Using Naloxone to Reduce the Number of Opioid Overdose Deaths Among Clackamas County Inmates Post-Release

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Disclosures

- No disclosures/financial conflicts of interest
Learning Objectives

- Discuss 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.
Overdose Prevention in Clackamas County

- Clackamas County Public Health’s response like many others has included the implementation of Naloxone into community-based programs including law enforcement agencies.

- In 2016, all city Police Departments and the Sheriff’s Office Deputies agreed to participate in the Clackamas County Naloxone Program and received training.

- Clackamas Fire supplied experienced EMS staff to provide training to law enforcement on the signs and symptoms of opioid overdose, naloxone administration, reporting guidelines, and the Good Samaritan Law.
Expanding the program....

- Winter 2016- Initiative expanded to Community Corrections and training was provided to:
  - Parole and Probation Officers
  - Staff at Residential Services
  - Naloxone Distribution Project launched through the Clackamas County Transition Center.

- 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.¹

- Community naloxone distribution programs are capable of reaching sizeable populations of high-risk individuals and facilitating large numbers of overdose reversals.²

- The Clackamas County Transition Center provides crucial services to people leaving jail and to those at risk of returning. Providing Transition Center clients with overdose prevention messages and access to naloxone is an opportunity to impact opioid overdose mortality post-release.
Goals of the project:

- 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 and overdose-related mortality among those with substance use histories and those recently released from jail.
Project overview

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

- Engaging with clients while in custody
- Flyers and electronic communication with inmates in the jail
- One on one conversation with clients releasing from custody at the Transition Center

What is the process at the TC for obtaining naloxone?

- Correction Counselors, Probation Officers, and/or mentors engage with clients
- Clients complete Privacy Policy Agreement Form as well as an intake questionnaire form
- Clients view a training video with staff that is created by Boston Public Health
- Staff review the kit with the client and client are then given the kit
- If clients are on formal supervision, the appropriate Probation Officer is informed

Information Gathering

- Intake forms are then submitted to our coordinator for data collection
Naloxone Kit

Naloxone kits include:
One (4mg) dose of naloxone
Breathing Barrier Mask
Gloves
Treatment and Recovery Resource List
Information on the Good Samaritan Law
Transition Center Naloxone Pilot Project

FINDINGS: JANUARY-AUGUST 2017
Demographics (n=107)

**GENDER (%)**
- F: 36.8%
- M: 63.2%

**RACE**
- White: 84.3%
- Other: 7.1%
- NH/PI: 1.4%
- Black/African American: 1.4%
- AI/AN: 1.4%
- 2 or more: 1.4%

**ETHNICITY (%)**
- HISPANIC: 12.5%
- NH: 87.5%
Top 5 Cities Listed as Residence (%)

- Portland: 28.0%
- Oregon City: 13.0%
- Milwaukie: 10.0%
- Clackamas: 9.0%
- Molalla: 5.0%
In the last 30 days before incarceration have you used (%)...
Overdoses

HAVE YOU EVER OVERDOSED (%)?

43.0

HAVE YOU EVER WITNESSED AN OVERDOSE (%)?

72.0
Overdoses Experienced or Witnessed

How many times have you overdosed (among those who answered “Yes” to having overdosed)?

- Mean: 1.1
- Minimum: 1
- Maximum: 10

How many overdoses have you witnessed (among those who answered “Yes” to having witnessed an overdose)?

- Mean: 4.9
- Minimum: 1
- Maximum: 100
- Missing data from 7 respondents who answered “yes” to having witnessed an overdose, but did not give a numerical response to the number they had witnessed. Examples of responses were "too many" and "several".
Perception of Risk for an Opiate Overdose

<table>
<thead>
<tr>
<th>Category</th>
<th>Risk (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td>26.4</td>
</tr>
<tr>
<td>Family</td>
<td>20.6</td>
</tr>
<tr>
<td>Friends</td>
<td>69.2</td>
</tr>
<tr>
<td>Partner / Spouse</td>
<td>14.0</td>
</tr>
<tr>
<td>Program Partner</td>
<td>14.0</td>
</tr>
<tr>
<td>Other</td>
<td>10.3</td>
</tr>
</tbody>
</table>

AT RISK FOR AN OPIATE OD (%)?
Interest in Help

- VERY INTERESTED (%): 42.1
- SOMEWHAT INTERESTED (%): 7.5
- NOT INTERESTED (%): 23.4
Relationship Between Personal OD History and Interest in Help (%)

- Have you ever overdosed?
- Very interested in help?

Yes: 43% have overdosed, 42.1% are very interested.
No: 57% have overdosed, 57.9% are very interested.
Relationship Between Risk Perception of Overdose and Interest in Help (%)

- Are you at risk for an opiate overdose?
- Very interested in help?

Yes: 26.4% (Are you at risk) 42.1% (Very interested)
No: 73.6% (Are you at risk) 57.9% (Very interested)
Naloxone Project Phase 2

- Unique opportunity to connect overdose survivors and those at-risk or wanting help to treatment and recovery supports

- Clients who identify as being interested in treatment will be contacted by a Substance Use Disorder (SUD) Care Coordinator will provide care coordination for clients by providing follow-up, assessing level of care needed, and referring the client into appropriate treatment.

- Identify gaps in treatment services, develop more efficient pathways to link clients to treatment and provide better care coordination throughout the referral process and in between levels of care.
Thank you

Sources:

1) Binswanger et al. Return to drug use and overdose after release from prison; a qualitative study of risk and protective factors. Addiction Science & Clinical Practice 2012, 7:3