


LIVE. LONG. DC.

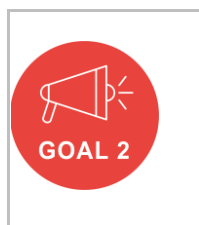
THE DISTRICT'S APPROACH TO SAVING LIVES FROM THE OPIOID EPIDEMIC



Accomplishments and Progress – August 2021


	<p>Reduce legislative and regulatory barriers to create a comprehensive surveillance and response that supports sustainable solutions to emerging trends in substance use disorder, opioid-related overdoses, and opioid-related fatalities.</p>
--	---

- *Strategy 1.1: Establish an Opioid Fatality Review Board to review all opioid-related deaths that occur in Washington, DC.*
 - As a quorum was not met, the Opioid Fatality Review Board (OFRB) was unable to meet for the regularly scheduled meeting on August 10, 2021.

	<p>Educate Washington, DC residents and key stakeholders on the risks of opioid use disorders and effective prevention and treatment options.</p>
--	--

- *Strategy 2.3: Conduct outreach and training in community settings (e.g., after school programs, summer camps, churches, and community centers) to engage youth, parents, educators, school staff, and childcare providers on ways to effectively communicate substance use disorders and how to engage and support those impacted.*
 - The DBH *Supporting Individuals with Opioid Use Disorder* courses are now live and available for registration through the Training Institute website. The two new web courses include: 1) [Supporting Individuals with Opioid Use Disorder: Treatment Support Services: Communication and Engagement](#) and 2) [Supporting Individuals with Opioid Use Disorder: Treatment Support Services](#). The first course educates service providers and families on how to engage with individuals receiving medication for an opioid use disorder (MOUD) and collaborate with one another. The second course discusses services and supports available to individuals with an opioid use disorder (OUD). Since promoting the OUD web courses throughout our various provider networks and stakeholder groups, 491 individuals have enrolled in both courses. Of these enrollees, 385 individuals have completed one course and passed, and 145 are in progress of completion. The courses have increasingly gained attraction from managers with “assignment” capabilities; 346 individuals were tasked with enrolling in the trainings. The courses will continue to be promoted through various networks and provider channels, including the ward-level engagement meetings. Individuals taking the courses can receive one continuing education credit for each course.

- The DC Prevention Centers (DCPCs) just completed their annual site visits for the DCOR2 grant. There are 24 sub-grantees that have been awarded by all four DCPCs across Washington DC. Ward 1 & 2 has two sub-grantees, NAADPC and Georgetown Ministry Center (GMC) and they have also conducted an environmental strategy with GMC where they reached 51 individuals through outreach and educational events in the community. Ward 1 & 2 have also conducted opioid presentation, social marketing initiatives and have a standing order in place for naloxone training. In addition, two community conversations have taken place within the community with 10 participants and two more are slated to take place later in September. Wards 3 & 4 have seven sub-grantees which include DC Recovery Community Alliance (DCRCA), Friends of Riggs-LaSalle Recreation Center, Emory Beacon of Light, Inc, Medical Home Development Group, Black Robin Media, Morgan Jaffee & CORE Life Recovery & Support Services. Two lunch and learn events with 125 participants also took place as part of their environmental strategy and additional opioid presentations took place with Core Life Recovery, DCRCA, Health Boundaries, Emotional Wellness, Recovery Capital and the DC Metro Opioid Crisis. Social media efforts remain to be in place and the grantee is also working closely with American University to raise awareness around opioid abuse and prevention on campus. The grantee also has a naloxone standing order in place. Wards 5 & 6 also has two sub-grantees in place, which include The H3 Project and Total Family Care. Approximately 245 community members were reached through four environmental strategies, and five opioid presentations have also taken place with Community College of DC and their intern group. Ward 5 & 6 also have a naloxone standing order in place. Wards 7 & 8 have 13 sub-grantees and have conducted five environmental strategies with 293 individuals. They have conducted about 10 opioid presentations with East of the River Family Support Collaborative, Oxford House, faith leaders, the American Muslim Heritage Foundation, Marshal Heights residents, to name a few. Social media strategies are still underway and two college events have also taken place with the University of the District of Columbia (UDC). Wards 7 & 8 also has a naloxone standing order in place.
- *Strategy 2.4: Create multiple social marketing campaigns, including anti-stigma campaigns, using a variety of media with clear messages to multiple target audiences (e.g., youth and young adults, current users) to increase awareness about opioid use, treatment, and recovery.*
 - Promotion of the “Text to Live” program expanded in August with additional marketing to reach individuals in their residences. This initiative allows District residents to use their phones to receive an interactive map of naloxone distribution sites and a series of follow-up messages encouraging naloxone use and information about accessing treatment.
 - Be Ready Text to Live naloxone advertising continued in August with ads on buses, bus shelters, and Metrorail platforms across the District, plus gas station video screens and all PG- and R-rated movies at the two DC theaters, and community print.
 - Efforts were expanded to include advertising on pizza boxes, coffee sleeves, and door hangers, as well as media outreach on WJLA, WUSA, WPGC, WLZL, and Dcist.
 - The influencer outreach program kicked off in August with social media posts from popular musicians, entertainers, and community activists. These posts have generated a lot of views and comments.
 - The MyRecoveryDC continued to run with advertising on Metro buses, bus shelters, and on digital boards on Metrorail stations. The myrecoverydc.org website campaign is generating referrals to peers who can guide an opioid user to treatment.

	<p>Engage health professionals and organizations in the prevention and early intervention of substance use disorder among Washington, DC residents.</p>
--	--

- *Strategy 3.5: Develop a comprehensive workforce development strategy to strengthen the behavioral health workforce’s ability to provide services in multiple care settings including peer support specialists/recovery coaches, holistic pain management providers, and those trained to treat patients with co-occurring mental health diagnosis and substance use disorder.*
 - Catholic Charities Professional Counselor Education Program (PCEP) recruited 40 individuals to participate in a fully-funded accelerated (five months) Certified Addiction Counselor (CAC) training. Instruction is conducted four (4) times per week, including on Saturday. Catholic Charities expects to graduate 36 (4 dropped the course) individuals by the end of September 2021. Catholic Charities has been working closely with MBI, which has a grant to provide CAC internship training.

-
- *Strategy 3.6: Encourage provider continuing education on evidence-based guidelines for the appropriate prescribing and monitoring of opioids and other evidence-based/best practices such as warm hand-offs, 12-step model programs, Acceptance and Commitment Therapy and SBIRT.*
 - The [Opioid Learning Institute](#), a comprehensive educational initiative with a mission to educate Washington, DC prescribers and other health care professionals, officially launched on October 1, 2019. The curriculum of 20 free online courses cover topics related to opioid prescribing practices, the prevention and treatment of opioid use disorder, harm reduction approaches, and other relevant topics around opioids. Table 1, below, lists additional information on the online, self-paced continuing medical education/continuing education (CME/CE) accredited modules and one (1) online module that does not carry CME/CE credits available to the general community. Table 2, reports on the case reviews conducted.

Table 1: Opioid Learning Institute Modules


Module	# of Enrollments/ Participants (Cumulatively)	Actively Engaged in Module	August 2021 Completions
Acupuncture, Massage, and Self Care in Addressing Pain	1108	14	84
Cognitive Behavioral Therapy & Mind-Body Techniques in Addressing Pain	1108	0	114
Development and Implementation of Evidence-Based Opioid Prescribing Guidelines for Surgical Patients	1108	0	39
Implementing the 2016 CDC Guideline for Prescribing Opioids for Chronic Pain	1108	1	135
After the Waiver: Translating Training Into Practice. Advanced Topics in Buprenorphine	1108	0	40
Treating Acute Pain to Improve Outcomes and Reduce Opioids	1108	0	91
Treating Opioid Use Disorder: Primer for Clinicians	1108	0	85
Epidemiology of Opioid Use: In the US and the District	1104	0	95
Patient Provider Relationship in Addressing Addiction	1104	0	51
Nutrition as Non-Pharmacological Pain Management	1104	0	74
Harm Reduction Approaches for Providers Addressing Opioid Use	1104	0	42
Opioid Overdose Prevention & Naloxone Education (Provider, CE/CME credits offered)	1104	12	259

Opioid Overdose Prevention & Naloxone Education (Community, no CE/CME credits offered)	593	14	371
Assessing Opioid Use Disorder: Selecting Appropriate Tools	1103	1	15
Understanding Pain and Assessing Opioid Risk	1111	0	7
Integrating Buprenorphine Treatment Into Infectious Disease Settings	1104	3	24
Enhancing Organizational Capacity and Provider Readiness to Treat OUD With Buprenorphine/Naloxone: Clinical Application of an MOUD	1105	0	19
Enhancing Organizational Capacity and Provider Readiness to Treat OUD With Buprenorphine/Naloxone: Systems Facilitators	1104	2	21
Treating Co-Occurring Opioid and Stimulant Use	1104	1	29
Effective Opioid Tapering Strategies	1104	0	20
Total		48	1,615

Table 2: Opioid Learning Institute Case Reviews


Module	# of Enrollments/ Participants (Cumulative)	August 2021 Completi ons	Total Completions (since 05/01/2020)
Opioid Learning Institute Case Review 15195 May 2020	1102	3	77

Opioid Learning Institute Case Review 15313 July 2020	1102	3	61
Opioid Learning Institute Case Review 15534 September 2020	1101	0	13
Opioid Learning Institute Case Review 15734 September 2020	1069	2	31
Totals		8	182



Support the awareness and availability of, and access to, harm reduction services in Washington, DC.


- *Strategy 4.1: Increase harm reduction education to families and communities, including naloxone distribution for those most affected.*
 - The online, interactive naloxone training sessions were officially launched to the public on August 30, 2019. The online training can be accessed at the [Opioid Learning Institute](#). A link to the training is also on DC Health’s website: (<https://dchealth.dc.gov/opioids>) or directly at <https://opioidhealth.org/education-training/elearning-courses-for-community/>.
 - Twenty-six individuals completed the online naloxone training modules in August.
 - Individuals receive a certificate upon completing the training. Naloxone can be picked up from DC Health or any of the [36 pharmacies](#) that distribute free naloxone.
- *Strategy 4.2: Make naloxone available in public spaces in partnership with a community-wide training initiative.*
 - Sixteen of the thirty-six pharmacies participating in DC Health’s Pharmacy Pilot Project reported dispensing 80 naloxone kits to individuals in August.
 - DC Health Staff and the DC Health Train-the-Trainers (TOT) held one Overdose Education and Naloxone Distribution training for the month of August.
- *Strategy 4.6: Use peers with lived experience to engage individuals with substance use disorders in harm reduction programs and services.*
 - The 10 Rapid Peer Responders (RPRs) track their daily activities in REDCap, a secure web application for building and managing online surveys and databases. In August, RPRs reported the following:
 - Number of client contacts: 813
 - Number of naloxone units distributed: 1,980
 - Number of new overdose survivors engaged: 27
 - Number of follow-up visits or calls: 46
 - Number of substance use disorder (SUD) linkages: 5
 - Number of social support linkages: 8



Ensure equitable and timely access to high-quality substance use disorder treatment and recovery support services.

- *Strategy 5.4: Develop and implement a model for initiating MAT in emergency departments (ED), ensuring a direct path to ongoing care (via a warm handoff from peer recovery coaches) that is patient-centered, sustainable, and takes into consideration the demographics of the implementing health system.*
 - Hospital-based medication-assisted treatment (MAT) Induction program update:
 - In August, 64% of patients received a screening from nurses during their hospital visits; 17,102 individuals were screened this month. Since program inception (May 2019), 375,944 screenings have been completed.

- Cumulative data from the participating hospitals show that 15,974 patients with risky alcohol or substance use behaviors were given a brief intervention to assess their willingness to change their behavior since program inception.
 - A total of 214 patients eligible to receive MAT were induced in the hospital since program inception.
 - August MAT data includes methadone in the number of MAT referrals to treatment and linkages to treatment. This month, four patients were induced with MAT in the hospital; 75% (n=6) of MAT patients who were referred to treatment after being induced with BUP/SUB or interested in methadone were successfully connected to a provider in the community, which exceeds the goal of 65%. Of note, hospitals have exceeded this goal for the past 11 months.
 - Psychiatric Institute of Washington (PIW) began the program in August. Initial data validation has begun this month and validated data will be included as part of the next report.
 - Since program inception in November 2019, there were 353 enrollees and 918 claims for the Buprenorphine Drug Assistance Plan (BupDAP). Case managers and/or providers and patients may enroll directly by accessing www.dchealth.dc.gov/bup-dap.
- *Strategy 5.7: Improve the quality and quantity of support services (e.g., education, employment, community re-entry, recovery coaching, transportation, dependent care, and housing) that are available to individuals in recovery).*
 - The RPRs utilized the Yellow Cab contract to provide nine rides:
 - PIW (2 rides)
 - ARC (2 rides)
 - CSOSA (2 rides)
 - HAHSTA (1 ride)
 - Mary's Center (1 ride)
 - Client residence to/from agency (2 rides)
 - DBH continues to get providers signed up for the Department For-Hire Vehicles My Rides program that is providing on-demand transportation to individuals' initial treatment appointments and appointments to re-engage clients in treatment. In August, 10 rides were provided.

 <p>GOAL 6</p>	<p>Develop and implement a shared vision between Washington, DC's justice and public health agencies to address the needs of individuals who come in contact with the criminal justice system to promote a culture of empathy for their families and residents.</p>
---	--

- *Strategy 6.4: Ensure individuals incarcerated with Department of Corrections (DOC) continue to receive MAT as prescribed at the time of arrest or MAT is made available to individuals in need.*
 - As has been the case before the pandemic, individuals in the DC jail have continued to receive MAT. All forms of MAT are available: methadone (54 individuals receiving in July), buprenorphine (204 receiving), and naltrexone (1 individual receiving). There were 32 individuals released with naloxone.
 - The MOU between DBH and the DOC for the opening of the new women's SUD therapeutic wellness housing unit was fully executed on January 15. The women's unit opened mid-August (capacity for 50 women) and the men's unit is opening Fall 2021 at the Central Detention Facility (CDF). There was a delay with the furniture. They have hired 18 of 18 officers for the units.
- *Strategy 6.7: Establish effective and coordinated communication channels between justice and public health agency partners to improve continuity of care.*
 - The Criminal Justice Coordinating Council (CJCC) Substance Abuse Treatment and Mental Health Services Integration Taskforce (SATMHSIT) continued planning for the meeting in September 2021 to discuss implementation of measures to address continuity of care gaps identified during the 2020 Justice Professionals Conference.



Develop effective law enforcement strategies that reduce the supply of illegal opioids in Washington, DC.

- *Strategy 7.1: Enhance surveillance program and data collection efforts in order to determine and characterize the status of the regional supply of illegal drugs to ensure availability of sufficient data.*
 - Ongoing: Enhanced surveillance program and data collection efforts are ongoing and will continue in order to determine and characterize the status of the regional supply of illegal drugs. Data from chemical analysis of surveillance samples are provided and distributed monthly to critical agencies through mechanisms such as the DC Opioid Working Group chaired by DBH and DC Health.
- *Strategy 7.4: Coordinate investigative efforts with the United States Attorney's Office and Drug Enforcement Administration to utilize federal laws in cases involving individuals who sell opioids (heroin/fentanyl) that cause the death or injury of another.*
 - Metropolitan Police Department (MPD) is actively working on this strategy, but due to the confidential nature of ongoing cases and investigations, MPD cannot comment on any specifics.
- *Strategy 7.5: Identify existing federal task force assets and ensure efforts are in place to investigate and disrupt the flow of illegal opioids into Washington, DC.*
 - MPD is actively working on this strategy, but due to the confidential nature of ongoing cases and investigations, MPD cannot comment on any specifics.
- *Strategy 7.6: Coordinate MPD efforts to identify locations where opioids are illegally sold (street level trafficking) as well as individuals who traffic opioids to direct enforcement efforts toward these targets.*
 - MPD is actively working on this strategy, but due to the confidential nature of ongoing cases and investigations, MPD cannot comment on any specifics.
- *Strategy 7.7: Coordinate with federal law enforcement agencies including the Department of Homeland Security Customs Enforcement and United States Postal Inspector to target opioid trafficking through the United States Postal Service and other parcel shipping companies.*
 - MPD is actively working on this strategy, but due to the confidential nature of ongoing cases and investigations, MPD cannot comment on any specifics.

International Overdose Awareness Day

To recognize International Overdose Awareness Day on August 31, the Department of Behavioral Health (DBH) spearheaded over 30 events in all 8 wards to highlight our work to combat the opioid epidemic. Fifteen of the events occurred on the 31st and the others occurred during the week leading up to the 31st. One of these events, a result of the ward-level engagement work, was the Ward 6 "You Are Not Alone" event. This event, which was held at Westminster Presbyterian Church, brought together 10 organizations to bring greater awareness to this crisis by providing information and support on drug user health to the general public. This event was live-streamed and in person and had networking and tabling followed by storytelling and panel discussions. To see all events, go to <https://livelong.dc.gov/page/news-and-events-0>.