

# Clackamas County Overdose Prevention and Recovery Support Projects

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# Disclosures

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- No disclosures/financial conflicts of interest

# Learning Objectives

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- Identify the process and tools needed to implement a naloxone overdose prevention program for inmates post-release.
- Describe information and data to support naloxone distribution among those transitioning from jail back into the community.
- Recognize the benefits of strong community partnerships to build a more comprehensive addiction response model.

# Community Connections

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- Clackamas County Public Health's strategy to address opioid misuse and overdose includes a multi-disciplinary approach, working with community partners to enact a comprehensive community response.
- Build capacity for a community-based support system through the use of a Peer Recovery Mentor, County Corrections and Community Paramedicine partners
- Two initiatives will work to:
  - Identify system gaps
  - Develop more efficient pathways to link clients to treatment
  - Provide better care coordination

# Overdose Prevention and Navigation Post-Release:

- Implementation of Naloxone into community-based programs including law enforcement agencies.
- EMS staff provided training to law enforcement, parole and probation officers and staff at Residential services
- Research has shown that individuals with substance use histories that experience a period of incarceration are at increased risk of overdose upon re-entering the community.<sup>1</sup>
- The Clackamas County Transition Center provides crucial services to people leaving jail and to those at risk of returning. Providing clients with overdose prevention messages and access to naloxone is an opportunity to impact opioid overdose mortality post-release.



# Goals of the project:

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- Increase and improve the infrastructure of naloxone access and rescue by expanding naloxone to at-risk populations and those likely to encounter an OD situation.
- Offer clients who are re-entering the community a naloxone kit and educate them about the high risk of opioid-related overdose.
- Decrease overdose among those with substance use histories and those recently released from jail.

# Project overview

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**How does the Transition Center (TC) publicize to clients about the resources available at the TC?**

- Engaging with clients while in custody
- Upon release from custody

**What is the process at the TC for obtaining naloxone?**

- Information Gathering- tracking form
- Clients complete Privacy Policy Agreement
- View training video (Boston Public Health)
- Staff review the kit with the client and
- If clients are on formal supervision, the appropriate Probation Officer is informed

**Intake forms are then submitted to the Project Coordinator for evaluation**

# Transition Center Naloxone Pilot Project

FINDINGS: JANUARY-FEBRUARY 2018

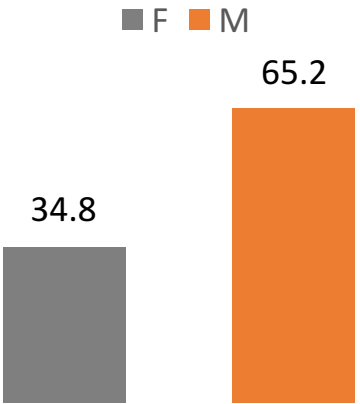
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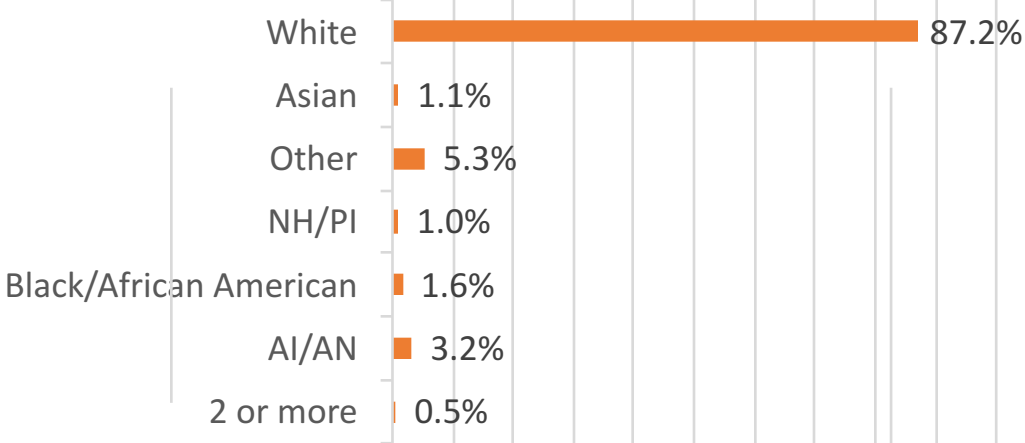
# Demographics (n=232)

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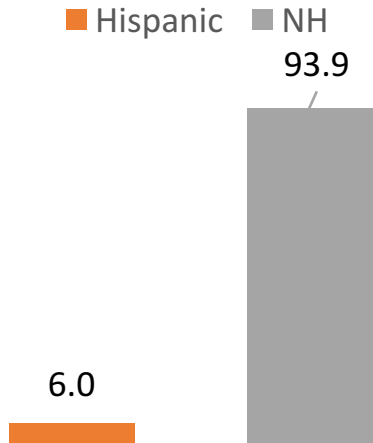
## GENDER



## RACE

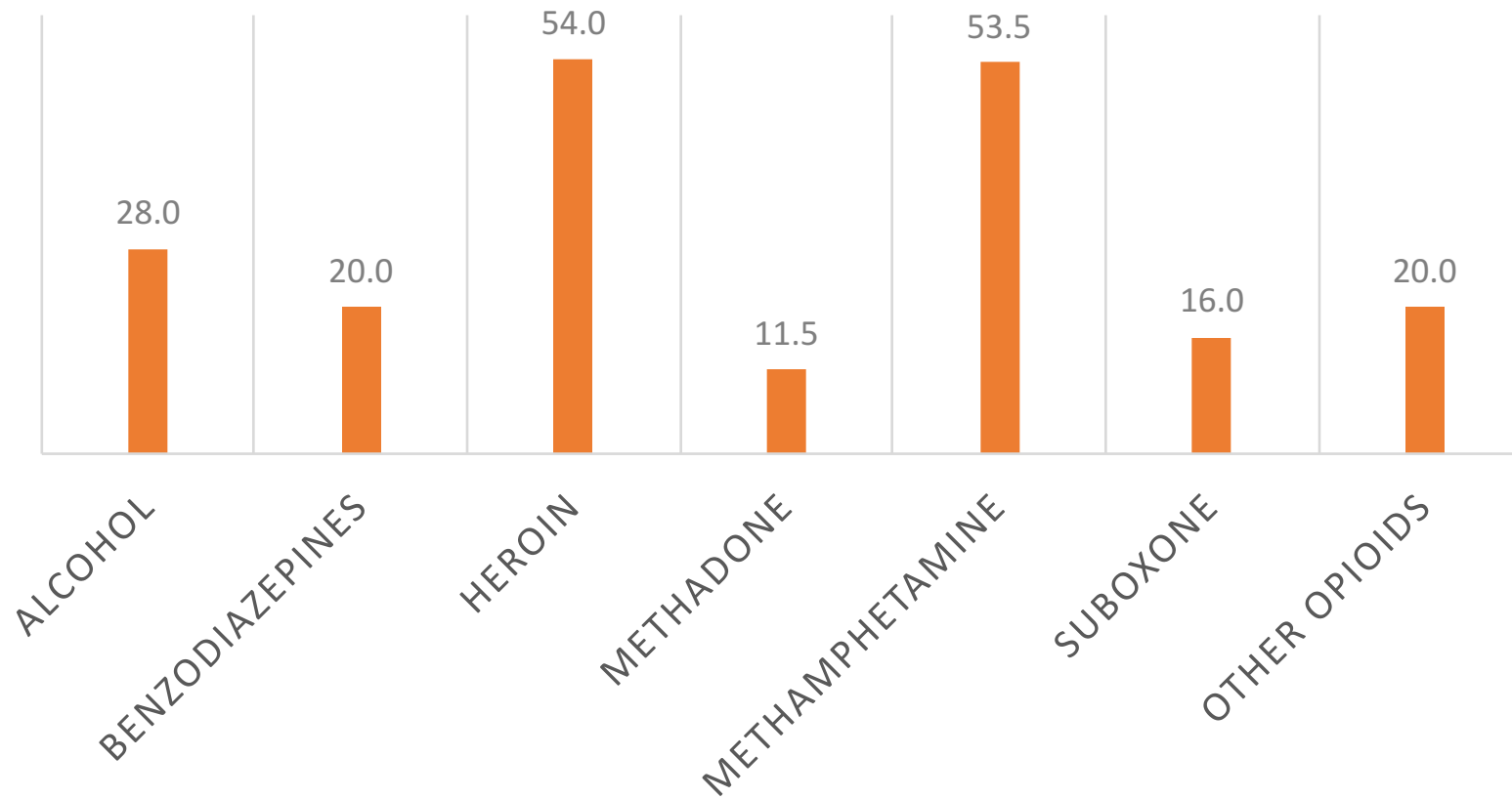


## ETHNICITY



# In the last 30 days before incarceration have you used (%)...

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# Overdoses

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HAVE YOU EVER OVERDOSED (%)?

46.5

A single orange bar representing the percentage of respondents who have ever overdosed, with the value 46.5 displayed above it.

Mean: 1  
Minimum: 1  
Maximum: 11

HAVE YOU EVER WITNESSED AN  
OVERDOSE (%)?

74.5

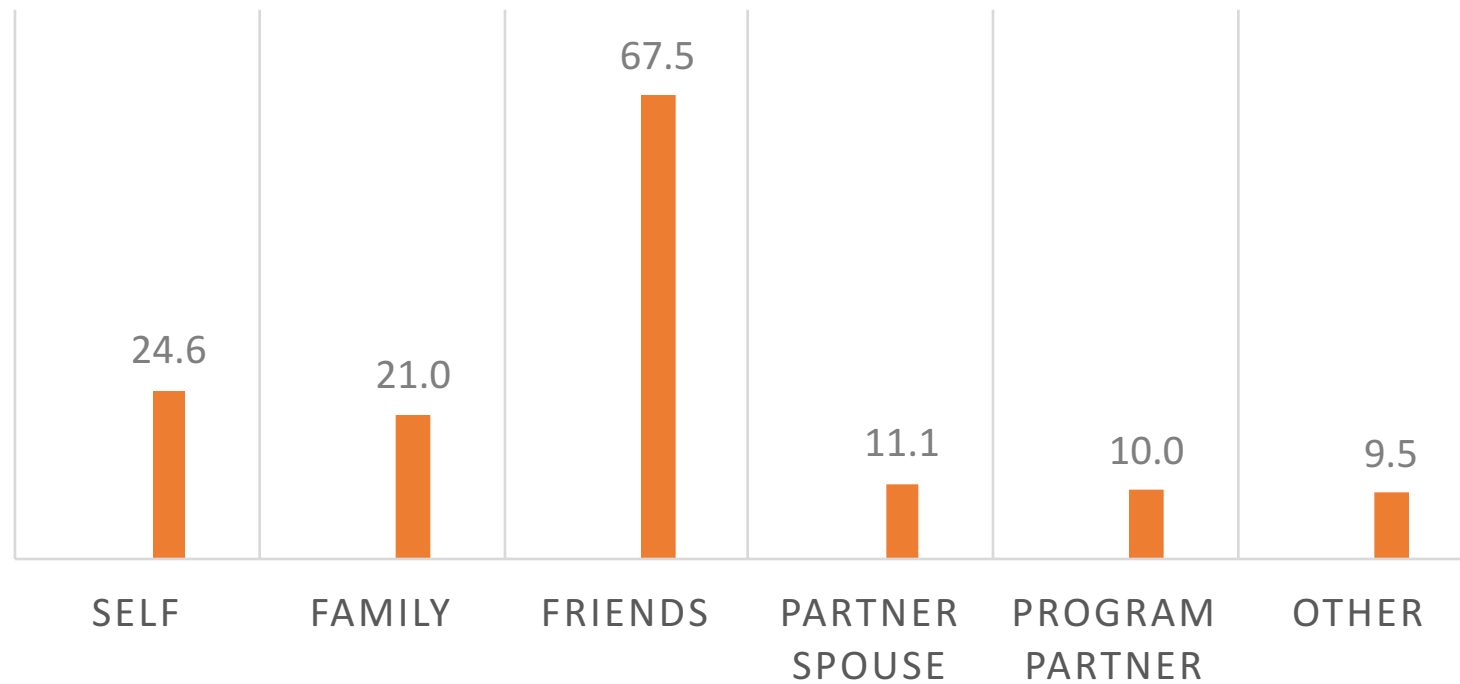
A single orange bar representing the percentage of respondents who have ever witnessed an overdose, with the value 74.5 displayed above it.

Mean: 2  
Minimum: 1  
Maximum: 100

# Perception of risk for an opiate overdose

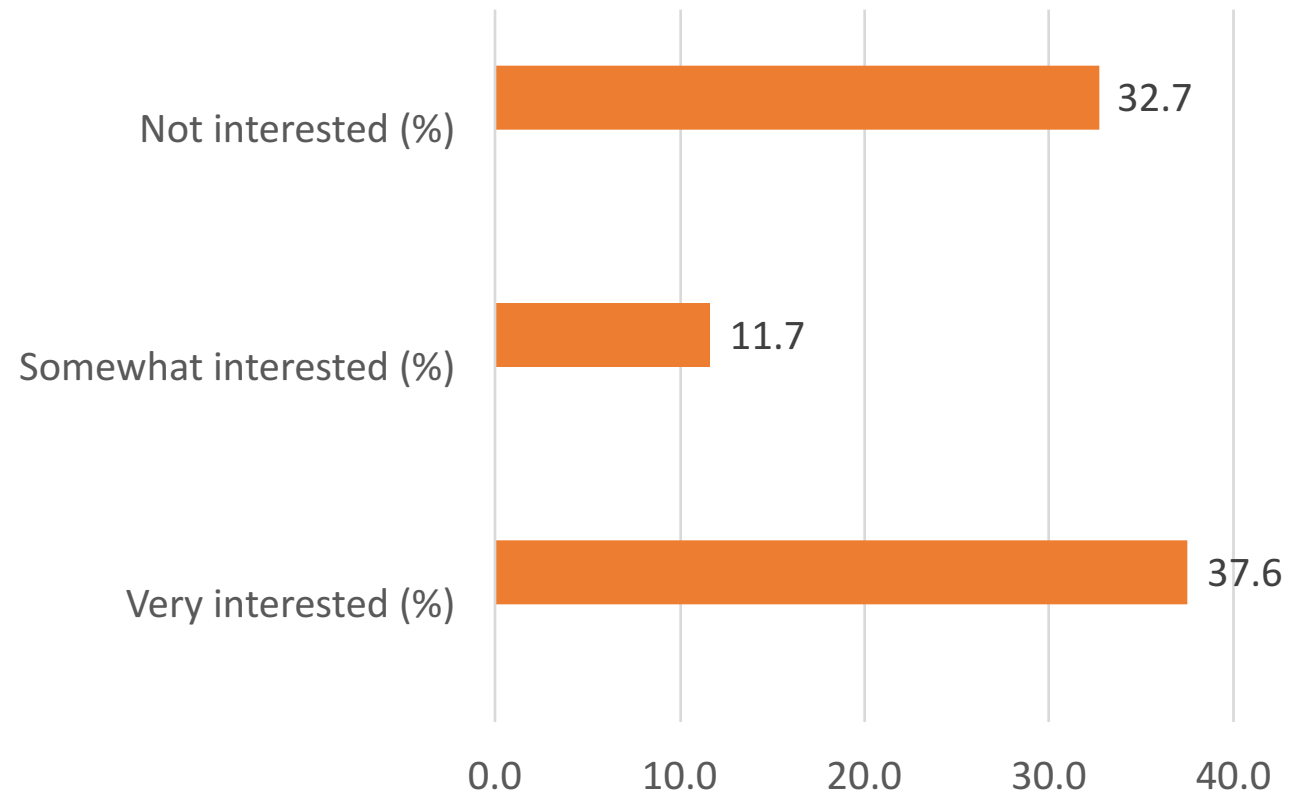
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AT RISK FOR AN OPIATE OD (%)?



# Interest in help

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# Phase 2- link to treatment

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- Unique opportunity to connect those at-risk and wanting help to treatment and recovery supports.
- Clients who identify as being interested in treatment are contacted by a Substance Use Disorder (SUD) Coordinator
- This connection has increased the number of clients who transition into detox, outpatient, and residential services following release from jail.
- Capacity issues- staff are only able to coordinate a referral for a portion of clients in need.
- This summer we will bring on a Peer Recovery Mentor to support efforts.

# Resuscitate and Navigate



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- EMS agencies play a critical role in their communities' response to the opioid epidemic, saving hundreds of lives each year via naloxone rescue.
  - Naloxone- no long-term impact on the patient's desire to use opioids again.
  - Expand the focus to include opportunities to help the patient into recovery by providing a warm handoff from the 9-1-1 response to the systems available to help with recovery.
  - A recovery-oriented system of care is a more promising system focus for EMS and Public Safety than our current response models.

# Resuscitate and Navigate

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- Community Paramedicine expands the roles of EMS workers to provide health services to underserved populations
- In Clackamas County, AMR and Clackamas Fire respond to over half of opioid overdose calls received by 911 dispatch, saving many lives each year via naloxone rescue.
- Through an innovative pilot project, Clackamas County Public Health and Behavioral Health will partner with Clackamas AMR and Clackamas Fire to build a more comprehensive response model in our county through use of Community Paramedics.



# Resuscitate and Navigate

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- Follow-up by a Community Paramedic and a Peer Recovery Mentor in the ED or home setting shortly after the overdose occurs.
- After an assessment is completed, patients will be navigated to treatment and recovery services in the community (detox, inpatient, outpatient) with a longer-term plan established.
- This model will focus on:
  - Care coordination between patients and treatment providers
  - Resource navigation- employment, insurance, education, housing
  - Wellness and recovery goals
  - Assistance to address barriers in cases where individuals are failing to engage in treatment.

# Goals of the project

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- Reduce the number of people who have a repeat overdose on opioids, thereby decreasing future 911 calls and hospital readmissions.
- Bridge gaps in care by connecting vulnerable patients to treatment and other critical resources.
- Improve the quality of life for patients with substance use disorders.

# Outcome measures

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- Reduction in number of repeat OD calls
- Successful induction/link to recovery services
- Reduction in drug use

Official pilot to launch Summer 2018!

# Thank you

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