

Governor Dan McKee's Overdose Task Force March 13, 2024

Louis Cerbo, EdD; Interim Director, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities & Hospitals Philip Chan, MD, MPH; Consultant Medical Director, Rhode Island Department of Health Ana Novais, MA; Assistant Secretary, Rhode Island Executive Office of Health and Human Services Richard Charest, MBA; Secretary, Rhode Island Executive Office of Health and Human Services Thomas Joyce, LCDP, CPRS; Task Force Community Co-Chair Cathy Schultz, MPH; Task Force Director, Rhode Island Executive Office of Health and Human Services

RHODE ISLAND

Welcome and Announcements



Opioid Settlement Advisory Committee Update





New Opioid Settlement Advisory Committee Project Manager

Mariama Jallow, MBA, LNHA



State Fiscal Years: 2023, 2024, and 2025 Overdose Budget

Abate		25 Recommendations ardship, and McKinsey Comb	ined
Pillar	FY 2023 Spent	FY 2024	FY 2025 (Recommended)
Racial Equity	\$0.00	\$300,000.00	\$500,000.00
Governance*	\$505,981.53	\$2,840,808.00	\$2,676,695.00
Data	\$544,157.48	\$1,153,602.31	\$1,299,009.00
Social Determinants of Health**	\$1,126,841.22	\$6,619,779.42	\$2,350,000.00
Prevention	\$2,467,846.95	\$5,425,472.29	\$2,900,000.00
Harm Reduction & Rescue	\$2,442,189.99	\$9,298,975.75	\$4,589,318.00
Treatment	\$2,131,586.37	\$6,436,498.39	\$5,374,698.00
Recovery	\$545,197.20	\$3,500,439.00	\$3,800,508.00
Total	\$9,763,800.74	\$35,275,575.16	\$23,490,228.00

*Includes administration/evaluation capacity and emergency funds (ex. Municipal funds (FY2025) only, warming stations, CPR trainings, sponsorships)

**Includes communications, basic needs, and homelessness prevention (medical respite, wound care, translations, campaigns, etc.)



Thank You

Mariama Jallow

Mariama.Jallow@ohhs.ri.gov



Rescue Work Group Update

Governor's Overdose Task Force – March 13, 2024

Nya Reichley, MPA || Community Outreach Coordinator, RIDOH Drug Overdose Prevention Program Michelle McKenzie, MPH || Director, Preventing Overdose and Naloxone Intervention (PONI)

Key Priority	Core Strategies	Activities	Status
		Sustain and continue to invest in infrastructure for statewide, centralized naloxone	Completed
	statewide plan and evaluate impact	Continue to monitor statewide guidelines for public naloxone availability, set and meet individual targets for distribution in public and private locations	In progress
	Maximize access to harm reduction	Sustain infrastructure for harm reduction tool hubs (vending machines – Harm Reduction Work Group)	In progress
	materials and resources	Implement harm reduction technologies including resources for people that use alone	In progress
Strengthening	Ensure harm reduction convious are	Pilot Overdose Prevention Center	In progress
Harm Reduction	Ensure harm reduction services are comprehensive and responsive to the	Expand drug user health services	In progress
and Rescue	evolving needs of people who use drugs	Strengthen and expand existing outreach	In progress
and hescue		Ensure infrastructure rapidly responds to emerging situations	In progress
	Improve alternate, post-overdose engagement strategies	Improve post-overdose strategies following an overdose	Needs Attentior
	Prioritize racial equity focused harm reduction outreach strategies, including undocumented people	Expand outreach focusing on BIPOC communities	In progress
		Address challenges of Good Samaritan Law	Needs attention
		Continued community policy discussions around drug supply	Needs attentior
	policies	Create a forum for community-driven policy conversations	Needs attentior

Work Group Planning Process and Status

Current Work Group Mission

"Ensure that the overdose reversal medicine, naloxone, is available and accessible to all populations with a focus on those individuals who are most vulnerable and underserved. Additionally, the Rescue Strategy Work Group works collaboratively with local partners to identify diverse and sustainable funding for a naloxone supply in all Rhode Island communities."

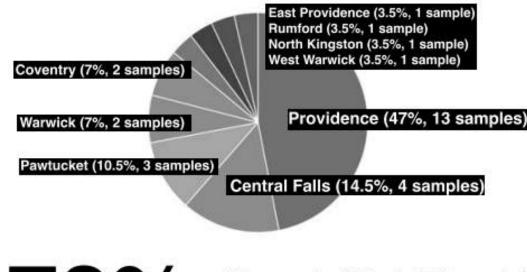


Xylazine – testRI Findings

Xylazine has been found in the local drug supplies in Rhode Island.

We tested 61 samples from May - August 2022 and xylazine was found in 28 of those samples.

Samples containing xylazine were from:



72%

of the samples (20 out of 28 samples) that contained xylazine were sold as **fentanyl.**

The other samples that contained xylazine were: dope with fentanyl (10.5%, 3 samples), crystal meth (7%, 2 samples), percocet (3.5%, 1 sample), crack (3.5%, 1 sample), and carfentanil (3.5%, 1 sample).

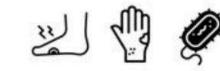
Why does this matter? When xylazine is added to fentanyl/heroin the risk of overdose is higher.

Narcan (naloxone) will reverse the effects of opioids but has not been documented to reverse xylazine's sedating effects. If a person overdoses from a substance cut with xylazine they might still be sedated after Narcan administration.



When used with other sedating drugs like opioids, xylazine can increase the risk of overdose and/or death.

Xylazine use has been associated with skin ulcers and infection.



Chronic use of xylazine can lead to dependence and a withdrawal syndrome that can cause irritability, anxiety, and dysphoria.



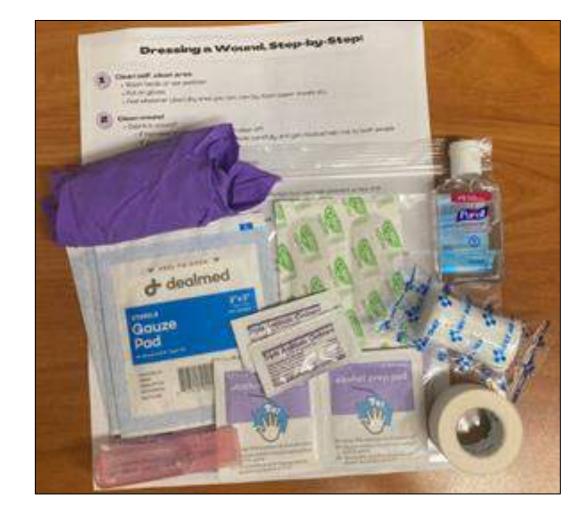
Xylazine Workflow

New Finding	 Xylazine detected in the Rhode Island drug supply. Confirmed by testing starting in May 2022 and community outreach reports Initially, 62% of samples tested (52/84) containing fentanyl also had xylazine
Work Group Session	• The Rhode Island Department of Health (RIDOH) coordinated numerous multidisciplinary meetings to discuss steps to address concerns related to xylazine exposure
Content and	Accurate information, accessible to people who use drugs, the public, and community partners
Program Development	 Enhanced overdose prevention training Collaboratively developed street wound care program, funded by the Rhode Island Executive Office of Health and Human Services (EOHHS)
Community Outreach	• Using newly developed communications materials and training to educate broader community about presence of xylazine and potential risks

Community Outreach || Wound Care Kits

Preventing Overdose and Naloxone Intervention (PONI) begins distributing wound care kits in March 2023

Dispensed approximately 3,000 wound care kits to communitybased organizations since March 2023



Updated Overdose Prevention Training



Increased Overdose Risk Factor

Xylazine is a tranquilizer, which compounds the effects of an opioid and further suppresses breathing.

Drugs contaminated with xylazine may not appear any different.

Xylazine can increase the risk of overdose and cause drowsiness, unresponsiveness, slow heart rate, and decreased breathing. If someone is experiencing an overdose, use standard opioid overdose response:

- Call 911
- Give naloxone every two minutes until breathing returns
- Administer CPR, if you know how, in combination with naloxone

Focus on the breath!

Administer naloxone UNTIL breathing is restored.**

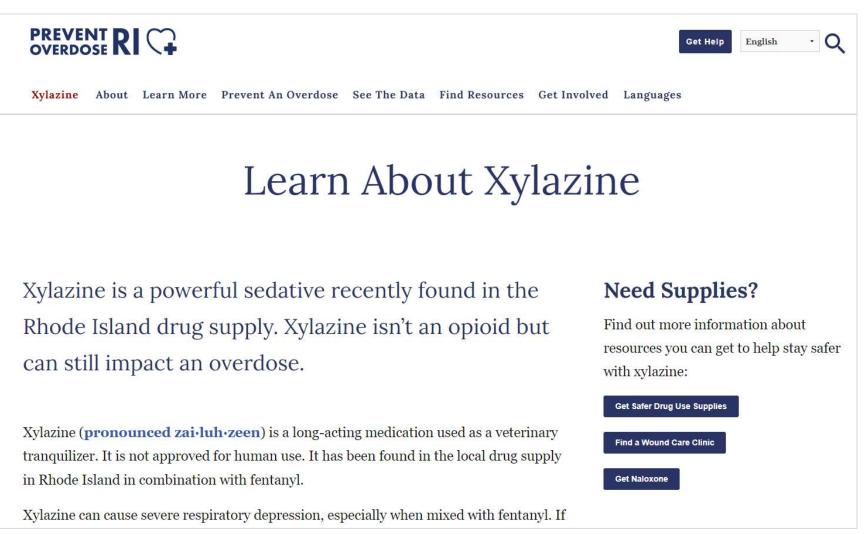
Once the person is breathing, place them in the recovery position and remain with them until help arrives.

**They may remain sedated after breathing is restored



Prevent Overdose RI (PORI)

preventoverdoseri.org/xylazine



Four Ways to Stay Safer with Xylazine

Xylazine is a powerful veterinary sedative recently found in the Rhode Island drug supply. Here's how to stay safer:

Have naloxone nearby

Use new supplies and get

Drugs that have xylazine in them very often have

fentanyl, too. Make sure

you and your friends.

wounds treated

Xylazine can cause severe

wounds that can lead to

an infection. Always use

new supplies and get

care for wounds.

carry naloxone.

Use near someone who can check on you

Make sure someone is around to administer nalozone if you overdose.

Call 911 first if there is an overdose

901 will instruct you on how to support. the person's breathing. If the person is breathing again but still sedated, put them on their side supported by a bent knee. The Good Samaritan Law provides certain legal protection, whether you have drugs on you or not.

Flyers

Get FREE safer drug use supplies and other resources:





Parent Support Network 53% Centerville Boast Suite 202. Tel 405-603-6069 Hours Mon.Fit. 9 a.m. 5 p.m.

Thurs., 10 a.m. 2:30 p.m.

For safer drug use supplies, resources, and more information, visit PreventOverdoseRLorg/xylazine



OTVERSENT:

Jane Addance

AIDS Care Ocean State 557 Broad Street, Providencia, 81 02907 Tel: 401-781-0665 Hours: Mon-Fil., 8:30 a.m.-4:30 p.m. Ture, & Thurs, 6 p.m. 8 p.m.

Community Care Alliance 545 MARY SEARCH, 2HD PHYLE, Vidoesboket, NI 02895 Tel: 401-235-6044 Hours: Mon. Fri, 9 a.m. to 4 p.m.



How to Stay Safer with Xylazine

Xylazine is a powerful veterinary sedative recently found in the Rhode Island drug supply. Xylazine isn't an opioid but can still impact an overdose.

Have naloxone and don't use alone Drugs that have xylazine in them very often have fentanyl, too. Make sure you and your friends carry

naloxone. Make sure someone is around to administer naloxone if you overdose.

Call 911

If you think that someone is overdosing, call 911 first and administer naloxone until breathing is restored. The Good Samaritan Law provides certain legal protection, whether you have drugs on you or not.

Support breathing

If the person is breathing again but is still sedated, they don't need more naloxone. Put the person on their side supported by a bent knee. This will help them breathe.

Treat your wounds and use new supplies Xylazine can cause severe wounds and ulcers that can lead to an infection. Wounds may occur even if you do not inject or in places where you never injected. It's important to use new supplies and to get medical care for wounds.

For safer drug use supplies, resources, and more information, visit PreventOverdoseRLorg/xylazine PREVENT R

PREVENT R OVERDOSE



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Palm Cards

BIPOC Outreach and Engagement Survey

The RIDOH, PONI, and University of Rhode Island (URI) developed a survey as an environmental scan on current engagement efforts to BIPOC individuals and communities – what resources do they feel they are missing?



Results:

- All respondent organizations prioritize outreach to BIPOC communities, have made changes to enhance engagement to BIPOC communities
- Some respondents indicated a lack of racial and ethnic diversity among administration and staff
- Language or cultural barriers limit organizations' ability to engage BIPOC community members

Looking Ahead...

- 1. Refine Rescue Work Group mission and expand definition to include other life-saving interventions
- 2. Expand connections to more diverse communities to increase naloxone distribution and collaborate with Spanish Overdose Prevention Group
- **3.** Support community outreach efforts for naloxone intervention and overdose prevention
- **4**. Address health disparity of higher rates of overdose in BIPOC communities







westbay community action

Helping people. Changing lives.

Mobile Wound Care and Medical Respite

Responding to Emerging Trends in the Overdose Epidemic: An Update for the Governor's Overdose Task Force RHODE ISLAND

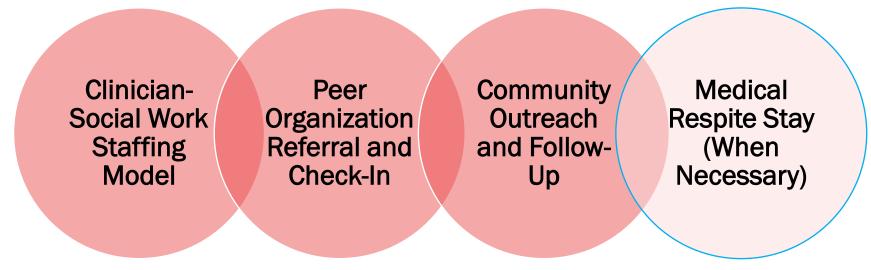
Medical Respite and Mobile Wound Care Overview

In response to the emerging issue of Xylazine, the Executive Office of Health and Human Services (EOHHS) quickly mobilized existing medical respite partners – Westbay Community Action Program for an expansion of this new initiative into the community with a focus on mobile wound care.



How Mobile Wound Care Works

Individuals and/or peer harm reduction organizations can call 401-871-4389 Monday–Thursday 8 a.m. to 6 p.m. for mobile medical respite and assistance for those experiencing wounds.



- An essential component of this service is the coordination with peer organizations that organize dates and times for visits with clients in need and who also prepare clients for seeing wound care specialists.
- Typically, there are 7-8 clients served at each site during each visit, resulting in a 2-3 hour visit per site. At times, more than 10-12 clients are seen daily.



Current Mobile Wound Care Sites

Emergency Medical Services (EMS) Reports for Suspected Opioid Overdose by City/Town, 2016-2023

Community Care Alliance, Safe Haven, Woonsocket Project Weber/RENEW, Pawtucket Project Weber/RENEW, Providence Thrive, Motel 6, Warwick Parent Support Network, West Warwick HEZ

Current Mobile Wound

Care Static Sites

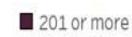
- Data updated biannually
- In July 2023, improvements to the Rhode Island Medical Services Information System (RI-EMSIS) case definition; data from 2018- present have been updated with new case definition and may not match historical numbers.
- 2022 population statistics have not yet been released; 2021 population counts are used as a proxy for 2022.











Less than 5





Expanding Mobile Wound Care

Adding mobile medical respite sites for routine wound care support is possible if there a is demonstrated need and coordinating partner that serves clients in identified sites/areas.

Getting Connected:

- Email alertwoundcare@alertems.com
- Reach out to Alex at 774-991-5031 for more information



Mobile Wound Care Data Results

Since launch of the mobile wound care services on 1/3/2024, the following results have been reported and documented:

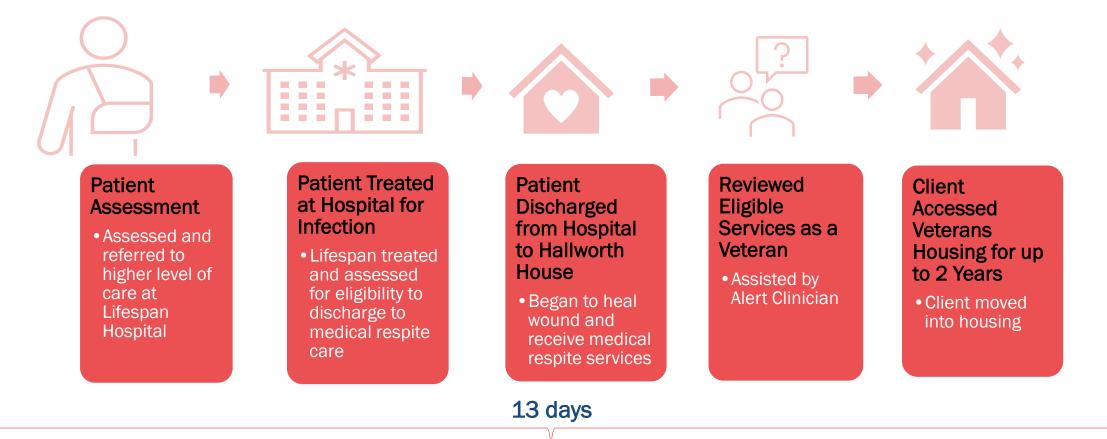
Description	Metric
Sites*	
Total Unique Number of Sites Served	5
Total Unique Number of Encampments Served	10+
Clients*	
Total Unique Clients	29
Total Number of Reoccurring Patients	10
Total Number of Appointments	86

*data as of 3/1/2024



Mobile Medical Respite and Wound Care Case Study

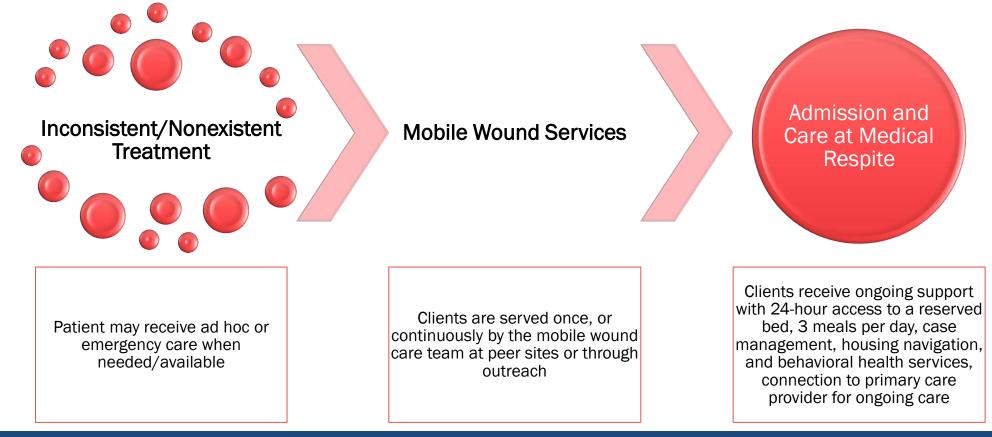
Scenario: In January 2024, the Mobile Wound Care Team identified an unhoused resident out in the community that had a large wound on his forearm.





Next Steps for Mobile Wound Care and Medical Respite

In addition to impact evaluation for the duration of this pilot program, the following is also planned for the near term to bolster the mobile medical respite and wound care services:





Thank You for Your Partnership!

This program would not be as successful as it is today without the direct feedback and partnership of the community at each step of the design and implementation path. Thank you!





Public Comment

