Governor Gina M. Raimondo’s Task Force on Overdose Prevention and Intervention
April 8, 2020

DIRECTOR NICOLE ALEXANDER-SCOTT, MD, MPH; RHODE ISLAND DEPARTMENT OF HEALTH
DIRECTOR KATHRYN POWER, M Ed; RHODE ISLAND DEPARTMENT OF BEHAVIORAL HEALTHCARE, DEVELOPMENTAL DISABILITIES, AND HOSPITALS
WELCOME & ANNOUNCEMENTS
Strategic Response: Addressing the Opioid Epidemic During the Coronavirus Disease 2019 Pandemic

APRIL 8, 2020
LINDA MAHONEY, CAADC, CS, SOTA
ADMINISTRATOR II -BHDDH
Step by Step

- Gratitude for Preparations
- History with Methadone
- Take Home Schedules
- COVID-19 Planning and Implementation
- Buprenorphine
- SUD Residential
- Recovery: Peer Call in Numbers
Federal and State Regulating Bodies

Department of Health & Human Services (HHS) (FDA)
- Application/approval
- Standard of Care
- Certification
- Organizational Structure
- Enforced compliance

Drug Enforcement Administration
- Security of Stock
- Maintenance of Records
- Monitoring that Diversion Does Not Increase
- Prescriber Monitoring
Take Home Schedules

Prior to COVID-19

- 1-90 days: 1-2 Take Home
- 91-180 days: 2-3 Take Homes
- 181-270 days: 3-4 Take Homes
- 271-365 days: 6-7 Take Homes
- After 1 tear Up to 14 days
- After 2 year Up to 28 days

COVID-19 Changes

- Stable: Up to 28 Days
- Less Stable Up to 14 days MD review
- Inappropriate for Take Homes
  - Inductions
  - Recent OD, Release from Hospital, Detox, Residential or CSU
- Hx of diverting medication or current misuse of methadone or other drugs including alcohol
COVID-19 Planning and Implementation
Buprenorphine/Injectable Naloxone Changes

EAST BAY SUBOXONE 401-246-1195
OCEAN STATE- URGENT CARE 401573-9662
PONI-401-487-2194
STATE WIDE BUPRENOERPHINE CALL LINE
SUD Residential/Shelters
Treatment is available.

Recovery is still Possible!
• **SAMHSA Disaster Distress Helpline** has significant telehealth capability and provides 24/7 crisis counseling and support for people experiencing emotional distress related to disasters. Counselors have been trained in assisting anxious callers and have the capability to handle social isolation and distancing concerns. This multilingual, confidential crisis support service is available to all US and territory residents at 1-800-985-5990; TEXT: “TalkWithUs” to 66746.

• **Online recovery support meetings** available including 12-step fellowships, SMART Recovery, Recovery Dharma and many others on In the Rooms.

• **Hazelden Betty Ford webpage** “Tips for Staying Connected and Safeguarding Your Addiction Recovery” contains online support meetings, podcasts/blogs, mobile apps, social media groups, and movie/video suggestions.

• **Shatterproof** “How I’m Coping with COVID-19 and Social Isolation as a Person in Long-Term Recovery” provides helpful suggestions of what to do (exercising, reaching out, praying, meditating, focusing on my breathing, listening to music, doing projects you’ve been putting off) and NOT to do (monitor time on social media, negative self-talk, eat too much unhealthy food, watch the news 24/7).

• **SAMHSA** “Tips during and Infectious Disease Outbreak [store.samhsa.gov]” with information about a helpline as well as other tips for social distancing, quarantine, and isolation during and infectious disease outbreak.
Recovery Stepping Up

Call Lines Open 8 a.m.-8 p.m.
East Bay Recovery Community: 401-302-6231 English
                                      401-602-6735 Spanish
PSN Hope Recovery Community Center:
                                      Westerly: 401-598-6400
                                      Newport: 401-619-1343
CCA Serenity Center:
                                      Woonsocket: 401-808-4810
Providence Anchor Community:
                                      Providence/Pawtucket area: 401-889-5770

RICARES: Providence: Naloxone and Fentanyl test kits:
Text or call requests into to 401-408-6804 or 401-487-3866 onsite pickup only at 134 Mathewson St., Providence
COMMUNITY OUTREACH DURING COVID-19

Parent Support Network: Community Outreach Response Efforts Team
Peer to Peer Support While Social Distancing
Hope Recovery Centers of Rhode Island

- Converted in-person support groups to virtual/call-in formats.

- Supporting peers on how to transition to a virtual format

- Offering peer to peer mental health and SUD support over the phone through extended hours (8AM-8PM)
HOW TO USE GO TO MEETING
For Online/Dial-in Meetings

For Computer Use:
https://www.youtube.com/watch?v=95dRdnMMgbQ

General Assistance with App:
https://www.gotomeeting.com/meeting/resources/gotomeeting-quick-and-helpful-guide-for-attendees

HOPE RECOVERY VIRTUAL MEETINGS

**MONDAY**
- **HOPE INSPIRATION**
  9:15 to 9:45
- **HELPING WOMAN RECOVER**
  12:30PM to 1:30PM
- **ALL RECOVERY**
  2PM to 3PM

**TUESDAY**
- **HOPE INSPIRATION**
  9:15 to 9:45
- **NAMI CONNECTION**
  10:00AM to 11:30AM
- **ALL RECOVERY**
  2PM to 3PM

**WEDNESDAY**
- **HOPE INSPIRATION**
  9:15 to 9:45
- **M.A.R.S**
  10:30AM to 11:30AM
- **SMART RECOVERY**
  12:00PM to 1:30PM
- **ALL RECOVERY**
  2PM to 3PM
- **RI FATHERHOOD INITIATIVE SUPPORT GROUP**
  5:30PM to 7:00PM

**THURSDAY**
- **HOPE INSPIRATION**
  9:15 to 9:45
- **GUIDED MEDITATION**
  10:30AM to 11:00AM
- **ALL RECOVERY**
  2PM to 3PM

**FRIDAY**
- **HOPE INSPIRATION**
  9:15 to 9:45
- **DHARMA RECOVERY**
  12:30PM to 1:30PM
- **ALL RECOVERY**
  2PM to 3PM

**GLOBAL GOTO MEETING**
https://globalgotomeeting.com/join/361483053
By Phone: 1-872-240-3311 Passcode: 361-483-053
Targeted Community Outreach

- Limited “boots on the ground” activity to mitigate risk of transmission of COVID-19
- Implementing outreach in safe and effective ways
- Collaborating with “grab and go” meal sites, to distribute harm reduction supplies, basic needs and recovery resources
- Delivering naloxone to individuals throughout the state
- Distributing Naloxone to facilities who are currently providing direct services
Overdose Rates Have Decreased Significantly; *Possible* Causes:

- Lack of reporting, due to avoidance of EMS/ER
- Lowered use due to current climate of quarantine
- Lack of availability in substances, particularly Fentanyl

What We Hope to Discover Through Outreach Efforts and Data:

- Is this reflective of a true narrative surrounding PWUD
- What will transpire from the disruption of Fentanyl production
- Are PWUD able to access the services they need during this time (MAT, Treatment, IOP)
QUESTIONS & COMMENTS

Sarah Edwards CPRS
Manager | CORE Team
(401)500-2998
s.edwards@psnri.org
Project Weber/ RENEW COVID-19 Harm Reduction Response

Dennis Bailer, Overdose Prevention Program Director
Our response

1. Drop-in Center
   - Open 11 - 3 Monday - Friday for brief harm reduction services only
   - Purchased a hand washing station for outside, working to get that installed by the end of the week
   - Purchasing phones for clients who need to engage in telehealth but do not have phones

2. Outreach continues, also limited hours
   - 12 - 4pm daily, increased the amount of basic needs we are distributing because we saw large numbers being hungry
   - Also distributing Narcan, needles, fentanyl test strips, condoms, etc.
   - Shifted outreach to target areas where people are congregating (food pantries, shelters, etc)

3. Information/material sharing
   - We worked with RICARES, Parents Support Network, Prevent OverdoseRI, ACOS, CCA and Systems Change Strategies to create a flyer on harm reduction and recovery resources during the COVID-19 (see next)
   - Distributing Harm reduction materials through partners like Amos House and Discovery House
- Flyer created by PWR and partners (RICARES, ACOS, PSN, SCS, CCA, and PORI) for distribution to clients, particularly those without internet access. We have also translated it into Spanish.

- Other partners in other zip codes (outside 02907) can create their own version using this as a template.

- PreventOverdoseRI has also created a statewide version that they are printing and we are distributing.
Staff response:

- PWR staff are keeping ourselves updated on the constantly adjusting Detox/treatment/Sober living landscape so as to provide the most up to date info to clients.
- Drop in center and outreach van are being cleaned/disinfected after each client and after each shift.
- All staff are working in pairs, two at a time. If one staff in that pair is infected, only that pair will have to be out.
- Staff are using PPE all the time, masks and gloves and washing hands regularly.
- Hosting online Narcan trainings
- Partnering with harm reduction partners to distribute Naloxone across the state
- Working with partners to increase telehealth options
- Increasing information sharing amongst providers to decrease gaps in services
Thank you!

Questions?

Dennis Bailer
dbailer@weberrenew.org or
401-383-4888