



Governor Gina M. Raimondo's Task Force on Overdose Prevention and Intervention

May 13, 2020

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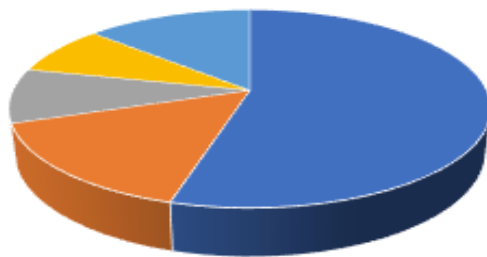


WELCOME & ANNOUNCEMENTS



COVID-19 SAMHSA Grant

Funding



\$2,000,000
total

- CMHO telehealth capacity
- Tele-induction for buprenorphine
- Outreach RE: translation and telesupport to diverse populations
- Know My Health and other data collection (GPRA)
- Project Director, supplies, travel, indirect

- ▶ Scopes of work are being created and reviewed
- ▶ Telehealth TA for providers through Northeastern Telehealth Resource Center being set up
- ▶ Outreach to vulnerable populations being procured

Task Force Work groups meet on a monthly or bi-monthly basis and are always looking for new volunteers. To learn more, contact a representative from one of the organizations below:

- **Prevention, [Carol Stone](#)**; Rhode Island Department of Health (RIDOH)
- **Rescue, [Jennifer Koziol](#)**; RIDOH
- **Treatment, [Jaime Bernard](#) and [Dr. Brian Daly](#)**; Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH)
- **Recovery, [Linda Mahoney](#)**; BHDDH

- **Cross-Cutting Workgroup on Racial Equity**, [Dennis Bailer](#) and [Lily Rivera](#); Project Weber/RENEW
- **Harm Reduction**, [Ryan Erickson](#); BHDDH
- **Family Task Force**, [Trisha Suggs](#); BHDDH
- **First Responder Task Force**, [Matthew Moynihan](#); Rhode Island State Police and [Bryan Volpe](#); Rhode Island Fusion Center
- **Substance Exposed Newborn (SEN) Task Force**, [Margo Katz](#) and [Kristine Campagna](#); RIDOH

Recovery is possible for everyone, and we can help. Talk any time, 24 hours a day, 7 days a week.

Rhode Island's Buprenorphine Hotline 401-606-5456



PREVENTOVERDOSE.RI.ORG
Recovery is Possible

[Learn More](#)

- Hotline staff are available 24 hours a day, seven days a week.
- Callers talk with a representative who will connect them with a DATA-waivered prescriber.
- Callers receive an evaluation over the phone.
- If appropriate, they receive a prescription for buprenorphine.

 **Rhode Island Department of Health** ✓
May 8 at 10:07 AM · 🌐

La recuperación es posible para todos y podemos ayudarlo. Llame en cualquier momento, las 24 horas del día, los 7 días de la semana.

**Línea de ayuda de
Buprenorfina de
Rhode Island
401-606-5456**



PREVENTOVERDOSERI.ORG
La recuperación es posible.

[Learn More](#)

- Callers get linked to follow-up for maintenance treatment.
- Get scheduled for a follow-up appointment.
- Health insurance is not needed to talk with a prescriber.

Questions?

Contact **Lee Ann Jordison Keeler**
LJordisonKeeler@CareNE.org

HEALTH EQUITY ZONES

Building healthy and resilient communities across Rhode Island



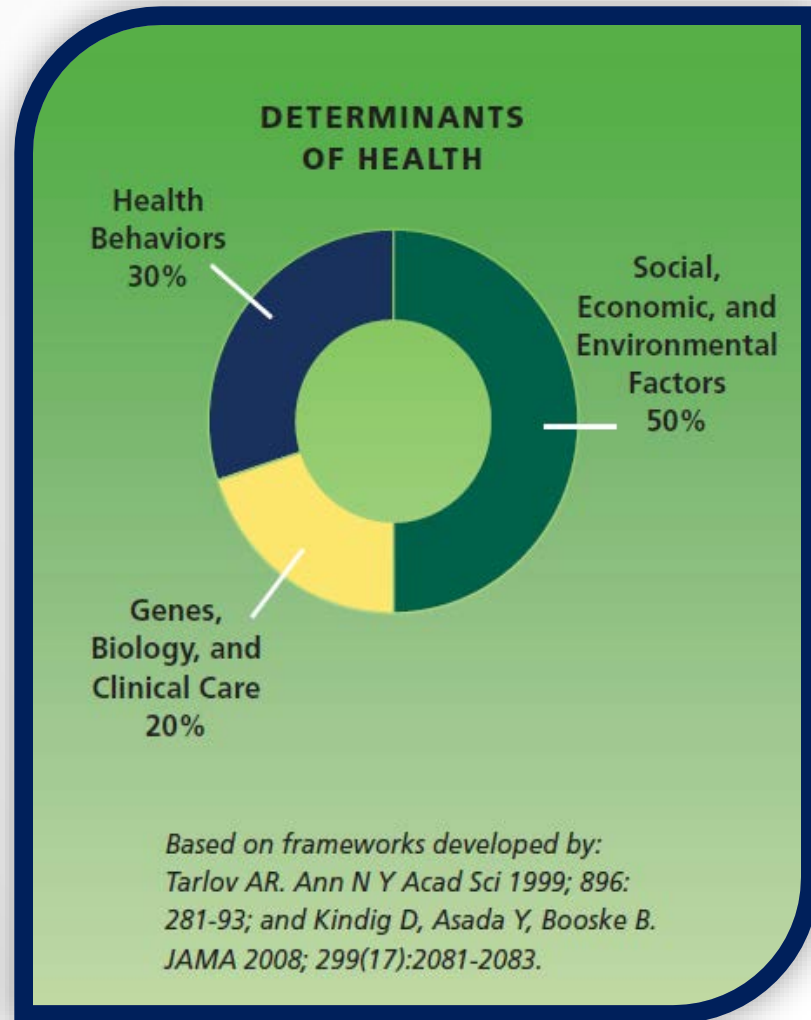
Foundational Principle: Health Equity

- **Health equity** means that everyone has a fair and just opportunity to be healthier.
 - This requires removing obstacles to health such as poverty, discrimination, and their consequences.

Foundational Principle: Determinants of Health

- **Health** is greatly influenced by the social, economic, and physical environments in which people live. Up to 80 percent of our health is determined outside the doctor's office and inside our homes, schools, jobs, and communities.
 - Examples include levels of unemployment, the availability of public transportation in a community, the availability of healthy food, and the quality of education that people receive.
 - Generational social, economic, and environmental inequalities result in adverse health outcomes. They affect communities differently and have a greater influence on health outcomes than either individual choices or one's ability to access healthcare.

Place matters when it comes to health



- ✓ 80% of our health is determined outside the doctor's office and inside our homes, schools, jobs, and neighborhoods
- ✓ Data show that nearby zip codes, or even adjacent neighborhoods, can often have striking differences in health outcomes.
- ✓ To have the biggest impact on health outcomes – and help curb the rising cost of care – **we shift our investments to the place where health happens the most: our communities.**

Health Equity Zone Opioid Overdose Prevention and Response (OPR) Grants

- Seven Health Equity Zones (HEZ) received CDC Surge funding to support assessment and action planning around opioid overdose prevention and response and SOR Early Implementation funding to conduct community-level opioid overdose prevention and response activities.
- The data below reflects the number of evidence-based, complementary, and innovative/promising prevention activities in place as of 1-31-20.

Health Equity Zone	# Evidence-Based Activities*	# Complementary Activities*	Innovative/Promising Prevention Activities	Total	Baseline (4-12-19)
Bristol	4	3	1	8	1
Central Providence		3	2	5	
Newport		1	9	10	
Pawtucket/Central Falls		3	2	5	
South County	3		3	6	
West Warwick	9	9	4	22	6
Woonsocket	13	4	2	19	11
TOTAL	29	23	23	75	18

*Source: RIDOH/BHDDH Master List of Evidence-Based and Innovative Interventions for Overdose Prevention and Intervention, 2019.



Pawtucket/Central Falls HEZ COVID response

- Member of the Pawtucket Central Falls Incident Command System: Providing Technical Assistance, Serving on the Family Supports Team, making sure partner information is shared and partners are sharing messages widely
- Created a Resource Guide for Pawtucket Central Falls
- Increased frequency of collaborative meetings to share needs, find solutions, and amplify messages

Pawtucket/Central Falls HEZ Opioid Epidemic response

- Creation of an Opioid Action Plan
- In school and out of school prevention programming
- Creation of Parent Café
- Billboard Campaign
- Participation in prevention coalitions
- Identification of Naloxone locations

Additional activities in OD prevention during the COVID-19 pandemic

- Sharing information regarding recovery and mental health supports during and preparing for post response

Central Providence HEZ COVID response

- 5 Community Health workers are working with CP-Residents to address immediate needs
- ONE|NB (backbone) received 45K grant from UWRI/RIF for direct financial support for residents referred by CHWs.
- CHW is working to start a **senior mask making initiative**
- Purchased masks for the food pantry
- Facilitated PPE acquisition with Clinica Esperanza (testing site)
- Created and shared a Virtual Folder with community resources, virtual events and an “ask and offers” page

Central Providence HEZ Opioid Epidemic Response: focused on reducing the risk of substance exposed newborns, facilitating access to treatment, and destigmatizing substance use disorder in the Hispanic/Latinx community.

- Increased Family Service’s capacity to provide family planning education at home visits
- Provided RIPTA passes to CHWs and Peer Recovery Coaches for their clients
- Partnered with BHLINK to promote their services
- Redeveloped curriculum for trade school students/ youth entering the construction field focus on substance use awareness and prevention
- Narcan Training/Distribution
- We are gearing up to begin our ODMAP work with Project Weber/RENEW





West Elmwood 02907 HEZ COVID Response: All members of the 02907 HEZ Collaborative have been working within their communities to provide direct support to those who live in 02907. Some examples include:

- West Elmwood Housing Development Corporation's Dunamis Synergy Initiative provides young parents with diapers, wipes, and other necessities and received grant funding to provide rental assistance to those who lost their employment due to COVID-19. Additionally, WEHDC worked with FreshConn to donate groceries to families that we serve.
- Refugee Dream Center has been delivering food and other necessary supplies to their refugee clients.
- Amos House has been operating a 24/7 "winter shelter" for up to 50 men and women who are homeless. They have served approximately 200 individuals since it opened in February. Starting next week they will be moving to a hotel to create social distancing as this population is at great risk for COVID. Additionally, Amos House has been serving breakfast, lunch, and dinner six days a week for the general community as well as sending 20-25 meals to a tent encampment.

West Elmwood 02907 HEZ Opioid-related activities:

- Our partners at Project Weber Renew continue street outreach and drop in center services for Narcan distribution and provide information on the services that exist for harm reduction and overdose prevention.
- Amos Houses' 90-Day Treatment Programs for men and women continue to operate with a total of 35 men and women.

Bristol HEZ COVID response

- Coordinating with the East Bay Food pantry to provide recipes for their clients
- Bimonthly live cooking demonstration and distributing food to 60 people to cook along during the demo
- Virtual Zumba through Bristol Parks and Recreation
- Sharing COVID related resources and Mental Health resources in general
- Working with Governor's work stream and National guard to explore ways to increase testing at the Bristol County Medical Center

Bristol HEZ Opioid Epidemic response

- Support of the East Bay Recovery Center and sharing of info on recovery meetings at EBRC
- MH trainings
- Coordination w/ Bristol Police Department on safe station
- Narcan trainings
- Educational forums
- Recovery Rallies
- Help Is Here Bristol campaign
- NaloxBox installation in the community

Bristol HEZ additional activities in OD prevention during the pandemic

- Coordination of Narcan delivery
- MH resource rack card distribution
- Distribution of Lock It kits with resources at the grab and go meal sites



Newport HEZs response to COVID-19 response:

- **Outreach:** we have established communication with 50+ residents who we communicate with at least 1-2 times per week, listening for what is working, what is not working, etc.
- **Synthesis:** our team talks daily about what we have heard from residents in the past 24 hours; we help resolve issues and look for patterns that require further action
- **Advocacy:** we advocate within systems on behalf of individuals and also around common experiences that suggest larger systemic issues
- **Resource sharing & communication:** we have created a maintain a community resource guide in English and Spanish, created a direct mail piece, and also maintain our website, FB page, and group as communication methods

Newport HEZ is not doing specific Opioid prevention work right now.



COVID-19 Response

- We maintain updated list of local COVID 19 resources, tips, and ways to help neighbors on our community engagement platform: ourbodiesminds.org.
- We are in regular communication with our partners and 3 HEZ neighborhoods facing the greatest health disparities about the issues and needs residents are facing.

Washington County Opioid Epidemic Response

- Comprehensive Planning for Behavioral Health underway through Washington County Behavioral Health Planning Collaborative and Consumer and Family Advisory of HBHM
- Evidence Based Programs
 - Narcan Distribution
 - Crisis Intervention Teams – Diversion from criminal justice to treatment
 - Police Clinician
 - Recovery Center in Westerly
- Promising Practice/Innovation
 - MAT Telehealth – partnership between Thundermist, CODAC, Block Island Health Center
 - Art Therapy group for Chronic Pain patients at Thundermist



- East Providence HEZ is in its first year and is a member of the East Providence Prevention Coalition.
- Although the HEZ isn't working directly at this time on Opioid, we do have the capacity to refer those in need to the appropriate behavioral resource.
- Additionally, the HEZ can provide some help with basic needs.



- Cranston HEZ is in its first year and is focused on community assessment and capacity building.
- Partnership with PONI and the Cranston Substance Abuse Taskforce to deliver naloxone and provide naloxone training
- Providing harm reduction messaging on social media.



Health Equity Zone

West Warwick

West Warwick HEZ COVID-19 Response

- Use Transportation resources (Senior Center Bus) to deliver food to people
- Promote Testing
- Co-host with Thundermist Covid-19 education events

West Warwick HEZ OD Prevention Response

- Sustain and expand Nurse Case Manager MAT services, including launching rapid access to care through Telehealth
- Implementing police behavioral health clinician “ride along” pilot and Naloxone Provide peer support training in officer critical stress management
- Provide training on issues of childhood trauma for local schools
- Conduct naloxone trainings and recovery community events
- Naloxbox initiative
- 24/7 Naloxone distribution at Fire Stations and first responder leave behind
- Improve the controlled substance, MAT and HEZ data dashboards
- Support events, workshops, and staff for grandparents raising grandchildren as the result of substance use disorder
- Support HEZ ambassadors with lived experience to provide leadership and promote community engagement

Health Equity Zone

Woonsocket

Woonsocket HEZ COVID-19 Response

- Deliver Food to people
- Work with Farm Fresh to facilitate order and delivery of “SNAP” produce boxes
- Identify solutions for transportation and delivery for residents who buy food with SNAP
- Promote Testing
- Co-host with Thundermist Covid-19 education events

Woonsocket HEZ OD Prevention Response

- Provide transportation and expand local recovery center services (Serenity Center)
- Expand Nurse Case Manager MAT services, including launching rapid access to care through Telehealth
- Support needle exchange outreach efforts in collaboration with Community Care Alliance/AIDS Care Ocean State
- Carry out training for providers in latest MAT research
- Expand the controlled substance, MAT and HEZ data dashboards
- Support Regional Prevention Coalition staff to coordinate the Overdose Prevention Committee and conduct bi-lingual naloxone training

Health Equity Zone

Woonsocket

Priority Areas & Goal Statements

Partnership for Collective Impact: Shared workplan, Goals and Measures



Overdose Prevention and Recovery: *Save Lives. Make treatment and recovery available on demand, in real time.*

Teen Health: *All teens, including, young parents, will have high quality healthcare and accurate and complete sex education to make informed decisions & choices about their lives.*

Food Access: *Healthy food is easy to find and affordable in every neighborhood*

Child Maltreatment: *All children are safe from harm and live in families and neighborhoods that help them thrive*

Collaborative Partners

Andrea's Hope
Autism Project
Center for South East Asians
Community Care Alliance
Connecting for Children & Families
CVS
Discovery House
Farm Fresh Rhode Island
Gateway Healthcare

Landmark Medical Center
NeighborWorks Blackstone River Valley
New Beginnings Kitchen
PACE-RI
Refugee Dream Center
Rhode Island Parent Information Network
Riverzedge Arts
Serenity Center
Sojourner House
Thundermist Health Center

Woonsocket Education Department
Woonsocket Fire Department
Woonsocket Harris Public Library
Woonsocket Head Start
Woonsocket Planning Department
Woonsocket Police Department
Woonsocket Prevention Coalition
Woonsocket Residents
YMCA of Woonsocket
YWCA Rhode Island

Equitable and Collective

- Work is always informed by community. Work is completed by the community for the community.
- Data, focus groups & needs assessments set priority areas and measure progress.
- Uses new approaches and evidence-based programs

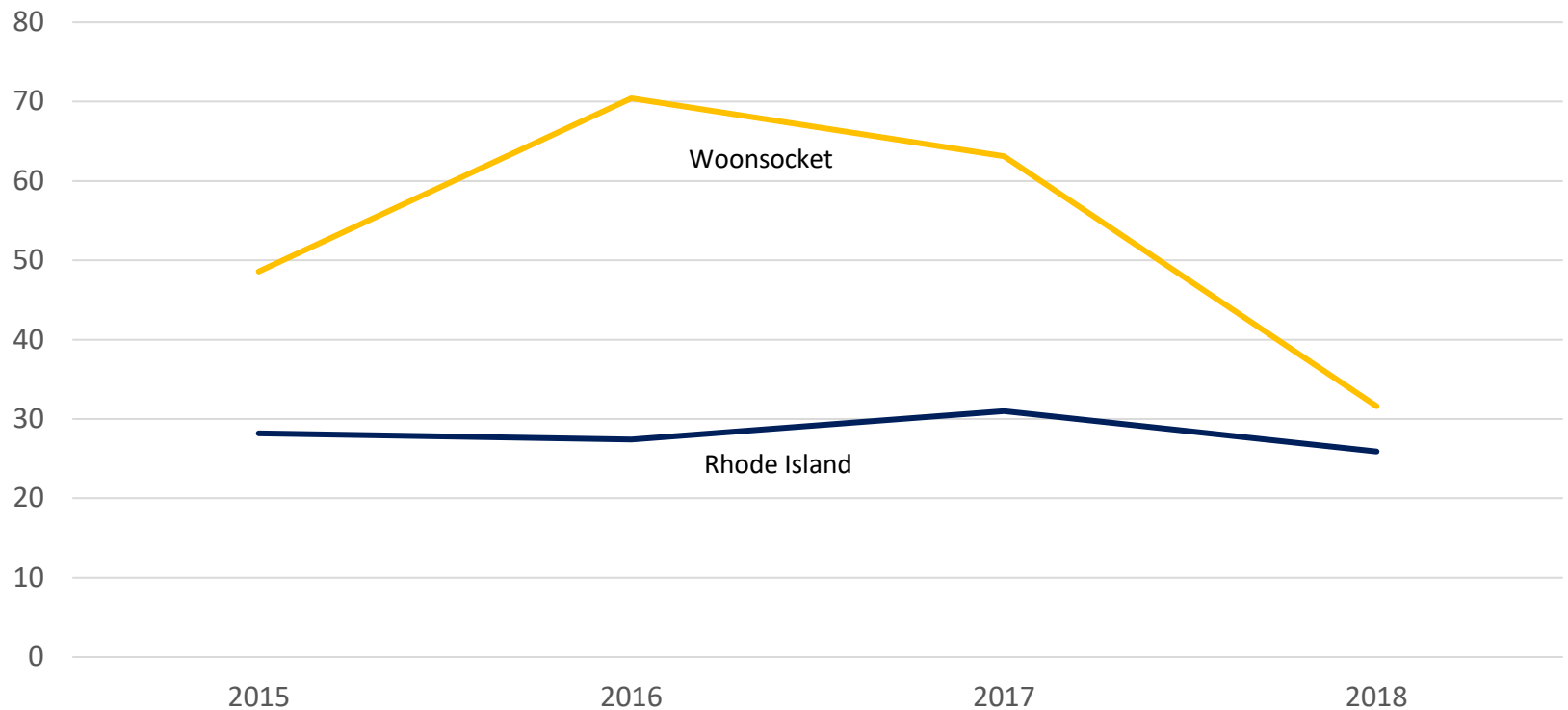


Woonsocket ODPR Workgroup

- Chair, Lisa Carcifero, Woonsocket Prevention Coalition
- Tamara Burman, Woonsocket Health Equity Zone
- Cathy Schultz, Woonsocket Health Equity Zone
- Michelle Taylor, Community Care Alliance (CCA)
- Christopher Durigan, PharmD – Thundermist
- Capt. Jason Paskanik, Woonsocket Fire/EMS
- Emily Gomez, peer recovery coach.
- Alison Arden, Behavioral Health Director, Landmark Medical Center
- Susan Jacobsen, Thundermist
- Capt. Michael Lemoine, Woonsocket Police Deputy Chief
- Ken Mayer, Discovery House
- Heather Tovar, Gateway

Overdose Fatalities – Woonsocket 2015-2018

WILDLY IMPORTANT GOAL – REDUCE OD DEATHS BY 25% From
21 deaths in 2015 to 14 deaths in 2020



Wildly Important Goal

3 Year MEASURE

Objectives aligned
with RI GTF
Strategic Plan

Annual Targets

Opioid Epidemic

Priority Statement:

Woonsocket has the highest overdose death rate in RI, nearly twice the state's average (70/100,000 in 2016)

Priority Goal Statement:

Save lives. Make treatment and recovery available locally, on demand, in real time.

3 Year Measure

Reduce overdose rate by 25% by end of 2021

Objective I Prevention

Move upstream to change the culture

Year-1 Targets

1. Increase awareness through public events or campaigns
2. Implement SED prevention programs in school
3. Engage Youth in planning committee

Objective II Treatment

When people are ready for treatment, including MAT, Methadone, Suboxone, and Vivitrol, this available immediately

Year-1 Targets

1. Sustainable funding for Naloxone
2. Increase number of residents with Naloxone
3. Improve ED discharge planning & reporting
4. Pilot Police/Bx Pilot

Objective III Rescue

People have Naloxone when they need it. bystanders know how and when to use Naloxone to save a life

Year-1 Targets

1. Expand MAT and reduce wait times
2. Expand S&IRT
3. Improve ED discharge planning & reporting

Objective IV Recovery

Build recovery capital. Everyone seeking or in recovery has access to a diverse range of services and support to get and stay well

Year-1 Targets

1. Maintain or Expand Serenity Recovery Center hours

Year-1 Indicators (provisional)

Primary: decrease # of overdose deaths 10%, increase MAT 10%, increase # Naloxone 20%
Secondary: # EMS rescues, # ED visits, # ED Discharge to LTC, wait time for MAT (in days)



October 2018 - September 2019 Workplan

	Priority Statement	Priority Goal Statement	3-Year Measure	3-Year Objectives	Target Population	Year - 1 Targets	Owner	Year-1 Activities	Mid Year Measure by 12/31/19	Year End Measure by 6/30/20
O p i o d E p i d e m i c	Woonsocket has the highest overdose death rate, nearly twice the rate of the state average	Save Lives. Make treatment and recovery available on demand and in real time.	Reduce Overdose rate by 25 % by end of 2021	Primary Prevention Move upstream to change the culture, increase awareness and reduce stigma.	General public Youth, teachers, staff, parents in school community Community members who need to safely dispose of unused medications	I-1 Engage schools and youth in CODE planning committee	Woonsocket Prevention Coalition	Recruit youth leaders to CODE planning committee Evaluate meeting time re: youth availability	Youth groups identified and engagement strategy planned	Min of 2 new members incl. school and youth rep
						I-2 Increase awareness through public events/ campaigns	Landmark Medical Center & Woonsocket Prevention Coalition	Information dissemination, and evidence based primary prevention programming in schools and communities (leveraged by BHDDH contract) including Above The Influence and Life of an Athlete programs	Plans for primary prevention program launch developed	At least 2 evidence-based primary prevention programs implemented
						I-3 Information dissemination, primary prevention education in schools and communities	Woonsocket Prevention Coalition	Encourage organizations and individuals to "Take the Pledge" to support Landmark's "Change the Direction" Campaign Implement the Above the Influence program Implement the Life of an Athlete program Facilitate an annual Opioid Town Hall Meeting and community forum on opioid use Drug takeback events in partnership with Police and Prevention Coalition	Plan approved/supported by workgroup including outreach, location and marketing 1 evidence based program implemented Plan approved by workgroup including outreach, location and marketing N/A	Increase # of individuals and organizations in Woonsocket who "Take the Pledge" 2 evidence based programs implemented Town Hall or Community Forum complete At least one takeback event held
						I-4 Secure sustainable funding for Naloxone	Planning Committee - Lead Thundermist	Advocate for sustainable funding for Naloxone distributed in non-pharmacy settings e.g. community distribution/trainings, point of care, street outreach, first responder distribution, police stock for administration to recuse	RIDOH, EOHHS action on guidelines as per legislation passed June 2018	# of third party payers, including Medicaid, that reimburse for POD distribution in non-pharmacy setting
				Rescue People have naloxone when they need it. Bystanders know how and when to use naloxone to save a life.	Community residents experiencing an overdose or who are at risk of overdose Healthcare providers to increase prescribing and distributing naloxone to high-risk patients. High-risk patients and their families to increase acceptance of naloxone kits Employers who want to train staff in recognizing and responding to overdose	Increase number of Naloxone kits distributed from 800/yr to 1000/yr in 2019	CCA	Offer quarterly naloxone training at the Serenity Center Educate clients in the use and access of naloxone at intake Train all new CCA staff in the use and access of naloxone and provide annual updates for all staff	2 Naloxone trainings complete N/A	4 Naloxone trainings complete N/A
							Woonsocket Prevention Coalition	Monthly community naloxone trainings at Woonsocket Library in partnership with PONI and Woonsocket Prevention Coalition Support organizations and businesses in Woonsocket to train all their staff in recognizing and responding to an OD Purchase Naloxone; coordinate with community organizations to assist in outreach in hot spots and distribute to target populations	200 Nasal kits purchased 3 community naloxone trainings held 500 kits by July 1st 2019	200 kits distributed 6 naloxone trainings held 1000 Kits by December 31, 2019
							Thundermist	Educate providers to increase prescriptions for and distribution of naloxone for patients on high doses of opioids Develop controlled substance dashboard to identify high risk patients Distribute naloxone to high risk patients and their family at point of care	# of providers trained on co-prescribing, # of naloxone prescriptions Dashboard functional	# of providers trained on co-prescribing, # of naloxone prescriptions Protocol to outreach and intervene to high risk patients
								Train 100% of Thundermist staff in the recognizing and responding to an overdose with naloxone and provide kits free of charge to all staff who request one	# of kits, POD screening protocol developed to identify pts for distribution # of staff trained	# of kits # of staff trained
				Treatment When people are ready for treatment Medication Assisted Treatment (MAT) is available immediately and locally in Woonsocket.	Anyone in Woonsocket experiencing an opioid use disorder. SBIRT screening in primary care settings, targeted outreach with first responders, coordination and referrals in the emergency department will assist in identifying individuals in need of treatment.	Increase # in MAT 10% per year and reduce wait times (measured in days to induction)	CCA & Police Dept.	Pilot Police/BH ride-along The police department will team with a CCA behavioral health clinician to conduct follow-up contact post OD or in identified hotspots so clinician can offer services	Pilot launched - data reviewed by committee	BH Clinician assigned to PD and protocols developed to align and integrate with first responder follow up and interagency treatment referral and coordination plans
							Thundermist	Increase number of patients treated by of waived providers Expand MAT services for pregnant women Expand access to MAT through innovation including nurse-led teams and telehealth SBIRT screening for adult primary care and women's health patients to screen for SUD	Outreach materials developed by THC Communications Dept.	Increase # of patients receiving MAT by 10%
							CCA	Increase referrals to CCA's Center of Excellence through improved collaboration with community partners Discovery House/Methadone maintenance will accept higher level of service referrals from office based programs whose patients may not succeed at an office based program and/or may be better served at this level of service.	Increase # of patients receiving MAT at COE TBD	Increase # of patients receiving MAT at COE TBD
							Discovery House	To facilitate residential treatment for Woonsocket residents, Landmark will have priority over one bed at Eastman House (if residential treatment is a proper level of care), if a bed is available	# of referrals, # of transfers to Eastman from Landmark	# of referrals, # of transfers to Eastman from Landmark anything less than 100% uptake rate will be examined by group to assess residential capacity issues
				Recovery Anyone in Woonsocket who is in recovery and people.	Anyone in Woonsocket who is in recovery and people.	Improve ED discharge planning & reporting	Landmark Medical Center	Work with first responders to develop real-time data capacity a develop a workflow/ protocols for interagency follow-up. All MAT programs and ED will establish a referral process to assist patients to find the appropriate or desired level of care including via ED discharge planning	48 hour reporting in compliance with RIDOH	Workflow/Protocol to improve follow up post ED visit for OD
							Community Care Alliance	Engage residents in recovery services offered by the Serenity Center Identify sustainable funding for Serenity Center Educate residents about available recovery services Hold recovery events hosted by people in recovery Organize regular recovery support groups Build a Consumer Advisory Board	Open 4 days a week 1 additional grants application completed Connect with at least two new organizations 50 recovery activities & groups held Board Recruitment and Event Planned	Open 4 days plus 160 hrs in evening hours 2 additional grants applications completed Connect with at least 4 new organizations. 135 recovery activities & groups held 15 Participant Board active and met at least once

Woonsocket ODPR DASHBOARD OF SHARED GOALS AND MEASURES TO MONITOR AND ACT

BUILDS A “CADENCE OF ACCOUNTABILITY”

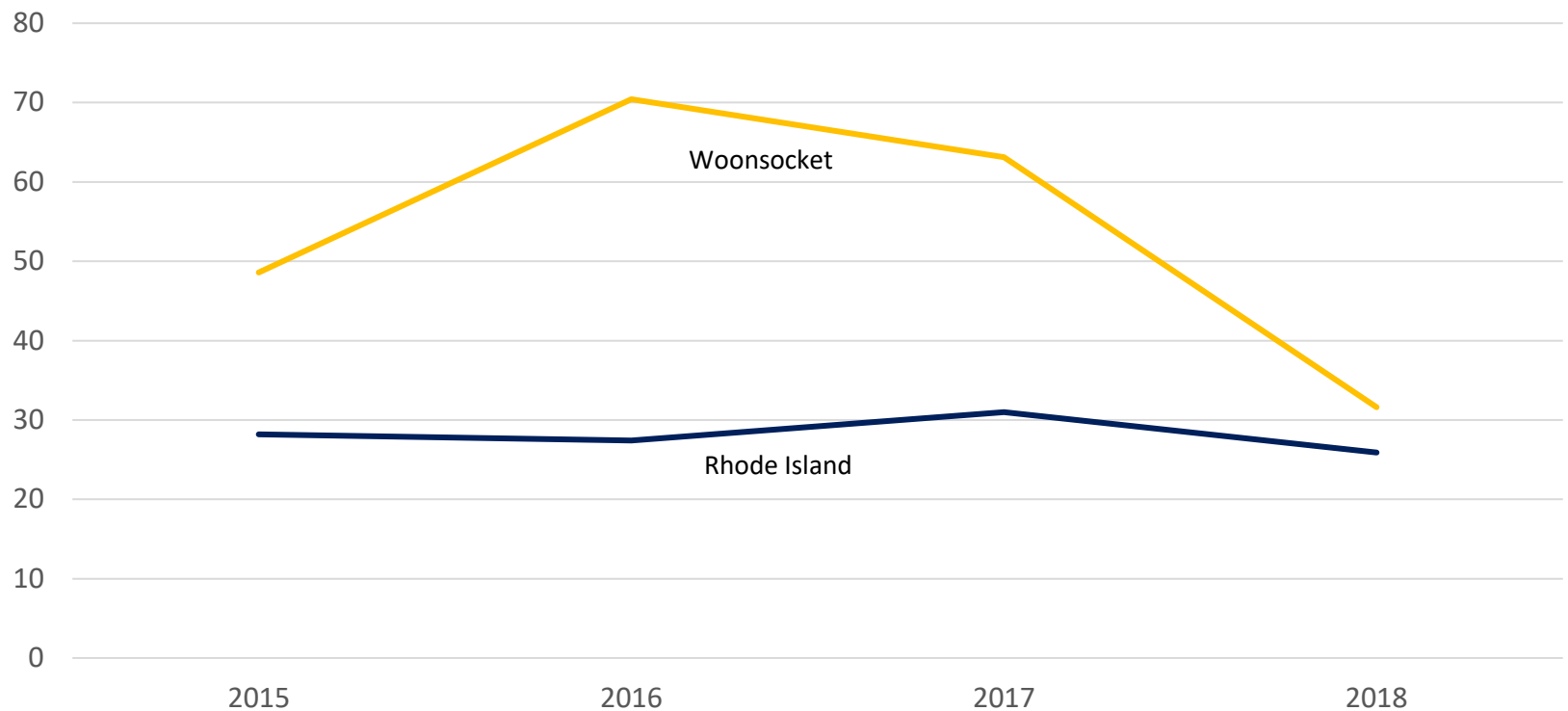
Goal Met - Reduce overdose fatalities by 25% by 2019

Woonsocket Health Equity Zone Metrics and Goals										
OVERDOSE Prevention and Recovery Reduce deaths 33% by 2020	INDICATOR/MEASURE	DATA SOURCE	Baseline 2015	2016	2017	2018 TARGET	2018 Outcome	STATUS	2020 TARGET	Notes
OVERARCHING GOAL: SAVE LIVES (primary)	Reduce # of overdose deaths 33% by 2020	Preventoverdose.org	21	29	26	19	14		14	51.7% decrease in 2108 from spike in 2016
OVERARCHING GOAL: SAVE LIVES (secondary)	ED visits	Preventoverdose.org	45*	40*	108*	Decrease 25%*	128		Decrease by 33%	*ED Data under-reported in 2105, '16, '17. 2018 is baseline
OVERARCHING GOAL: SAVE LIVES (proxy/secondary)	Police calls					N/A	pending		N/A	Hotspotting provides opportunity for targeted outreach. Local data no longer available, centralized to RIDOH State PD
		WOON Police	39	N/A	59					
OVERARCHING GOAL: SAVE LIVES (proxy/secondary)	EMS call - suspected OD and transported to Landmark ED					(Decrease 25%)	129		112 (Decrease by 33%)	Anchoring data for unavailable ED data and opportunities for 1st responder strategy. Local data no longer available, centralized to RIDOH
		WOON EMS	N/A	129	138					
TREATMENT: MAT is available immediately and locally	Double capacity for MAT services (suboxone/vivacrol)	THC/CCA*			Baseline 34% of capacity utilized	Increase by 33%	40.4% increase Thundermist ↑ 57.6%, 2017-92; 2018-145 CCA ↑ 4.5% 2017-44; 2018-46		Increase by 50%	Increased capacity in waived providers does not translate to more treatment slots. To address this CCA launched COE Aug 2017 & Thundermist added MAT NCM 2018.
TREATMENT: MAT is available immediately and locally	21 de	Thundermist/CCA/Urgent Care	N/A	N/A	1-4 weeks	0-2 days	COE Intake within 2 days. Induction can take more than 2 days and up to 4 weeks		Same business day intake, induction within 24 hours	Wait has decreased from months to weeks. Goal is to reduce to real time access.
RESCUE: Naloxone is plentiful. People know how & when to use it.	Naloxone kits distributed	WPC	N/A	198	794	1000	1289 kits (3130 per 100,000)		2000	Need Funding and targeted strategy for naloxone to high risk people
RECOVERY	Social Events held by Serenity Center	CCA	12	9	14	20	12		N/A	
RECOVERY	MAT/Alateen Support groups	CCA/WORKGROUP	0	0	0 (June)	2 weekly	3		4 weekly	No alateen
RECOVERY	Increase participation level at the Serenity Center (new event participants/drop in members)	CCA	67	75	63	50	69		N/A	

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Overdose Fatalities – Woonsocket 2015-2018

WILDLY IMPORTANT GOAL – REDUCE OD DEATHS BY 25%
From 21 deaths in 2015 to 14 deaths in 2020



Prevention in Rhode Island

May 2020

Governor's Overdose Task Force

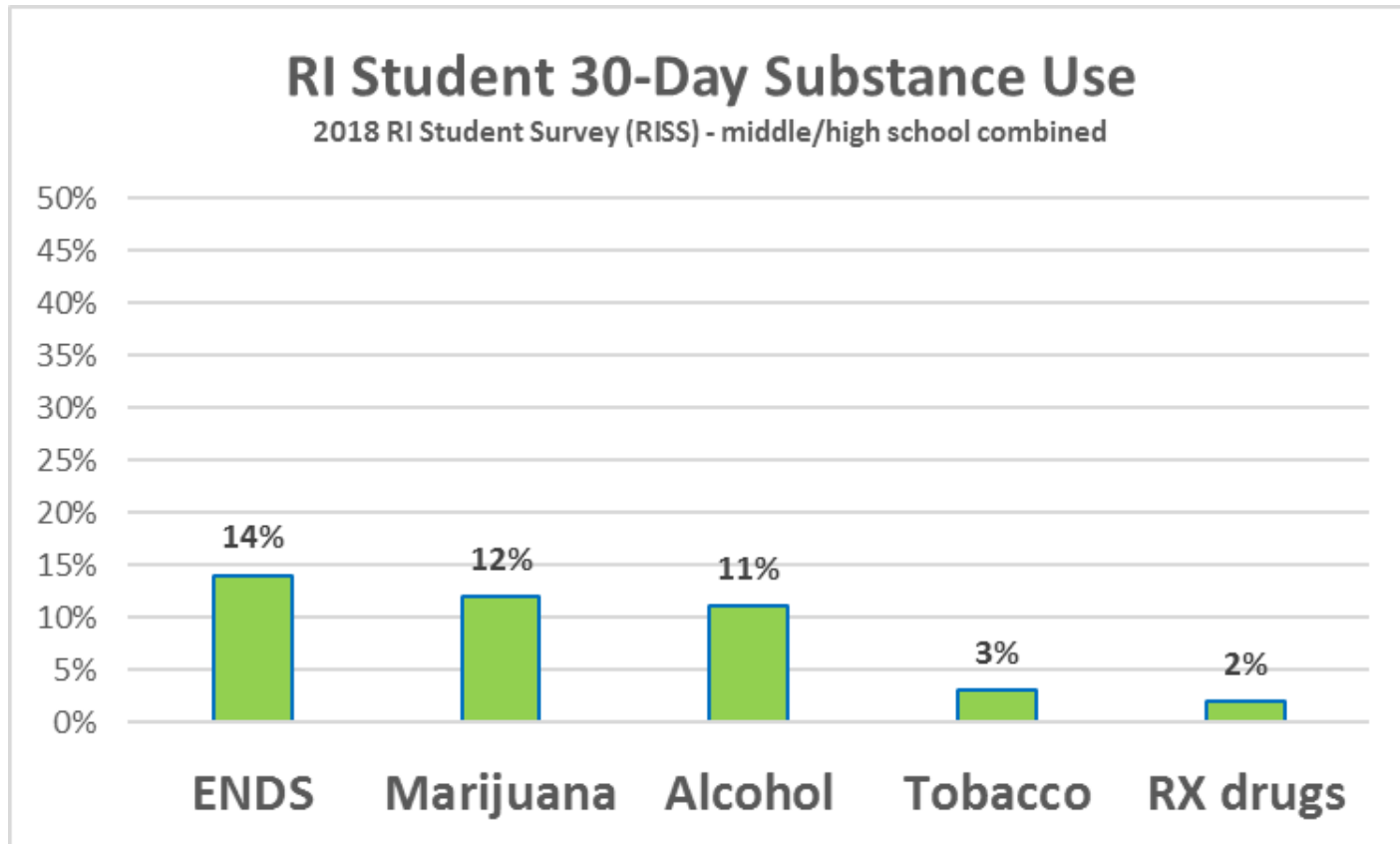


**Rhode Island
Regional Coalitions**
Prevention and Health Promotion for Life.

Goals of Prevention

Prevent substance use before it starts

Delay initiation to allow brain maturation

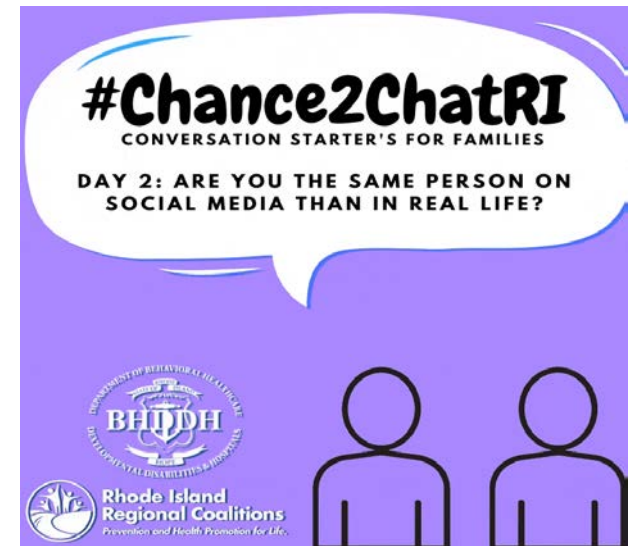


Rhode Island: Targeting Teens and Parents

RI Prevention Coalitions are performing virtual services, special edition of newsletter to parents: **Connecting During COVID-19**

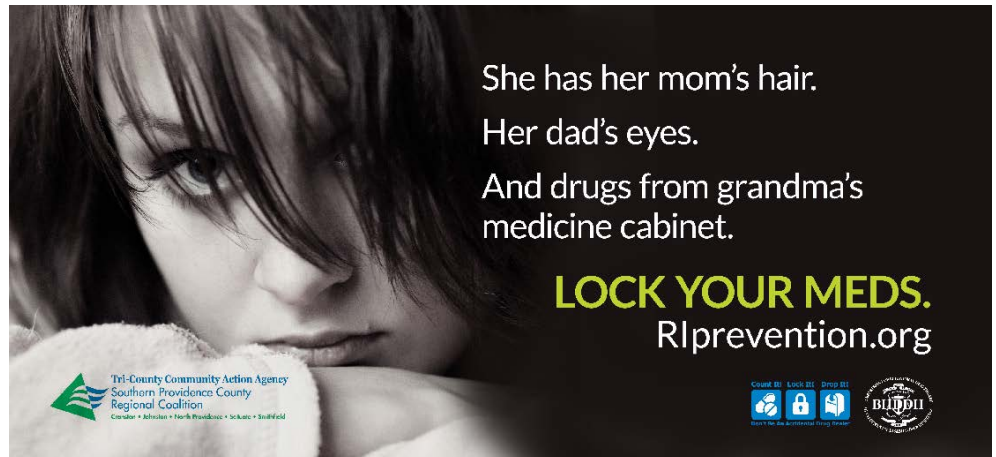
Weekly podcasts with relevant topics: mindfulness, suicide prevention during a pandemic, etc.

#Chance2ChatRI offering on Facebook and Instagram - a daily conversation starter for families with their teens



Opioid Prevention During COVID

- Drug Take Back Day - CANCELLED
- Partner with CVS Health - Mailer bags, Detera, and Dispose RX
- Distributed information on safe storage at meal sites
- Lock bags provided to Bradley Hospital
- Distribution of info about OD risks with **new MAT hotline**



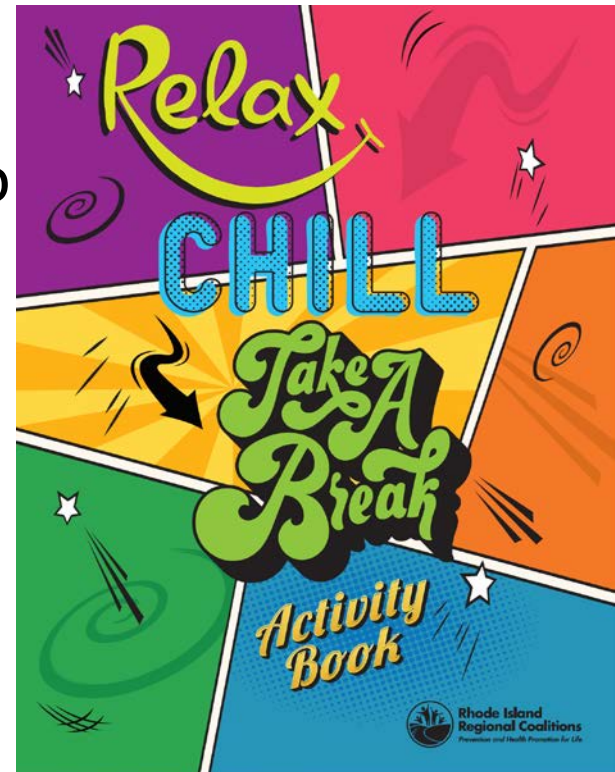
Opioid Prevention During COVID

- Mental health check-ins with faith leaders.
- Family mental health ads - speaking to your children/asking if they are ok.
- Know the 5 Signs from the *Change Direction* campaign.
- PSA about health centers offering treatment and tele-medicine.



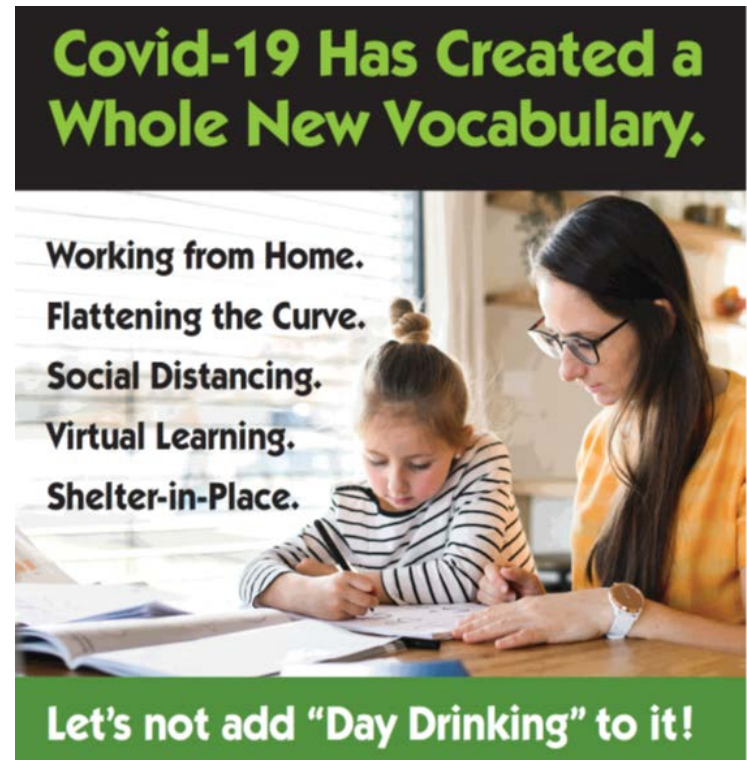
Opioid Prevention During COVID

- Mental wellness activities for youth, adults, and seniors – booklets, puzzles.
- **Project Success**— converting online to distance learning with fidelity.
- Outreach to at-risk youth.



Opioid Prevention During COVID

- Concerns about irresponsible alcohol consumption.
- Newspaper ads.
- Promote BH LINK through Liquor store posters.



Opioid Prevention During COVID



Prevention Works!

**Start Early,
Talk Often,
Listen**




So. Providence – Pattie Sweet
Blackstone Valley – Lisa Carcifero
Providence – Obed Papp
Kent County – Kathy Sullivan
East Bay – Denise Alves/Kristen
Westmoreland
Newport County – Rebecca Elwell
South County – Heidi Driscoll






PUBLIC COMMENT



Why might Rhode Island be seeing fewer emergency department visits for suspected opioid overdoses during the last several weeks?



How can the Governor's Task Force and State agency partners continue to support local drug overdose prevention and intervention efforts during the COVID-19 crisis?