard keys. The icons include Pinterest (red circle with white 'P'), Snapchat (yellow square with white ghost), Instagram (purple and pink gradient camera icon), Facebook (blue square with white 'f'), and Twitter (blue bird). The keys are arranged in a grid-like pattern, with some keys partially visible and others more prominent. The background is a light gray surface.

Follow Us On Social Media!

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- @GMhttc
- @GLPTTC

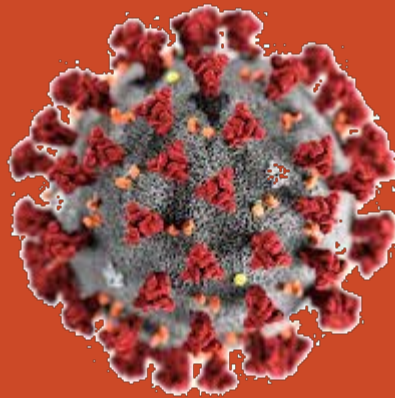
Speaker Introductions



Photo courtesy of [Jay Castor](#) on [Unsplash](#)

Disparities in Overdose in Region 5

Part 3: Contactless Overdose Prevention Strategies in Wisconsin and Indiana During COVID-19



Chuck Klevgaard, Prevention Manager, Great Lakes PTTC

Christy Niemuth MA., Opioid Harm Prevention Coordinator for the State of Wisconsin
Department of Health Services, Bureau of Community Health Promotion.

Cassidy McNamee MPH., Naloxone Program Manager/COVID Vaccine Deployment Team,
Indiana State Department of Health, Division of Trauma and Injury Prevention

COVID 19 and Disparate Populations

- Over 81,000 drug overdose deaths
- An acceleration of deaths during the pandemic
- Increases in synthetic opioid, cocaine, psychostimulant overdose deaths
- Likely contributors
- Populations disproportionately affected



Joint Statement the Secretary of HHS, Surgeon General, and CDC Director.

“Many peoples access to medical care and essential social supports has been disrupted by COVID-19, and many more face loneliness and isolation from their support community during the pandemic.”

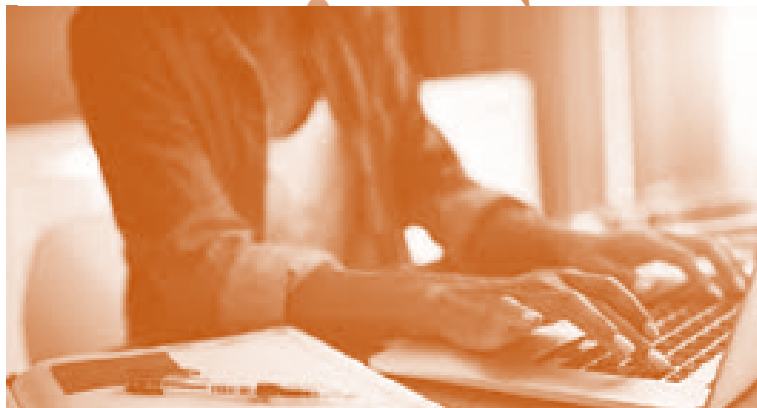
Rochelle P. Walensky, MD, MPH

Joseph R. Biden, Press Release - Statement by HHS, Surgeon General, and CDC Nominees on Record Opioid Deaths and Spike in Overdoses During Pandemic Online by Gerhard Peters and John T. Woolley, The American Presidency Project <https://www.presidency.ucsb.edu/node/347444>

CDC Recommendations

- Expand distribution and use of naloxone and overdose prevention education.
- Expand awareness about and access to and availability of treatment for substance use disorders.
- Intervene early with individuals at highest risk for overdose.
- Improve detection of overdose outbreaks to facilitate more effective response.

Center for Disease Control, Emergency Preparedness and Response, Increase in Fatal Drug Overdoses Across the United States Driven by Synthetic Opioids Before and During the COVID-19 Pandemic. Retrieved on March 10, 2021 from <https://emergency.cdc.gov/han/2020/han00438.asp>.



Question

What are the most significant disparities in mental health and substance misuse experienced by racial and ethnic minority groups where I live.

- A. Access to care**
- B. Psychosocial stress**
- C. Social determinants of health**
- D. Other concerns**

Naloxone Distribution in Wisconsin



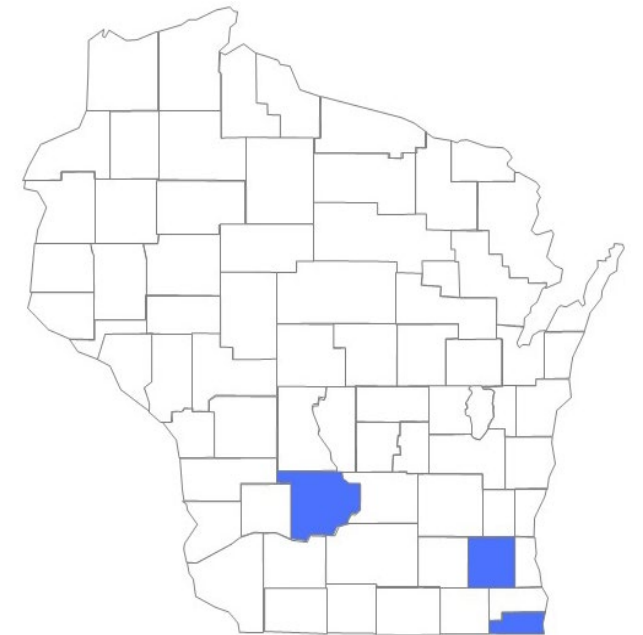
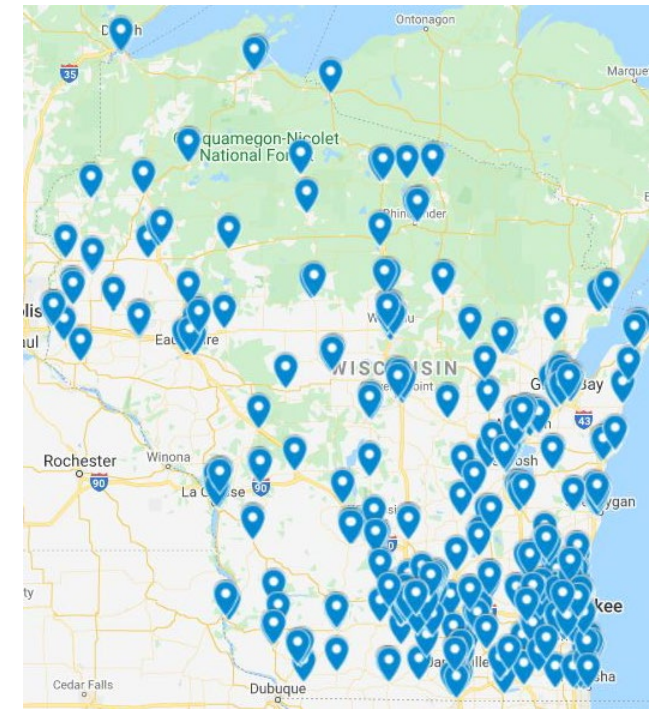
Christy Niemuth MA., Opioid Harm Prevention Coordinator, Overdose
Data to Action Grant Coordinator for the State of Wisconsin Department of
Health Services, Bureau of Community Health Promotion.

Email: christine.niemuth@Wisconsin.gov



In the Beginning.... (2018)

- One statewide syringe access program providing naloxone to community members (ARCW)
- Statewide Standing Order for Pharmacies
- Three Prescription Drug Overdose (PDO) communities distributing naloxone with SAMHSA funding.

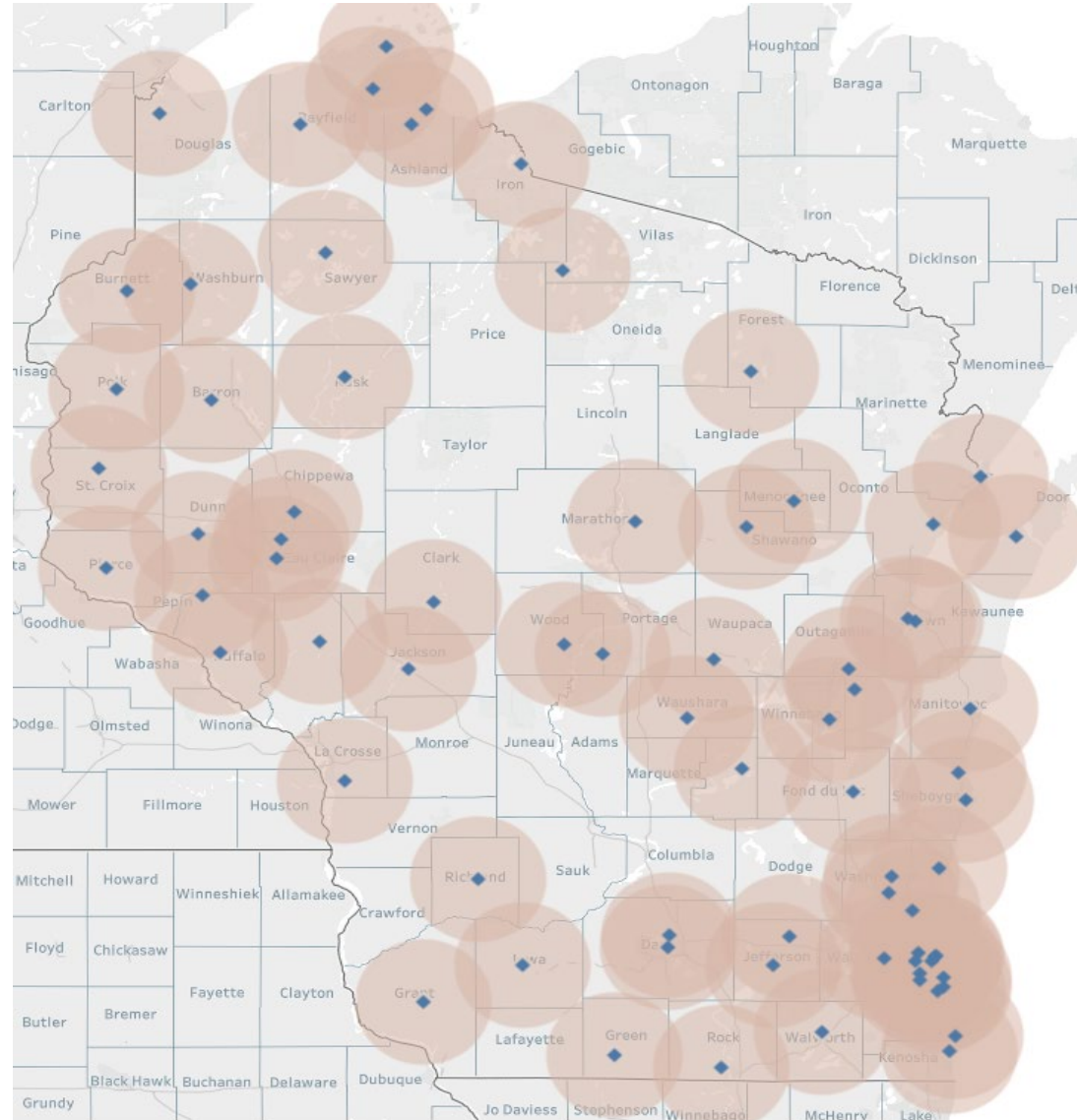


Wisconsin's NARCAN® Direct Program

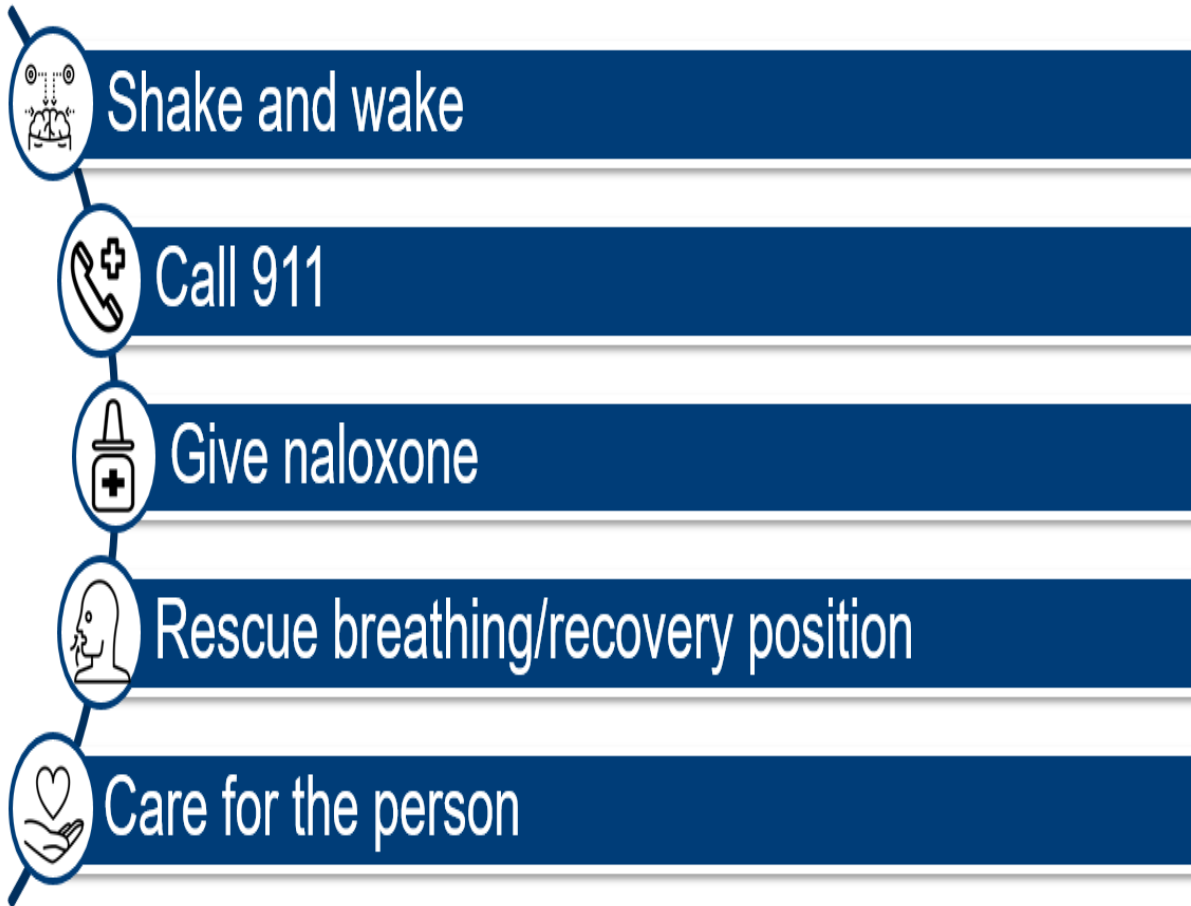
- Began Summer, 2019 with 14 pilot agencies
- Expanded in Fall, 2019 to 73 local and tribal health departments and syringe access programs
- In response to COVID-19, expanded in spring of 2020 to include 14 Opioid Treatment Programs (OTPs)
- Reapplication in Fall 2020 with 75 agencies participating



Wisconsin's NARCAN® Direct Program

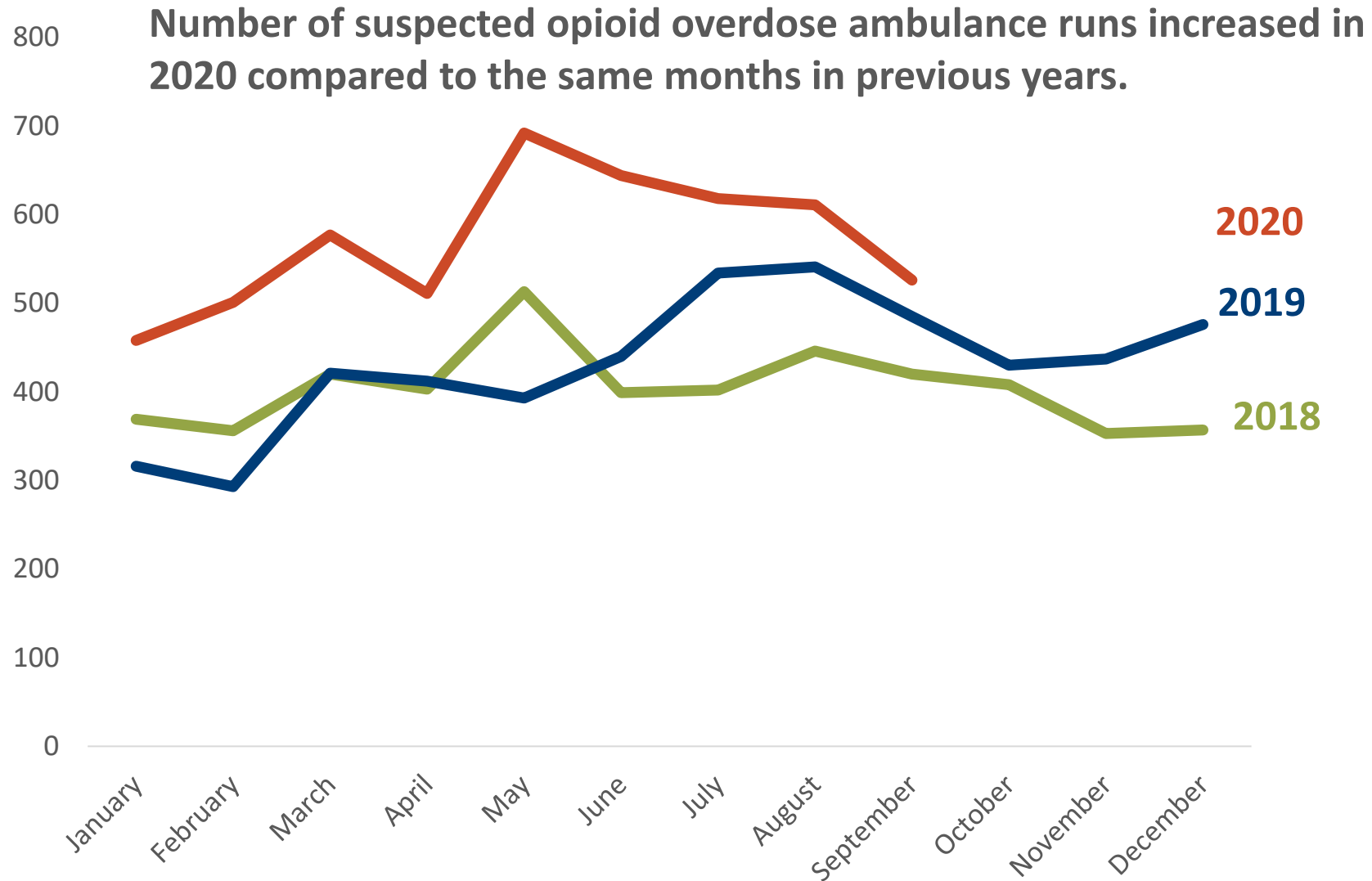


Naloxone Training-of Trainers (TOTs)



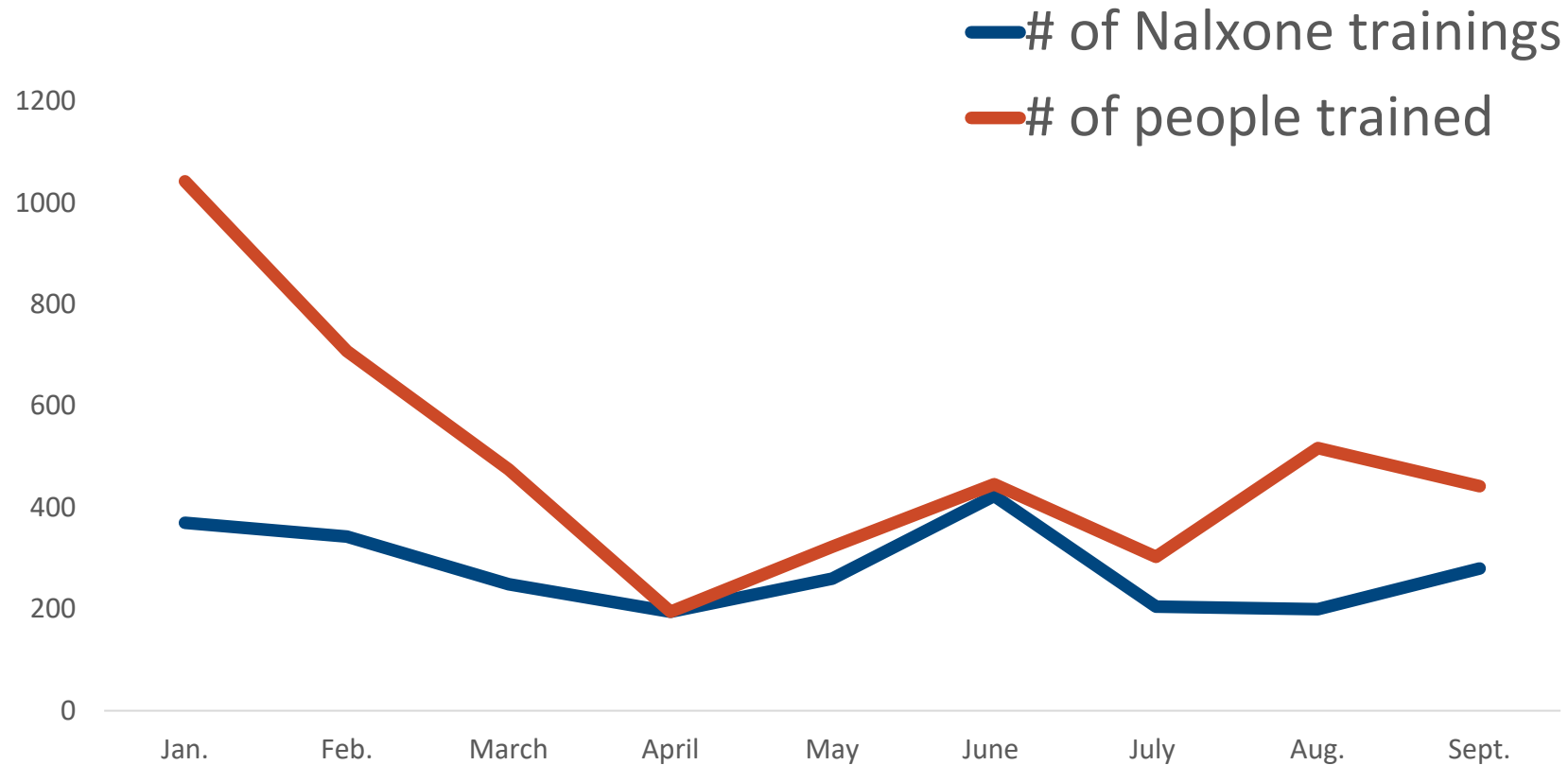
- Began providing naloxone administration TOTs in December 2019
- Developed an 11-minute video on how to respond to an overdose, including naloxone administration in March, 2020
- Began providing virtual TOTs in September of 2020

Impacts of COVID-19



Impacts of COVID-19

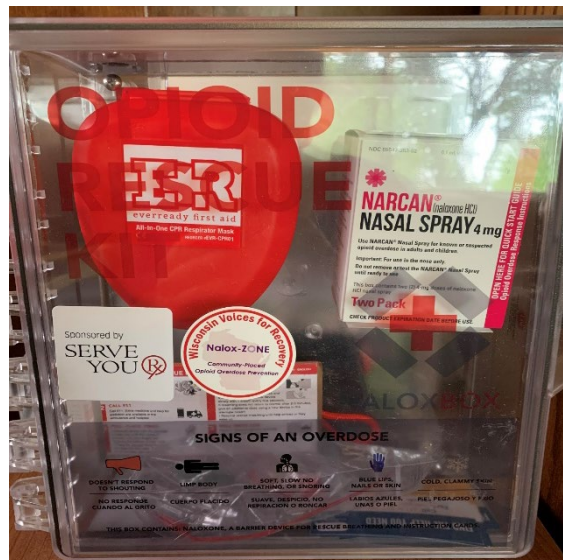
The number of naloxone trainings offered and the number of people trained by Narcan Direct agencies sharply declined in March and April, before rising again in June.



Remote Training and Access

Switched from in-person to virtual trainings

- Zoom, Skype, MS Teams, etc.
- Facebook Live
- Socially distanced in-person
- Video/Pre-recorded trainings



Switched to contactless distribution

- Mail
- Porch delivery
- Agency pick-up
- Nalox-boxes

Lessons Learned



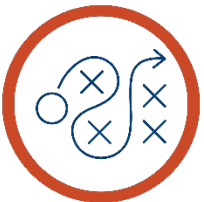
Diversify distribution locations



Foster strong partnerships



Know your audience



Be nimble so you can meet people where they are



Type in the Chat

What are the biggest barriers or disruptions to access to and delivery of overdose prevention and harm reduction services where you are.

Overdose Disparities Series: Indiana

March 24, 2021



Great Lakes (HHS Region 5)

PTTC

Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Indiana
Department
of
Health

OVERDOSE DISPARITIES SERIES, HHS REGION 5: CONTACTLESS OVERDOSE PREVENTION STRATEGIES IN INDIANA DURING COVID-19

CASSIDY MCNAMEE, MPH

• 3/24/2021

OUR MISSION:

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION:

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.



Cassidy McNamee, MPH

Naloxone Program Manager

- Division of Trauma and Injury Prevention

Grant Management

- First Responder Comprehensive Addiction and Recovery Act (FRCARA) Grant
- State Opioid Response (SOR) Grant
- Email: CasMcNamee@isdh.in.gov



Combatting Overdose Disparities

- Naloxone access
 - Where is naloxone access limited in our state?
- Stigma
 - Who and how are people effected by stigma?
- SSP Access/Harm Reduction supplies
 - What type of services work best in our communities?
- Community Programming and Partnership
 - Are the appropriate stakeholders at the table?



Indiana's Response



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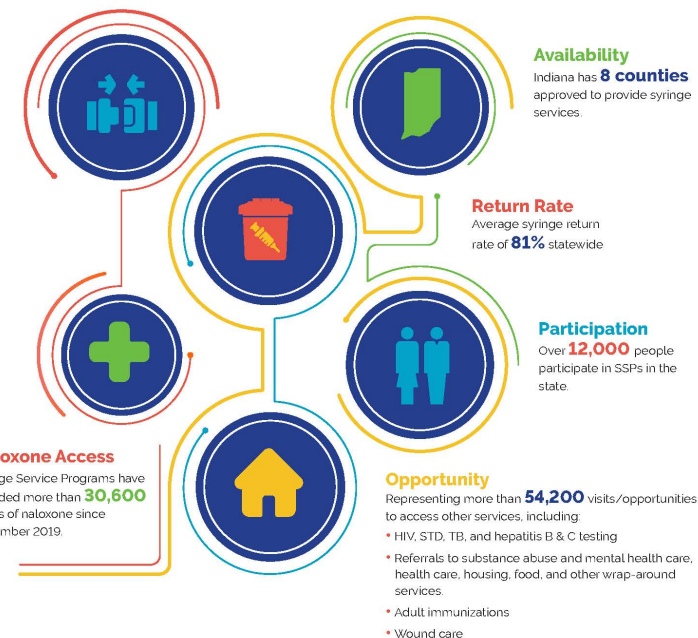
Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Indiana Department of Health Syringe Service Program DID YOU KNOW?



Syringe Service Programs:

- * Have been studied for 40 years and have been proven effective¹
- * Do not encourage starting or continuing with injection drug use, and in fact, are effective at reducing injection drug use and assisting people in their recovery²
- * Are public health programs open to anyone in need of new injecting equipment including those with diabetes and other conditions requiring syringes.



¹ Several studies have found that providing sterilized equipment to injection drug users substantially reduces risk of HIV infection, increases the probability that they will initiate drug treatment, and does not increase drug use. (National HIV/AIDS Prevention Strategy for the United States, 2010)

² Hagan H, et al. Reduced injection frequency and increased entry and retention in drug treatment associated with needle-exchange participation in Seattle drug injectors. J Subst Abuse Treat 2000; 19(3):247-52

Last reviewed and updated: January 2021 EC

<http://www.in.gov/isdh/27356.htm>

Naloxone and Syringe Service Programs

Naloxone

- Rural First Responder Agency Grant
- Available to 49 of the 92 Indiana counties
- Provides naloxone to first responders to use while on active duty
- Non-identifiable postcard survey with demographic data collected after an overdose event
- Local Health Department Grant
- Available to all 92 counties
- Provides doses for community distribution, program varies depending on the county

- **SSPs and Non-syringe service programs**
- Indiana currently has 8 active SSPs. These SSPs have also had the ability, when available, to aid in naloxone distribution to SSP participants.
- County HDs are also able to receive non-syringe harm reduction supplies, such as Band-Aids, cookers, condoms, straws, and hand sanitizer through a separate grant opportunity.
- More information: Erika Chapman, EChapman@isdh.in.gov



Project ECHO and Know the Facts Campaign

Project ECHO

- Statewide community-based ECHO project
- 16 participating counties
- Funding has covered anti-stigma promotions, implementing OFR teams, conducting naloxone trainings, purchasing NaloxBoxes, providing school-based overdose education, and expanding peer recovery support in the county
- More information: Klaudia Wojciechowska, KWojciechowska@isdh.in.gov

Know the Facts

- Statewide anti-stigma campaign
- Billboards, commercials, Colts games, Pacer games, radio ads, virtual advertising
- Focuses on 3 facts:
 - It is a disease.
 - There is treatment.
 - Recovery is possible.
- More information: Tony Toomer, Tony.Toomer@fssa.in.gov



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COVID19's Impact

- Local Health Departments were closed multiple times during 2020.
- There was misinformation around COVID19 and naloxone use.
- Naloxone trainings were cancelled.
- In-person treatment services were no longer an option.
- MAT dosage appointments became tricky.
- Community partners could no longer plan and collaborate in person.
- Indiana is also a very rural state, which has multiple barriers on its own.



Indiana's Response:

- Community drive-thru naloxone training in Clark County
 - https://www.wdrb.com/news/wdrb-video/clark-county-health-department-hosting-free-drive-thru-narcan-training/video_3f5dcce4-b3ae-5004-b32c-376cb8295513.html
- Telehealth service options for individual and group counseling sessions
- Curbside dosing when applicable
- Curbside naloxone pickup
- Virtual naloxone trainings
- Implementation of more NaloxBoxes
- ECHO counties rewarded for an additional year of funding to continue paused activities
- Indiana's Department of Homeland Security came out with naloxone/COVID19 guidelines



Naloxone Programs at the state level

Rural First Responder Agency Grant

- The grant continued “business as usual” throughout 2020. Over 3,000 doses of naloxone were shipped out to grantees last year. The program continued to advertise the opportunity and accept applicants all year.

- Local Health Department Grant

- The state was able to continue “business as usual” except for some of the county health departments being closed for periods of time. The state shipped out over 23,000 doses of naloxone to county health department grantees during 2020. The LHDs were still able to distribute after making changes to their original distribution plans. Some LHDs were more negatively affected than others. Applicants were accepted all year.



Lessons Learned and Other Outcomes

- The COVID19 pandemic exemplified some of our current barriers and gaps in community services.
- Community organizations were able to find creative ways to go virtual and have now voiced how they will continue these more adaptable services post-pandemic to reach more audiences.
- Education around addiction and mental health became an important and fore-front topic during the pandemic.





Questions



First Responders Can Safely Administer Naloxone during the COVID-19 Pandemic



Naloxone is a highly effective opioid overdose-reversing drug that saves thousands of lives in the United States. By taking universal safety precautions, all law enforcement, firefighters, and EMS providers can safely administer **naloxone for overdose reversal**, even during the COVID-19 pandemic.

Steps to respond to a suspected opioid overdose while reducing risk of COVID-19 exposure:

- 1 Use Personal Protective Equipment (PPE) such as gloves and face protection, as most first responders are doing for all emergency calls during the COVID-19 pandemic.
If the person is suspected or confirmed to have COVID-19 or if you see illicit drugs in powder or liquid form, put on additional PPE as recommended by CDC.
- 2 If possible, position the person's head facing away from you.
- 3 Administer naloxone following the instructions for use (the Evzio auto-injector provides voice instructions).
- 4 Start other life support measures if needed and if trained to do so, using appropriate precautions if the person is suspected or confirmed to have COVID-19.
- 5 Stand up and step back to a distance of at least 6 feet as the person regains consciousness.
- 6 Assess the person, introduce yourself, and explain to them what led to naloxone administration, effects of naloxone, and importance of seeking follow-up care.
- 7 When safe, remove PPE following appropriate safety procedures. Avoid touching your eyes, nose, and mouth.
- 8 Wash your hands with soap and water for at least 20 seconds. If soap and water are not available and you had no skin contact with illicit drugs, use an alcohol-based hand sanitizer with at least 60% alcohol.

Assess your safety when you arrive on the scene.

Before you leave, make sure the person receives professional medical follow-up.

HHS encourages the use of PPE while administering all forms of naloxone.



Scan the QR code or visit hhs.gov/opioids for resources on how to respond to an opioid overdose.

Resources

Overdose Deaths Accelerating During COVID-19
Expanded Prevention Efforts Needed

<https://www.cdc.gov/media/releases/2020/p1218-overdose-deaths-covid-19.html>

Increase in Fatal Drug Overdoses Across the United States Driven by Synthetic Opioids Before and During the COVID-19 Pandemic

<https://emergency.cdc.gov/han/2020/han00438.asp#>

First Responders Can Safely Administer Naloxone during the COVID-19 Pandemic

<https://www.hhs.gov/opioids/sites/default/files/2020-09/opioids-naloxone-one-pager.pdf>

State Reports: Issue brief: Reports of increases in opioid- and other drug-related overdose and other concerns during COVID pandemic

<http://www.asapnys.org/wp-content/uploads/2020/07/Issue-brief-Reports-of-increases-in-opioid-related-overdose-and-other-concerns-during-COVID-pandemic.pdf>