## Innovative Community Outreach Strategies for Overdose Education and Naloxone Distribution

Gabi Deaton, MSW, Prevention Specialist Coordinator, University of Kentucky April Young, PhD, Professor, University of Kentucky

June 14, 2023







#### Upon completion of this activity, participants will be able to

Describe strategies to increase community access to overdose education and naloxone.

Identify non-traditional venues for overdose education and naloxone distribution.

Discuss community engagement approaches for increasing overdose education and naloxone distribution.



**HEALing Communities Study** 

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April Young, PhD Professor University of Kentucky















#### **Financial Disclosures**

The presenters have no conflicts of interest to disclose.



#### **Overview**

- HEALing Communities Study (HCS)
- Community Engagement in HCS
- Overdose Education and Naloxone Distribution (OEND) in HCS
- OEND Outreach Program



## HEALing Communities Study Overview

#### **HEALing Communities Study (HCS)**

#### **September 2018 – NIH funding opportunity:**

To reduce opioid overdose deaths in highly affected communities by implementing a set of evidence-based practice strategies across healthcare, behavioral health, justice, and other community-based settings

Funded 4 states: Kentucky, Massachusetts, New York, and Ohio to work with 67 rural and urban communities highly impacted by the opioid epidemic



https://youtu.be/NiTMDLghBBE



#### What is the goal of HCS?

To reduce opioid overdose deaths by 40% through implementation of evidence-based practice (EBP) strategies

- Increase overdose education & naloxone distribution
- Increase access to medications for opioid use disorder
- Increase safer opioid prescribing & dispensing practices



## What makes HCS different than other intervention studies?

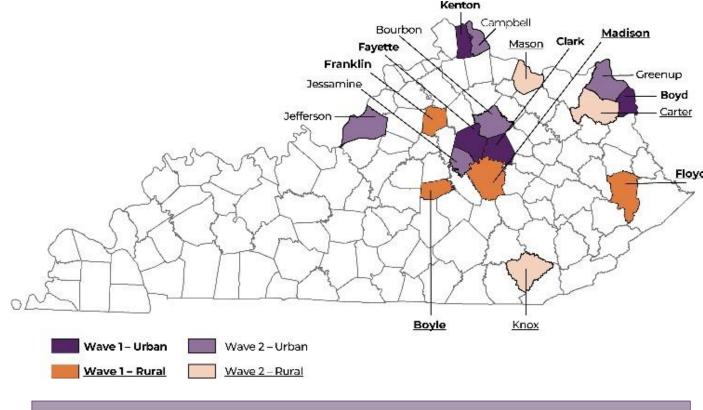
This a study of historic proportions.

 More importantly, it is designed to be implemented in partnership with local communities.

 The vision is that the implemented strategies found to be effective in this study will be a model for other communities across the country to consider.

#### **KY HCS Communities**

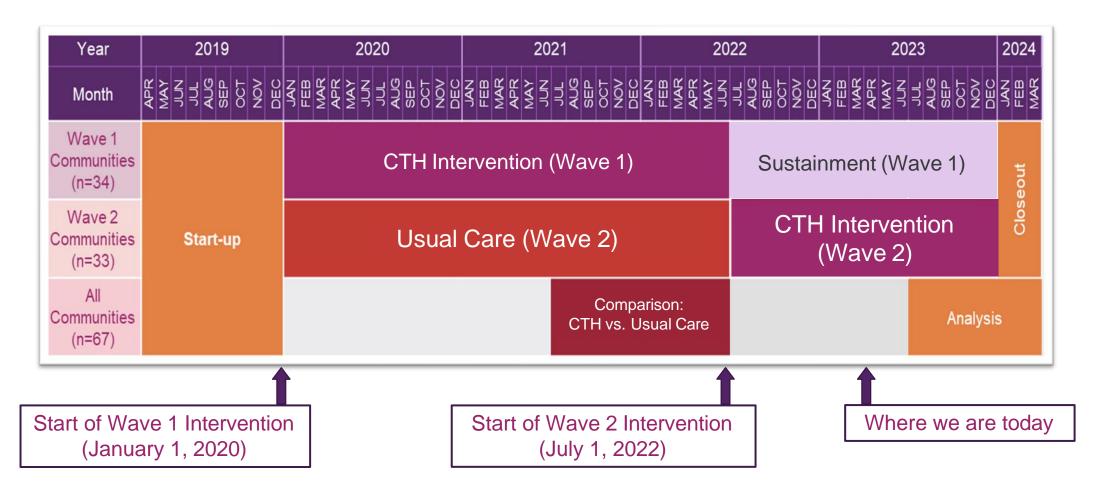
- 16 Counties
- The Kentucky HCS counties had a total 764 opioid-related overdose deaths in 2017.
- The Kentucky HCS counties had an average rate of 45.7 opioid-related overdose deaths per 100,000 (Compared to 14.9 per 100,000 for the U.S.)



The served area encompasses over 1.8 million people (approximately 41% of KY's population).



#### **HEALing Communities Study Timeline**





## Communities that HEAL (CTH) Intervention Components

#### **Communities that HEAL Intervention:**

A community-engaged intervention is a comprehensive, datadriven approach to reducing opioid overdose deaths.

**Community Engagement** 

Opioid-Overdose Reduction Continuum of Care Approach (ORCCA)

Communication Campaign



#### Communities Months 8-12 That HEAL Months 4-7 5 Months 3-5 Intervention 4 Months 2-3 Implement & 3 Monitor Months 1-2 Community Action Community Develop initial **Planning Profiles &** implementation Getting Data plans for selected Organized Getting **EBP** strategies Develop ORCCA-Dashboards Started specific goals for Preparation Implement Discuss ORCCA the community ORCAA EBP Create community menu options and strategies Discuss and Establish a profiles Identify and decision prioritize EBP structure for designate the procedure for Troubleshoot and Create data strategies that working with HCS **HEALing** selecting EBP provide technical dashboards align with coalitions Communities strategies assistance community goals Study (HCS) Map the existing Recruit champions, Develop Plan, implement, coalitions and services and Establish introduce datadistribution plan and monitor initial coalition programs to community action driven decisionfor Campaign 1 Campaigns 2 and members ORCCA plans making approach, 3 in partnership and initiate review Conduct Engage HCS with HCS of Landscape landscape coalitions on data coalitions Analysis data with analysis visualizations designated HCS Train research site Implement coalitions staff on the CTH Campaign 1 in Train HCS intervention partnership with coalitions coalitions Initiate preliminary Introduce ORCCA activities for menu and communication evidence-based campaigns practices (EBPs) Promote sustainability Support sustainability Support development of Sustainability through local hiring and through training, TA, and coalition-driven Planning training learning collaboratives sustainability plans



### Community Engagement

#### **Community Engagement**

- Engages those most affected and involved
- Honors community expertise and leadership



Assists with making connections and creating partnerships

#### **Community Engagement Process in Kentucky**

 Established an overarching Community Advisory Board

 Partnered with Kentucky Agency for Substance Abuse Policy (KY-ASAP)

Engaged in community listening tours

Built HCS-designated coalitions



#### **KY ASAP Boards**

- Statewide network of local ASAPs
- Established in 2000 to address substance use and related harms
- Local ASAPs have community-driven strategic plans informed by local needs assessments.
- Local ASAPs apply for and distribute funding for public health and/or substance use prevention services locally.



#### **Listening Tour**

- Began with meetings with ASAP Board representative to the HCS Community Advisory Board
- Solicited additional recommendations of other individuals to meet, allowing connections to "snowball" over time.
- Searched online for local treatment providers and leaders in the community to identify stakeholders and to familiarize ourselves better with the local context
- Developed a protocol to talk with people who use drugs served by the local syringe service program



## 321 community voices

The first half of 2022 included a listening tour to help the HCS-KY team prepare for the start of the community engagement process in 8 new counties. The listening tour helped us better understand and identify key stakeholders in each community.

# Engaging people who use drugs

## Share your experiences to help your community!

#### Coming soon!

A major project called the HEALing Communities Study will be launching this summer in Mason County. The project's goal is to reduce opioid overdose deaths by greatly expanding overdose education with naloxone distribution and improving access to medications for opioid use disorder.

Before the project launches, we want to learn from people who have experience using opioids so that we can better understand issues important to the community.

#### We would love to talk with you.

The conversation is <u>strictly confidential</u>. The project has a federal certificate that prevents information from being released even under a court subpoena.

We can talk by phone, online, or in-person.

A \$20 giftcard to Walmart can be provided to compensate you for your time.

#### **Coalition Membership**

- One coalition per county, with subcommittees as needed
- In Wave 2, membership was limited to two people per organization
- Coalition chairs and champions (Waves 1 & 2) and coalition members (Wave 2) were paid

#### Wave 1



#### Wave 2

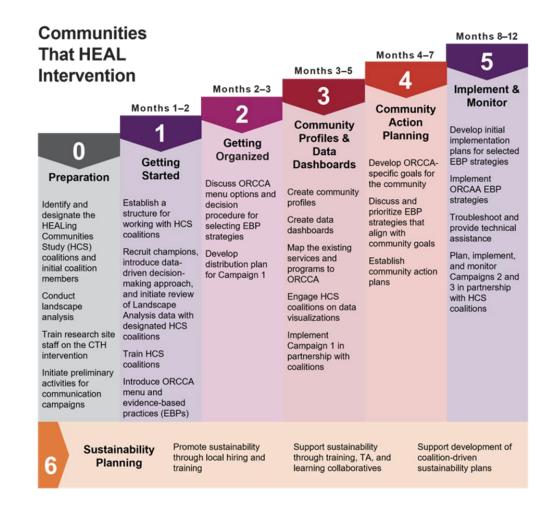


<sup>a</sup> Numbers do not equal the total divided by the number of counties due to the turnover in membership. The overall number reflects the total of unique members or agencies involved and the average reflects average coalition size and agencies represented at any given time.



#### **Coalition Engagement**

Coalitions and their workgroups have met **497 times** for a total of **620 hours** to date.<sup>a</sup>



<sup>a</sup> From January 2020 to June 30 2022, From July 1, 2022 to May 24, 2023 (ongoing)



#### **ORCCA Evidence-Based Practices**

Communities will select strategies within the following Evidence-Based Practices (EBPs):

- 1) Opioid overdose prevention education and naloxone distribution (OEND) in high-risk populations
- 2) Effective delivery of medication for opioid use disorder (MOUD) maintenance treatment, including agonist/ partial agonist medication, and including outreach and delivery to high-risk populations
- 3) Safer opioid prescribing and dispensing



#### **ORCCA Evidence-Based Practices**

Communities will select strategies within the following Evidence-Based Practices (EBPs):

1) Opioid overdose prevention education and naloxone distribution (OEND) in high-risk populations



# Overdose Education and Naloxone Distribution (OEND) in Wave 1

#### **NaloxBoxes**

 137 NaloxBoxes were installed at facilities in seven Wave 1 counties

 Locations included Goodwill, gas stations, pharmacies, hotels

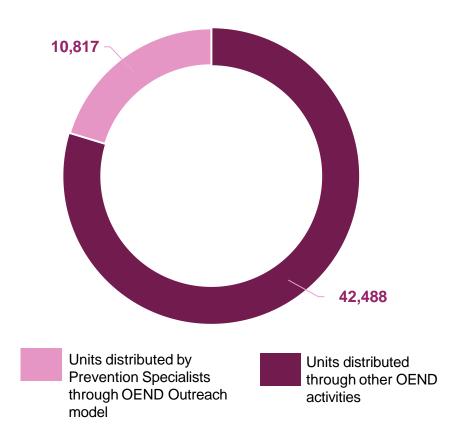






#### Overdose Education and Naloxone Distribution

- Entered in contractual agreements with 178 agencies
- Established mail-order OEND program for those on probation, parole, and pre-trial services
- A total of 53,305 units distributed by June 30
- Of those, 10,817 were distributed by our Prevention Specialists through our OEND Outreach model





#### Addressing Stigma around OEND









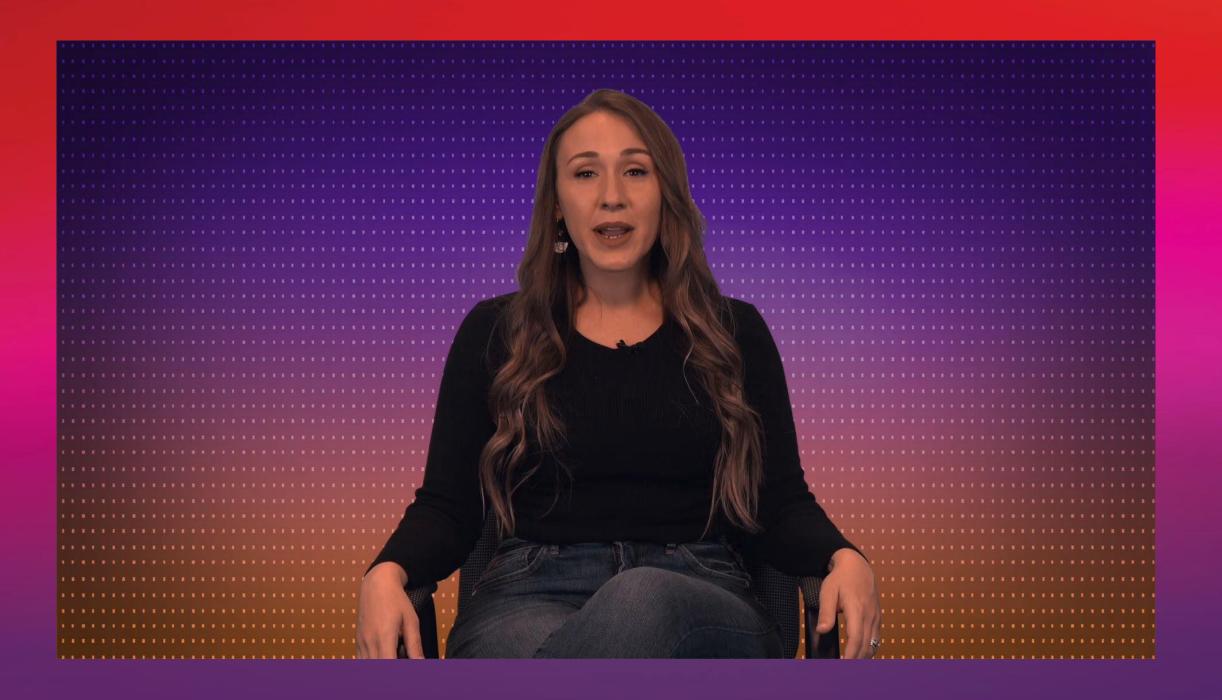








# HEALing Communities Study OEND Outreach Model



## Overview: Direct Delivery of Overdose Education and Naloxone Distribution (DD OEND)

#### Goals:

- a) Empower all community members to be a first-responder and save a life
- b) To normalize carrying naloxone

#### How:

- a) A trained prevention specialist providing overdose education and naloxone distribution community-wide.
- b) Outreach in high-risk communities, at high-risk venues, and at community events.





#### **OEND Training Example**

#### You may be at increased risk of opioid overdose:

- If you are sick or have acute or chronic medical problems
- · If you mix drugs or use alone
- If you have recently experienced opioid withdrawal
- · If you drink alcohol heavily or smoke

#### To reduce the risk of overdose:

- Always use with a friend or around other people, never alone
- Try to buy from the same dealer. If you can't, talk to others who have bought from that dealer, and test the strength of the drug before you do the whole amount
- Avoid mixing drugs, especially opioids or other drugs with alcohol
- · Take prescriptions only as directed
- Develop an overdose plan with friends or partners

#### Now that you have naloxone

Tell someone where it is and how to use it!

For locations to purchase naloxone visit: http://HealTogetherKy.org

Scan the QR code to watch the How To Use Naloxone educational video:



#### **Common opioids**

Generic	Brand Name
Buprenorphine	Suboxone, Subutex, Zubsolv, Butrans
Codeine	Tylenol with Codeine, Tylenol #3
Fentanyl	Duragesic
Hydrocodone	Vicodin, Lortab, Norco
Hydromorphone	Dilaudid
Oxycodone	Percocet, OxyContin, Roxicodone, Xtampza ER
Meperidine	Demerol
Methadone	Dolophine, Methadose
Morphine	MSContin
Oxymorphone	Opana

#### ILLICIT DRUGS

Fentanyl, carfentanil, and related chemicals

#### Heroin

Other illicit drugs may be tainted with opioids, even if they look like prescription drugs or you are told they are something else.



HEALing Communities Study Kentucky

#### Opioid Overdose Recognition and Response

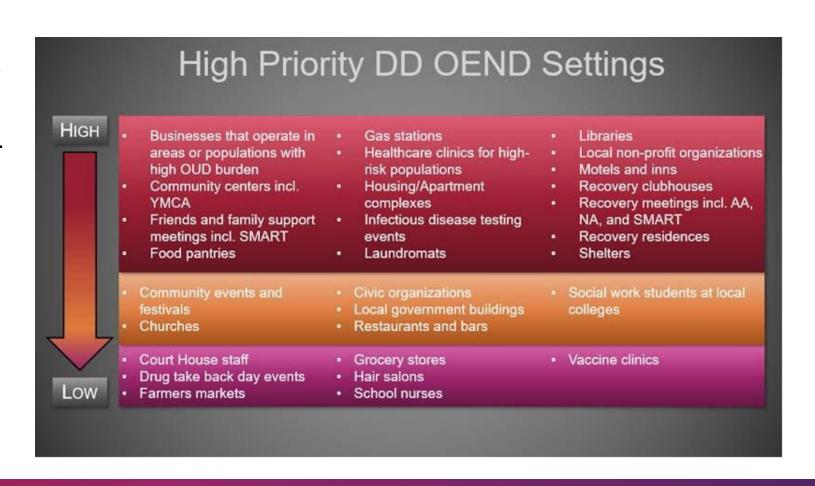


A GUIDE FOR CONCERNED COMMUNITY BYSTANDERS

**HEALing Communities Study — Kentucky** 

#### **Securing OEND Locations**

- Focus on high priority settings.
- Contact the business/agency owners or managers via phone, e-mail or drop in.
- Offer to train staff, clients, or customers.
- Set up outside an organization and provide directly to the general public.
- Community Events
- Businesses & agencies
- Pop Up settings





#### **Example Locations**

#### Figure 1. Example events at which to offer OEND

- Substance use-related events such as recovery rallies, recovery resource fairs, Overdose Awareness Day, Drug Takeback Day, etc.
- Street festivals
- Community movie nights
- Parades (4th of July, Memorial Day)
- County fairs
- Farmer's markets
- LGBTQIA+ Pride festivals
- Music festivals and concerts
- ATV, motocross, and off-roading events
- College campus events (Health, sporting events)
- Health fairs
- HIV/HEP C testing sites or events



DD OEND at NKY Pride in Kenton County, Wave 1

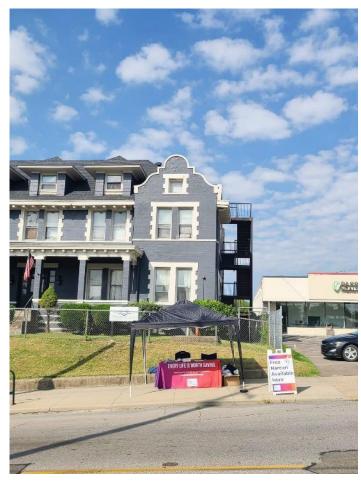








#### **Example Locations**



DD OEND set up in Kenton County, Wave 1

#### Figure 2. Possible location for Pop-up OEND

- Businesses near venues that serve high-risk individuals (i.e. soup kitchen, homeless shelter, substance use treatment facility, syringe service program)
- Gas stations and truck stops
- Fast food restaurants
- Dollar stores
- Grocery stores
- Thrift stores
- Check cashing and pay day lending businesses
- Outside main office of housing complex or mobile home
- Libraries
- Pawn shops
- Parks
- Social security and unemployment offices
- DMV's
- Drug testing agencies
- Adult entertainment venues
- Plasma and blood donation centers
- Fire departments









#### Distribution in Wave 1 and Wave 2

## Wave 1

12,196 units

**Boyd County** 

**Boyle County** 

Clark County

Franklin County

Floyd County

Fayette County

Kenton County

Madison County

**April 2021** 

August 2022

## Wave 2

9,604 units

**Bourbon County** 

Campbell County

**Carter County** 

**Greenup County** 

**Jefferson County** 

Jessamine County

**Knox County** 

Mason County

September 2022

**April 2023** (ongoing)

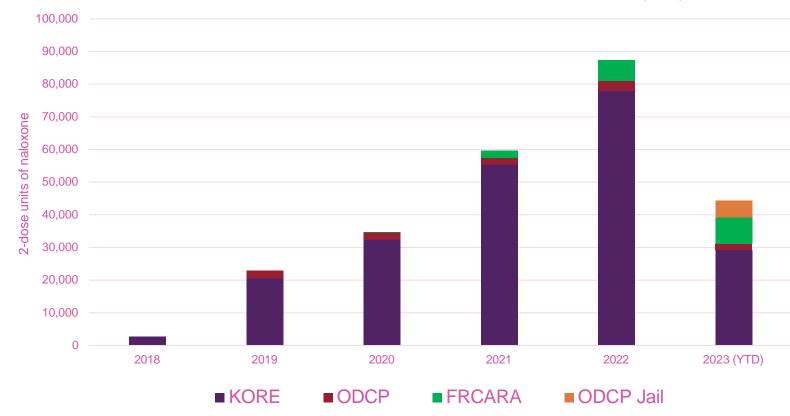
The numbers reflect the units distributed by HCS Prevention Specialists.



#### **HCS OEND Outreach in Context**

- We are currently averaging
   150 OEND outreach recipients per month per county in Wave 2.
- At this volume, a statewide program could reach approximately 216,000 people annually.
- This is **more than double** the statewide distribution from all state programs in 2022.

#### Naloxone Distribution in Kentucky by Year



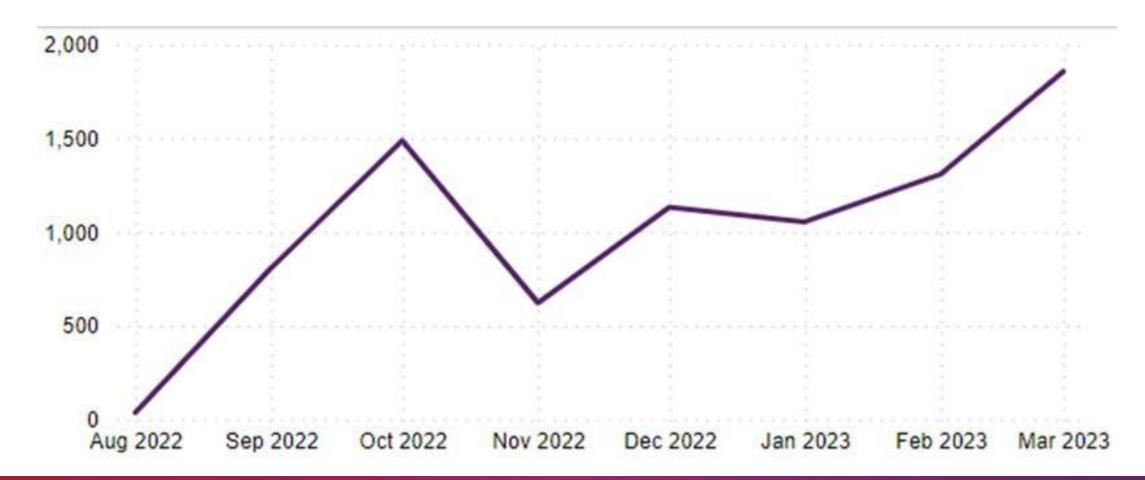






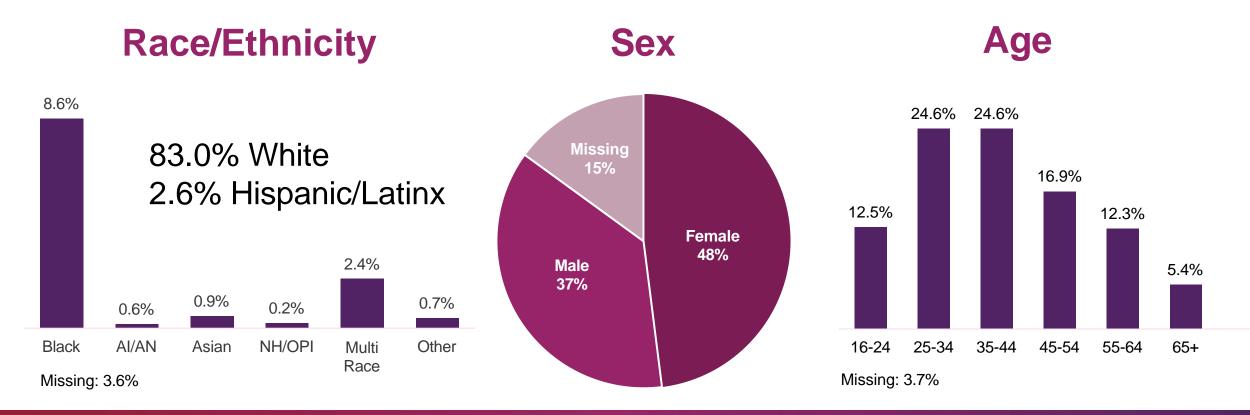
Events are ongoing. Numbers reflect data as of 4/26/23.

### Wave 2 OEND Outreach Participants by Month





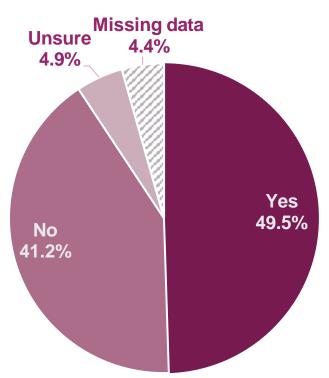
### **Wave 1 OEND Outreach Recipients**



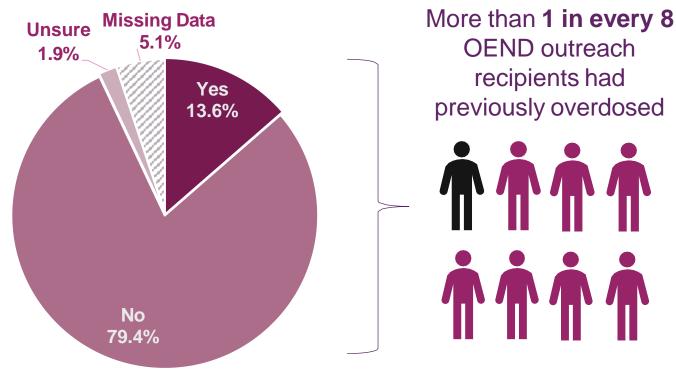


# Wave 1 OEND Outreach Recipients' Experience with Overdose

Percent of OEND outreach recipients who reported witnessing an overdose



Percent of OEND outreach recipients who reported that they have overdosed



#### **OEND Process**

- Identifying "Pop Up" locations.
- Offering food or swag items.
- Becoming a "constant" in the community.
- Utilizing social media engagement (Facebook, Instagram).
- Focusing on settings that reach persons with SUD.
  - Recovery events, recovery housing, etc.
- Creating community partners to expand the services.
  - Target 4 offering HIV/HEP C Testing, Soup Kitchens while offering meals



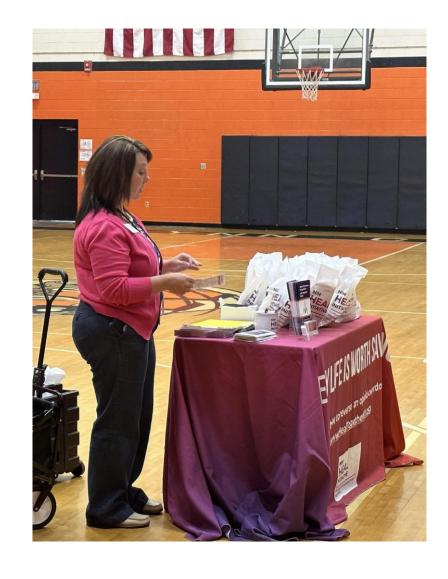




#### Stories from the field

"After offering OEND outreach at a subsidized housing complex, they experienced an overdose. It happened to be a teenager and they used some of our Narcan to save his life! They also agreed for us to place a NaloxBox in their 24-hour laundromat on site."

Danielle Morgan, Knox County Prevention Specialist

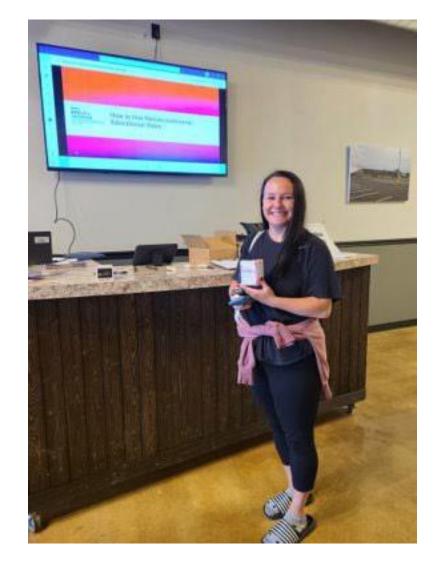




#### Stories from the field

"Meet Jordan. Jordan participated in OEND outreach at a recovery meeting. One week later, she overdosed. Her friends were able to use the HEAL naloxone to save her life. She then entered long term treatment. She has now been in remission from OUD for over 1 year and expecting her first child."

-Gabi Deaton, Prevention Specialist Coordinator



Wave 1, Kenton County



#### Stories from the field

"A quick follow-up -- The naloxone used on the man in this news story was our naloxone!! A man that frequents the flea market got those units from Lacey a few weeks ago. Lacey is at the flea market today and he just stopped in to tell her the story. This is the second time someone from the flea market has used our naloxone to save someone." - Misti Salyers-Dunford

## Parents and school staff help save man's life after overdose in school pick up line



Man overdoses in school pick up line; parents and school staff help save his l

"We had innocent bystanders who happened to have Narcan on them," Schelling said. "If these people might not have come by or might not have had Narcan on them, I don't know if we'd be sitting here talking because there might not have been a good outcome."



### **OEND Challenges**

- Stigma
  - Substance Use Disorder
    - "It's not a disorder! It's a choice."
    - "They just weren't raised properly."
  - Free Naloxone
    - "You should be giving out free EpiPens."
    - "I would just let them die!"
    - "They're just going to do it again"
    - "You're going to hell for this!"
  - Medications for Opioid Use Disorder
    - "You're not really sober."
    - "No one in a 12-step program will sponsor you."



### **OEND Challenges**

- Securing OEND Outreach Locations
- Weather (outdoor locations)

#### Solutions:

- Utilizing local coalition members & personal connections.
- Personal visits to potential OEND outreach locations.
- Scouting



OEND at the Pride Festival in Jefferson County, Wave 2



### **Staffing for OEND Outreach**

#### Skills / Knowledge / Abilities

- Strong empathy skills and work ethic, a high level of professionalism and integrity, and respect for dignity of people who use drugs,
- Appreciate and respect the cultural, spiritual beliefs and practices of individuals in the criminal legal system, their families, and criminal legal system staff.
- Candidates will also be required to follow HIPAA and privacy practices.

#### **Preferred Education/Experience**

- High School graduate or GED
- One year of experience working with individuals with substance use disorder, training, education, research, or project coordination.



### **Job Duties**

- Provide overdose prevention training and naloxone to individuals and organizations seeking education.
- Engage and support clients with problem-solving and promotion of local services/resources
- Assist in stigma reduction through training and educational efforts.
- Research, identify and promote credible information and options on needed social services.
- Assist with data collection and interpretation.
- Travel throughout participating communities as needed.



#### Cost

	1 FTE	0.50 FTE
Naloxone		
Naloxone cost per two-dose unit	\$45.70	\$45.70
Number of naloxone units distributed per week*	40	20
Annual naloxone distribution estimate	2000	1000
Labor		
Peer Support (Harm Reduction Outreach Specialist)†	\$48,163	\$24,081
Print materials		
Brochures (naloxone brochure, resource guides, etc.)‡	\$660	\$330
Mileage		
Annual reimbursement cost	\$1,463	\$731
Total non-naloxone costs (labor, print material, mileage)	\$50,286	\$25,142
Total naloxone costs	\$91,400	\$45,700
Total estimated annual cost for OEND outreach program	\$141,686	\$70,842

FTE = Full-time equivalent. Annual naloxone distribution estimates assume events can be held 50 weeks out of the year.

<sup>\*</sup>Naloxone units distributed per week is estimated based on the units distributed by Prevention Specialists employed by the HEALing Communities Study.

<sup>†</sup>Salary source: Mental Health and Substance Abuse Social Workers (NAICS 21-1023) median salary from May 2021 Occupational Employment and Wage Statistics (OEWS) Estimates for Kentucky Bureau of Labor Statistics, Department of Labor.

<sup>‡</sup>Print materials cost estimate assumes 1 brochure is distributed per person trained, and each brochure costs \$0.33 to print.

Mileage = Federal standard mileage reimbursement rate (2023) of \$0.65 X estimated miles traveled per week (3 events at 15 miles/event)

### **Supply cost estimates**

Supplies (optional)	Est. cost
Tablet (i.e., for data reporting)	\$500
Outdoor event equipment	\$300
Table and tent	\$150
Signage	\$150
Food (e.g., sodas, snacks for events)§	\$2,000
Giveaway items (e.g., pens, backpacks, chap sticks, etc.)	Variable

<sup>§</sup>Food cost estimate assumes snacks/drinks come to \$1.00 per person trained.







#### Cost

- An OEND outreach program would cost approximately \$25 in non-naloxone costs per naloxone unit distributed.
- By our estimates, **2000** units could be distributed through a full-time program.
- For comparison, in the HCS Wave 2 counties (counties without HCS OEND Outreach Program), an average of approximately 2050 units were distributed per county in 2021 by all community-based programs combined.







full time prevention specialist

\$50,286
Annual nonnaloxone
cost

2000
Naloxone
units
distributed

# Acknowledgments



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#### **Community Engagement Team**



Dr. Amanda Fallin-Bennett Nursing



Dr. Hilary Surratt Medicine



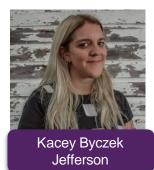
Dr. Patricia Freeman Pharmacy



Dr. April Young Public Health



Dr. Rachel Vickers-Smith Public Health





Misti Salyers-Dunford Boyd/Greenup



Renée Tabor Clark/Knox



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Madison/Bourbon



Amy Cowley Fayette/ Program Manager



Brooke Hiltz Kenton/Campbell Program Manager



Rose Borum CE Assistant

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