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Prevention Technology Transfer Center Network  
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# Engaging Emergency Medical Services in Naloxone Distribution

Great Lakes PTTC

January 12, 2022

# Our Facilitator for Today's Webinar



## **Erin Russell, Chief**

Center for Harm Reduction Services  
Maryland Department of Health

EDC Technical Adviso

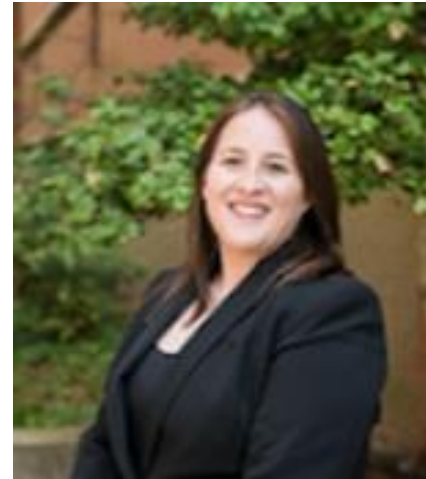
# Our Panelists for Today's Webinar



**Anthony Pantaleo, BAS**  
Paramedic I/C, Bureau of  
EMS, Trauma, and  
Preparedness, Michigan  
Department of Health and  
Human Services



**Stephanie Busch, BS,  
AEMT, CPST**  
Injury Prevention  
Manager, AEMT, Vermont  
Department of Health



**Becca Schmitt, MSc**  
Data and Performance  
Analyst Howard County  
Department of Fire and  
Rescue Services



**David Sabat, MA, NSP**  
Battalion Chief of EMS  
Operations, Howard  
County Department of  
Fire and Rescue  
Services

# Objectives

1. Define the role for EMS in overdose prevention
2. Identify core elements of programs in three states including lessons learned
3. Describe how EMS leave-behind can be supported by policy, naloxone access laws, and partnership with public health agencies.

*“As the severity of the opioid epidemic escalates, it is essential that we find innovative methods of reducing the morbidity and mortality associated with opioid overdose and the cascading negative consequences for the families and communities impacted by this crisis” -Becca Scharf*

# Policy Brief

- Interviews with 3 successful state program leads
- Background research on leave behind programs and targeted naloxone
- Literature review of EMS roles in overdose prevention
- Published October 21, 2021 by the Great Lakes PTTC



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## Engaging Emergency Medical Services in Naloxone Distribution

Emergency Medical Services (EMS) personnel are on the front lines of the overdose crisis.

In 2021, the CDC reported a record 94,000 overdose deaths—an increase of 30% from January 2020 to January 2021.

Naloxone safely and effectively reverses an opioid overdose, can be used by lay individuals, and, if widely available, will have an impact on overdose mortality. EMS have been using naloxone for decades when treating unresponsive patients. Current community-based naloxone distribution strategies include syringe service programs, overdose education, and naloxone distribution sites established through expanded naloxone access laws, by public health agencies, law enforcement overdose response, and pharmacies by standing order. In addition, the CDC advises health care providers to offer naloxone when other prescriptions increase risk of overdose. Unfortunately, despite tremendous advances in access, the U.S. is experiencing a national shortage of this life-saving medication.

*"As the severity of the opioid epidemic escalates, it is essential that we find innovative methods of reducing the morbidity and mortality associated with opioid overdose and the cascading negative consequences for the families and communities impacted by the crisis."*  
*Becca M. Scharf, MSc, Data and Performance Analyst, Howard County Department of Fire and Rescue Services*

### Reducing overdose deaths

The greatest impact on overdose mortality is achieved through targeted naloxone distribution. Furthermore, people who have recently experienced an overdose should be prioritized because of the unfortunate reality that people who have nearly died of an overdose have a high chance of overdosing again, and that one being fatal. According to the U.S. Office of the Surgeon General, "increasing the availability and targeted distribution of naloxone is a critical component of our efforts to reduce opioid-related overdose deaths and, when combined with the availability of effective treatment, to ending the opioid epidemic."

EMS providers are well-positioned to improve access to naloxone. The "EMS leave-behind" initiative is a promising method of bringing naloxone to those who need it most. Through this program, EMS providers give a naloxone kit directly to people who experience an overdose, their social network, and their family immediately after the event. The goals of an EMS leave-behind program are to improve the patient's experience and self-efficacy to use naloxone in the event of an overdose, reach patients with this critical information in their home environments, and improve patient awareness of community resources for substance use disorder.

[www.pttcnetwork.org/greatlakes](http://www.pttcnetwork.org/greatlakes)

# Naloxone

- Quickly and effectively reverses an opioid overdose
- Used by EMS for decades to stop overdose death
- Approved by the FDA for community distribution; effective when used by lay individuals witnessing an overdose event

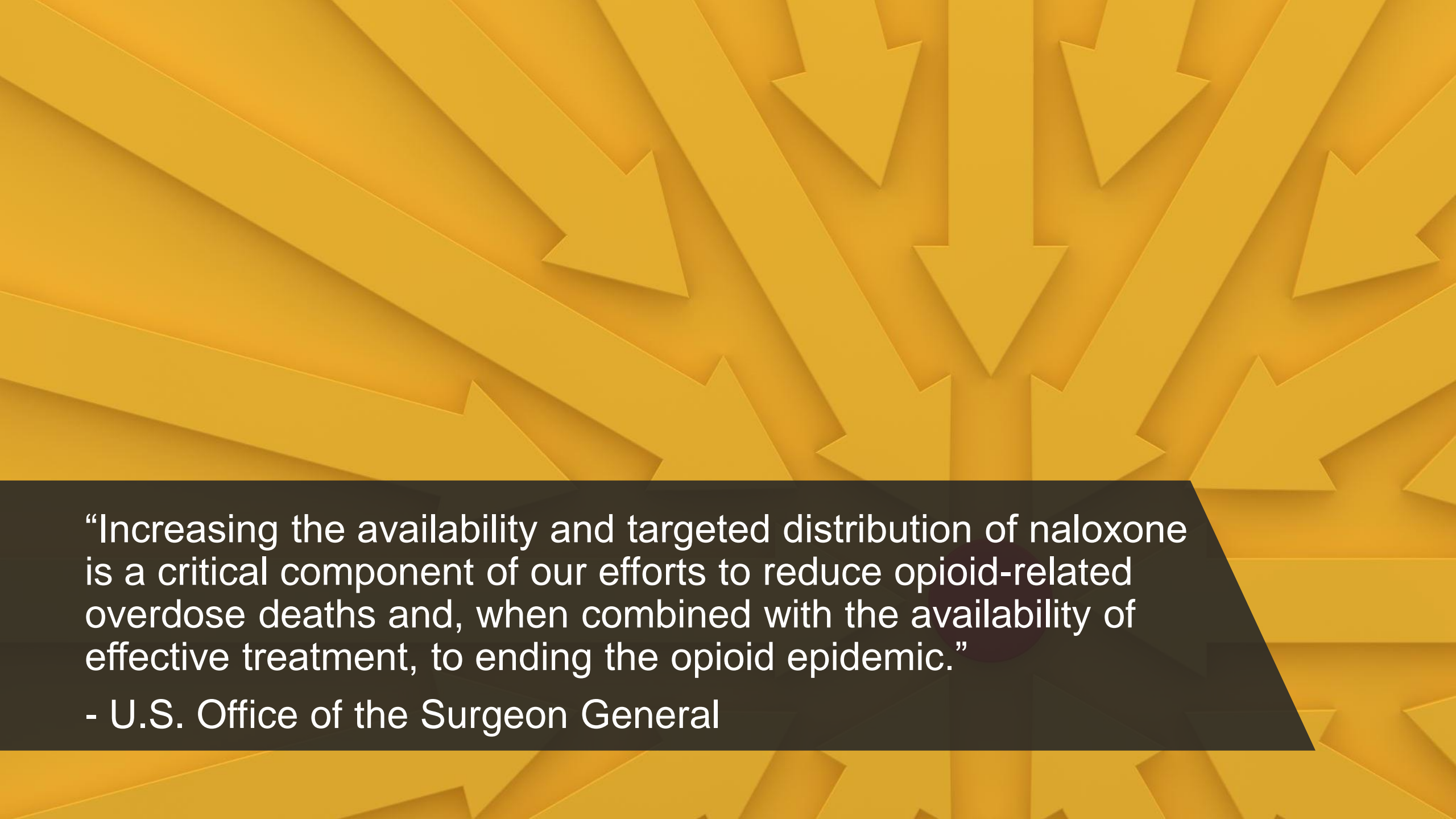
*The greatest impact on overdose mortality is achieved through **targeted** naloxone distribution to people likely to experience an overdose.*



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“Increasing the availability and targeted distribution of naloxone is a critical component of our efforts to reduce opioid-related overdose deaths and, when combined with the availability of effective treatment, to ending the opioid epidemic.”

- U.S. Office of the Surgeon General

# Targeted Naloxone

- Targeted naloxone = reaching individuals who are identified as priority because of their history, experience, lifestyle, or reaching a community because of its geographic location
- Targets are based on research and evidence
- People who are actively using drugs are the ideal target population for naloxone
  - People who have recently experienced an overdose should be prioritized because of the unfortunate reality that people who have nearly died of an overdose have a high chance of overdosing again, and that one being fatal



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# Naloxone Leave Behind by EMS



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# Naloxone Kit Items

- 2 doses of Narcan Nasal Spray or injectable naloxone with intramuscular syringes
- Rescue breathing shield
- Gloves
- Educational materials



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# Leave Behind Program - Foundation

1. Establish authority to dispense in the EMS provider scope of practice;
2. Ensure legality in your state's naloxone access laws for community distribution;
3. Obtain kit supplies;
4. Identify a point person for coordination, training, and data collection; and...
5. Work your partnerships!



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# Purpose

- EMS improves the health and wellbeing of their communities and are the first point of contact for overdose survivors at high risk of overdose death
- Presents an opportunity to **target** naloxone to a high-risk population (people who have survived an opioid overdose)
- Through positive interaction with patients, EMS can increase the likelihood that people will call 911 when they witness an overdose, saving more lives.



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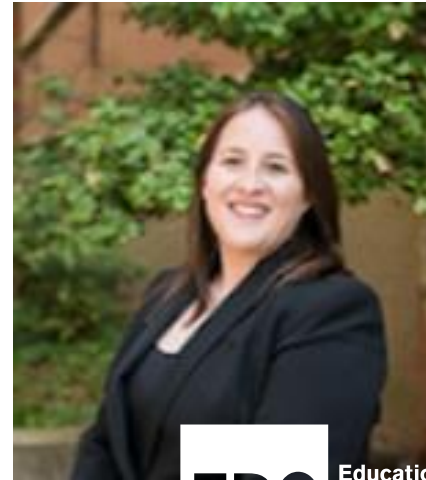
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# Michigan

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# Vermont

**Stephanie Busch, BS, AEMT, CPST**

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# Maryland

## **Becca Scharf, MSc**

Data and Performance Analyst  
Howard County Department of Fire and Rescue Services

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## **David Sabat, MA, NSP**

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# Discussion



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# POLL



Who is ready to start pursuing an EMS Naloxone Leave Behind Program?

- A. Yes – already on it!
- B. Need more information – TA please!
- C. EMS needs to get on board first!
- D. I don't think this will happen anytime soon here!




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# PTTC Resource

<https://pttcnetwork.org/centers/great-lakes-pttc/product/emergency-medical-services-naloxone-distribution>



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# Questions?

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