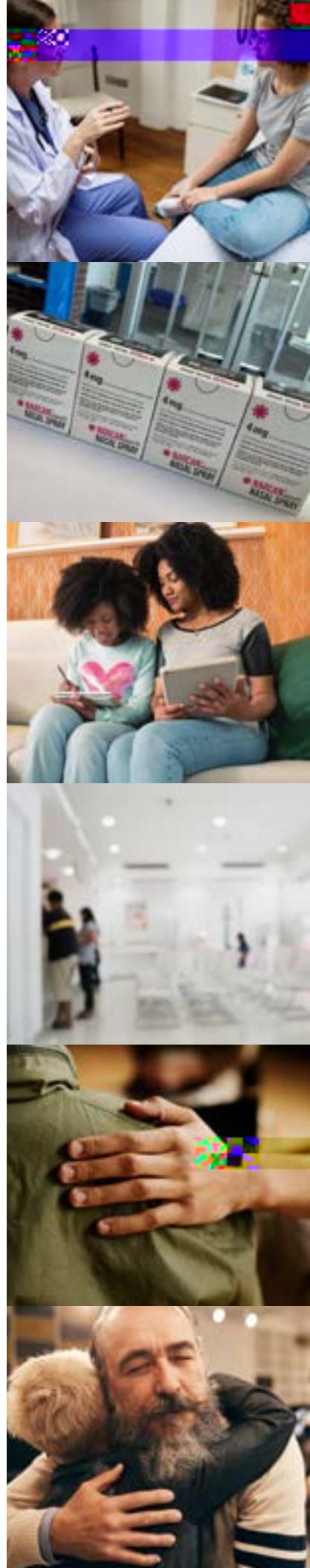


Opioid-Overdose Reduction Continuum of Care Approach

A Guide for Policymakers for
Implementing Evidence-Based Strategies
that Address Opioid Overdose



**NIH
HEAL
INITIATIVE** | HEALing
Communities
Study

NIH National Institutes of Health
HEAL Initiative

NIH National Institute on Drug Abuse
Advancing Addiction Science

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1. Prioritize delivery of services to those who need them most in criminal legal settings and other venues 5.....
2. X 5 ü 0 0 N á 0 ü 3 n « D!U pòf PJq \$P#

ORCCA outlines the priority populations and 19 essential evidence-based interventions to reduce opioid overdose deaths:

- Í P Prioritize delivery of services to those who need them most in criminal legal settings and other venues
- Ð PX 5 ü 0 0 N á 0 ü 3 n « • @ 0 3 5 5 V ü • N á 3 0 N 0 → N á methods
- Ñ R Use data sources to target intervention to those who need services
- Ò E Engage individuals with lived experience in 3 0 → á @ á n • ø á Ó 5 8 → 0 @ @
- Ó P

Prioritize Individuals at Heightened Risk for Opioid Overdose

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healthcare system in the preceding year. Reducing overdose deaths requires getting overdose prevention to those who need them. Communities can focus on

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individuals who:

ZHave had a prior opioid overdose

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Use data sources to target intervention to those who need services

Rapid and proactive use of existing data can help detect hot spots for opioid overdose. Communities can create new records systems or population detection programs using existing records systems. Useful data include:

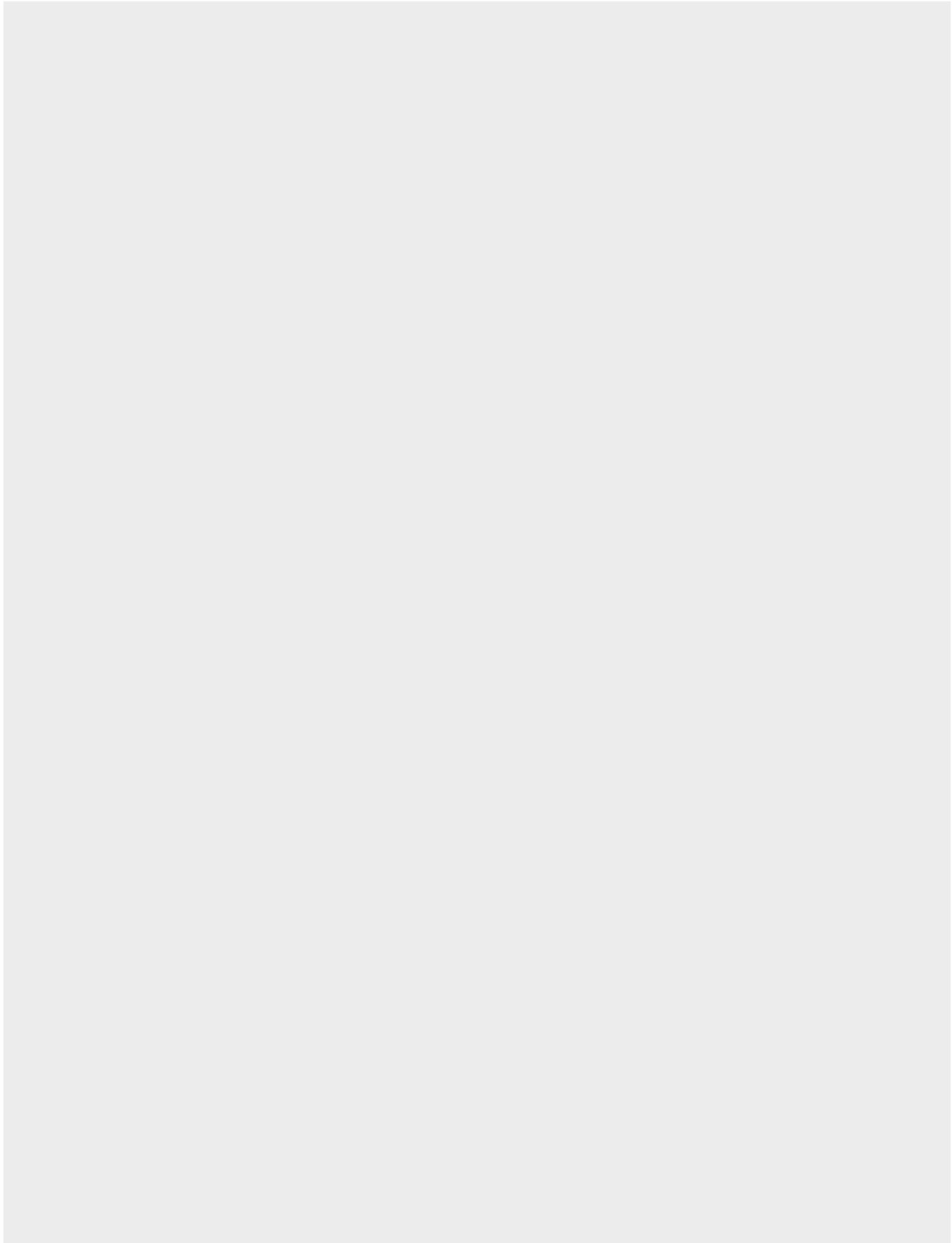
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- Z Emergency department encounters
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center records
- Z Records of individuals encountering law enforcement
- Z (• N • ° 8 ° • N • ü a N u 8 ⁰ n a ⁰ o « • 8

Engage individuals with lived experience in the decision-making process

Individuals with lived experience are considered experts within their diagnosis or health condition.

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Hamilton County Justice Center: Innovations to Address Substance Use Disorders for Justice-Involved Populations

(continued from previous page)

provider at the HCJC who administer and monitor

within 48 hours of receiving the referral.

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time registered nurse to oversee the medication

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an additional 600 clients and induct an additional 138

clients per year.

PEER MENTORS AND REENTRY SERVICES

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HCJC pairs them with peer mentors who help with

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appointments and provide support to the individuals

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community.

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agencies providing individualized care in the

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and recovery housing programs. HCJC staff and peer

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community provider to ensure continuity of care.

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Addiction Services Council in Cincinnati.

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Opioid Overdose Prevention Education and Naloxone Distribution (OEND)

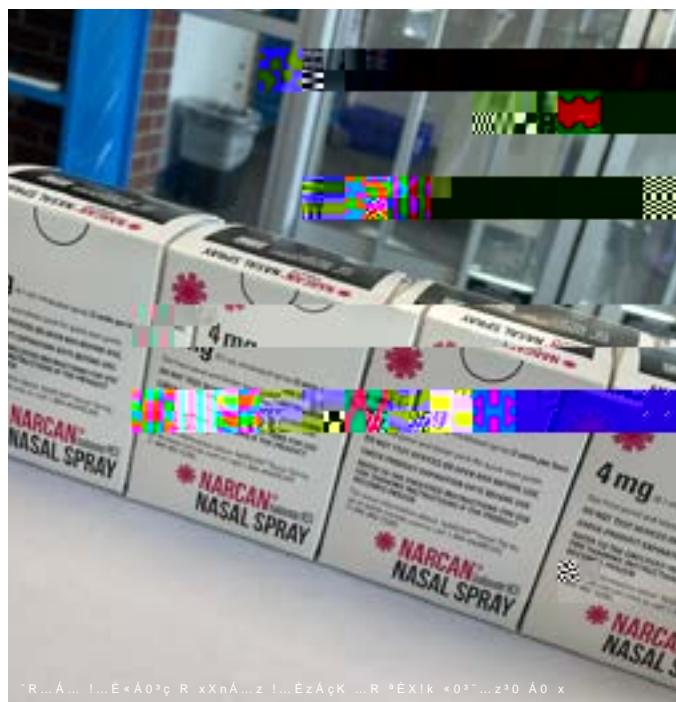
Naloxone administration reverses an opioid overdose if administered in time. Overdose education and

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The best evidence for reducing overdose through OEND has been seen in communities that proactively make QEND accessible.



"In the battle against the overdose death crisis, overdose education and naloxone distribution (OEND) isn't just a choice; it's a necessity. It's the bridge that connects every community and every family to the power to save lives. Naloxone can give people who use opioids the chance to live and potentially connect to recovery services when they are ready. Our HCS communities worked with New York's already strong existing statewide naloxone distribution infrastructure

N á 3 o•u @ N 80•-Y - V äN u saturation, battle stigma, and get naloxone in the hands of vulnerable populations and their social networks."

Nabila El-Bassel, PhD,
Professor, Columbia University

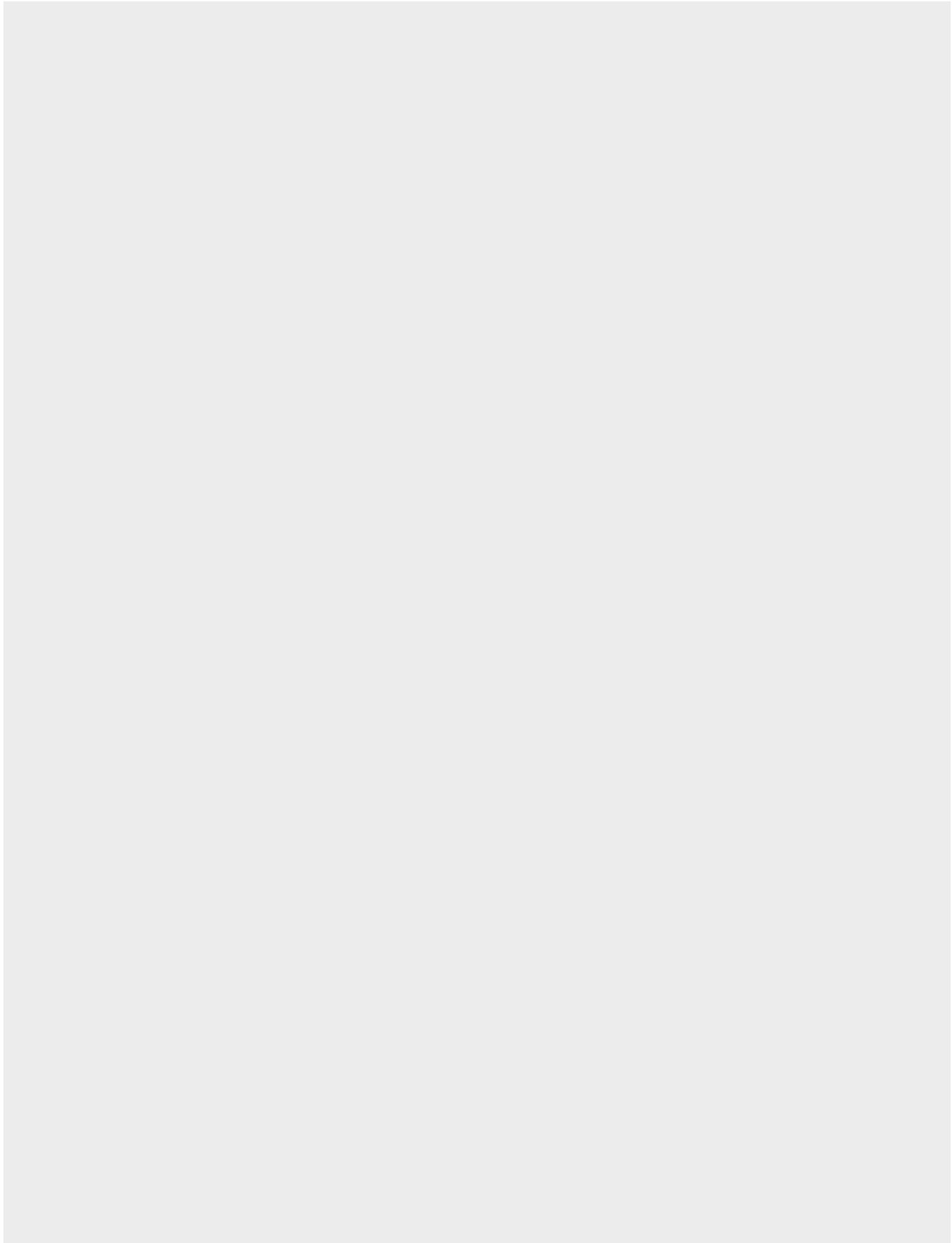
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New York Peer Engaged Overdose Education and Naloxone Distribution (OEND) (continued from previous page)

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experience and promoting community connections.
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Enhance Delivery of Medications to Treat Opioid Use Disorder

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Expand MOUD capacity in healthcare and criminal legal settings, and through telemedicine

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overdose fatalities and improves patient outcomes.
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in overdoses at three months and a 59 percent
reduction in overdoses at 12 months. ¹⁸ (° @ 5ãN° NÝ°
°nã³° -°K °³ã-•Nä @ •8° @Näüü V ³°8VNäüä•°³ ã @N
- V äNä°@P ! «•88ä°8@ N x...È(•-°@ @
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and poor treatment retention. ¹⁹

Healthcare settings

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•³³ã-•Nä 8 @V «@N• -° V@° ³ä@ 8³°8 b³È(c N8°•N ° N
settings and recovery programs. Expansion increases
-•5•-äNu • ³ 8°³V-°@ N8°•N ° N «•88ä°8@ Ô 8 5•Nä° N@P
Rä@N 8ä-•üüuK •³³ã-•Nä N8°•N ° N Y•@ «°° ã@ ü•N°³
from general medical and mental healthcare settings
ã NÝ° ÈP³PK • ³ x...È(N8°•N ° N Y•@ «°° ãNN°³
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Criminal legal settings

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58 «•Nä K • ³ 5•8 ü°K ã@ • -8äNä-•ü 55 8NV ³#€ Ká

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On-site MOUD initiation in community-based settings

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where patients may present with complications

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Massachusetts Bridge Clinics

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interdisciplinary teams that may include addiction

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Massachusetts Bridge Clinics

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Remove barriers to housing services

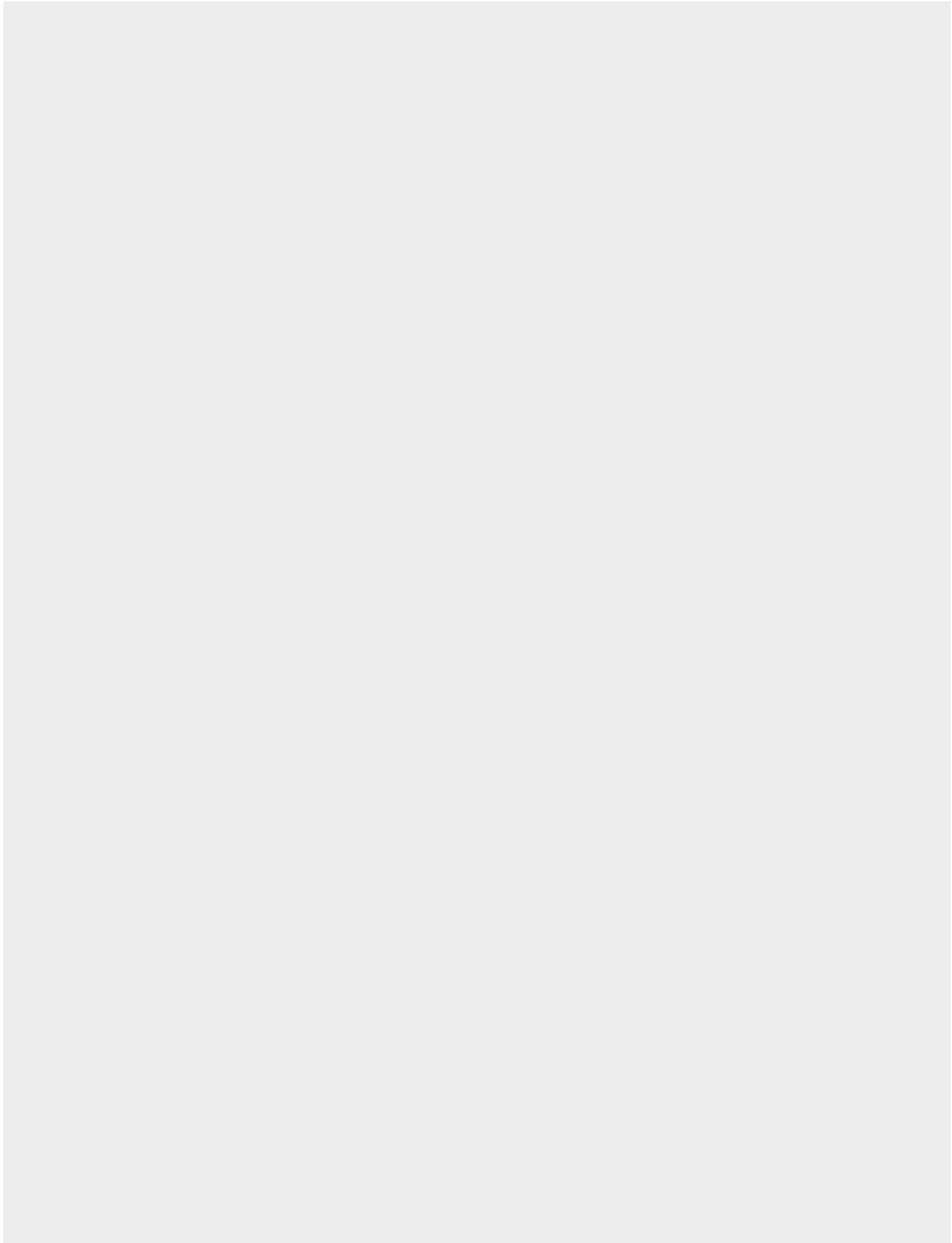
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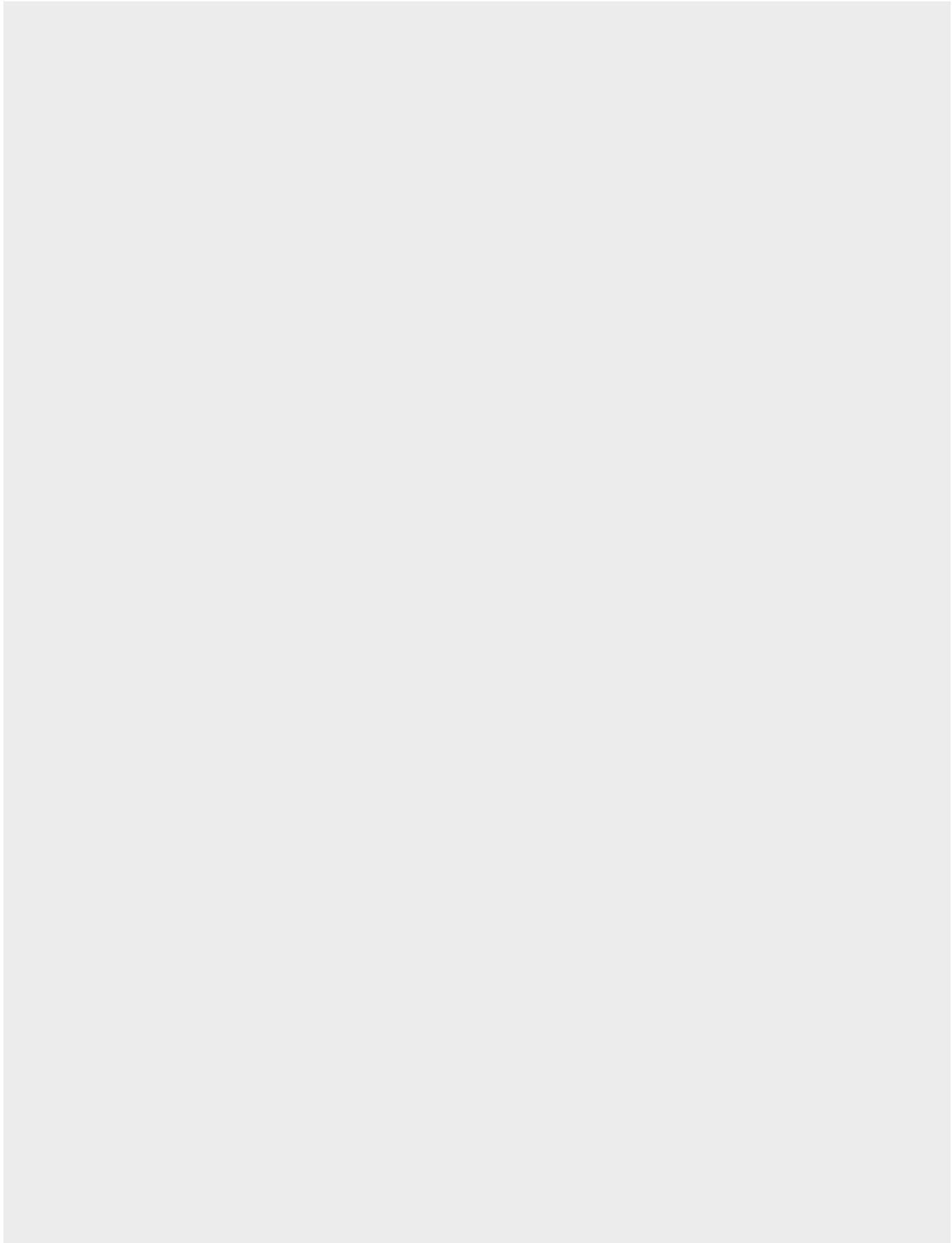
**Address barriers to and capacity
for needed resources, including
insurance coverage, food security,
childcare, and employment**

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Social determinants of health such as insurance coverage, food security, childcare, and employment can impact treatment outcomes. Recommended steps to address gaps in these services include determining



Kentucky Transportation Program Opens the Road to Treatment (continued from previous page)

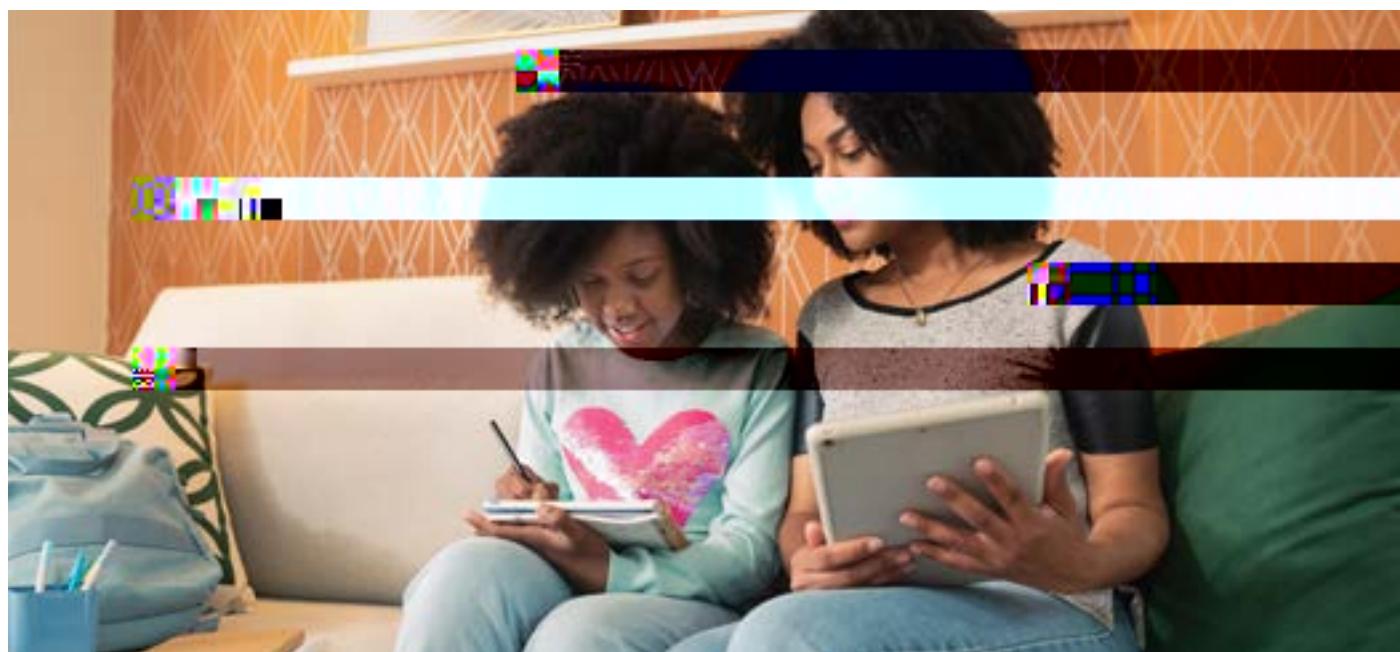


Safer Opioid Prescribing, Dispensing, and Disposal Practices

Over 9 million Americans ages 12 and older misused prescription opioids in 2021, according to SAMHSA's National Survey on Drug Use and Health, and the CDC reports that nearly 17% of all overdose deaths involved a prescription opioid in that same year.

This means strategies to promote safer opioid prescribing and ensuring people have access to and know how to safely dispose of unwanted opioids remain important tools in our collective overdose response efforts."

Yngvild Olsen, MD, MPH,
Director of the Center for Substance Abuse
Treatment (CSAT), Substance Abuse and Mental
Health Services Administration (SAMHSA)



Ensure safer opioid prescribing for acute pain across healthcare settings

continuing education improves healthcare
appropriate ways to dispose unused prescription
opioids can reduce excess opioid supply in
acute pain settings

Implement safe and effective opioid disposal

continuing education improves healthcare
appropriate ways to dispose unused prescription
opioids can reduce excess opioid supply in
acute pain settings

Resources

Opioid-Overdose Reduction Continuum of Care Approach (ORCCA)
Practice Guide 2023

MOUD Expansion

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an expert committee that examined the evidence

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ZHighlights

ZConclusions

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Safer Prescribing

Pain. Á Y⁰ D Ð Ð 0³ ā Nā Ô N Y⁰ Õ V ā 3⁰ ü ä 0 ä - ü V³ 0 @ Í Ð 8⁰ - 0³ • Nā @ Ô 8 5 8⁰ @ - 8 ä « ä Ö 5 ä ä 3 @ Ô 8 • 3 V ü N @ o ä N Y • - V N⁰ K @ V « • - V N⁰ K 8 - Y 8 ä - 5 • ä P X N ä - ü V³ 0 @ recommendations for determining whether to initiate 5 ä ä 3 @ K Ô 8 @ 0 ü 0 - N ä Ö 5 ä ä 3 @ • 3 3 @ • 0⁰ @ K Ô 8 3 0 - ä 3 ä Ö N 8⁰ • N⁰ N 3 V 8 • N ä • 3 - 3 V - N ä Ö Ô ü ü o n V 5 K • 3 Ô 8 • @ @ 0 @ @ ä Ö 8 ä @ Ø • 3 • 3 3 8⁰ @ @ ä Ö Y • 8 @ Ô 5 ä ä 3 V @ 0 P

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discontinuation of opioid pain medicines and requires

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individualized tapering. 3 n ä @ 8 ä⁰ @ á • 8 ä Ö • 0 • ä @ N

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 Barriers and facilitators to clinician readiness to provide
 ° 08Ö° -u ³º5•8N ° NkX ãNã•Nº³ « V5A8MA 85Ýã °P
 Network Open . 2020:e204561.
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Spotlight references: Hamilton County

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Acknowledgments

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