HER NEW YORK CITY HEALTH AND HOSPITALS CORPORATION

Mapping an Opioid Overdose Prevention Program: From Jail to Community

Anne Siegler, Alison O. Jordan, Allison Dansby, Randi Sinnreich, Quintin Maidment and Zachary Rosner NYC HHC Correctional Health Services Cameron Paine-Thaler Columbia School of Social Work Amu Ptah-Riojas and Steve DiLonardo NYC Department of Health and Mental Hygiene

Presenter Discloser

- No conflicts of interest to disclose
- Intranasal naloxone use is currently off-label

NYC GOV/ALCORRECTIONAL HEALTH SERVICES				
At A Glance				
Facilities	12 jails: 9 on Rikers Island (1 female facility, 1 adolescent facility), 3 borough houses, public hospital inpatient unit			
Average Daily Population	~10,800 (2014)			
Annual Admissions	60,000 (2014)			
Community Releases*	60,000 / year			
Length of Stay	mean=37 days; median~7d			
Electronic Health Record (adopted 2008-2011)	eClinical Works, customized for jail setting; care mgt templates; unidirectional interface with NYC DOC Inmate Information System			
*Annual releases from NYC DOC Report of	f Discharges by zip code for CFY'14			



hc			
AGE:			
	16 - 21	13.4%	
	22 - 31	32.8%	
	32 - 41	21.6%	
	42 - 51	21.8%	
	51+	10.2%	
GENDER:			
	Male	90%	
	Female	10%	
RACE:			
	Non-Hispanic, Black	57%	
	Hispanic	33%	
	Non-Hispanic, White	7%	

HC INTERVENTION NYC JAIL PREVALENCE BY DIAGNOSIS

- Substance abuse: >50%
- Mental Illness: 30%
- Hepatitis C: 8%
- HIV: 5%
- Diabetes: 5%
- Tuberculosis: 5%
- Other Sexually Transmitted Infections: 6%

OVERVIEW OF OPIOID OVERDOSE

- Every year, 17,000 people die from an opioid overdose and opioid abuse costs \$56 billion in medical costs in the United States (Centers for Disease Control and Prevention, 2014)
- Approximately 9,000 New York City residents died of an unintentional drug poisoning (overdose) during the years 2000 -2012, an average of 700 overdose deaths per year (Epic Data Brief 2013).
- Overdose is the third leasing cause of premature death, after cancer and heart disease in NYC
- New York City's incarcerated individuals are especially vulnerable: Previously incarcerated individuals are 129 times more likely to die from an opioid overdose within two weeks of being back in the community compared to the average opioid user

WHAT IS NALOXONE?

- Opioid antagonist
- Injectable or intranasal
- Preventing an overdose from becoming fatal
- Regulated substance (by prescription only but not a controlled substance)
- Usually acts within 2-5 minutes
- Blocks the effects of all opioids
- Lasts for 30-90 minutes
- No adverse affects if the person has no opioids in their system

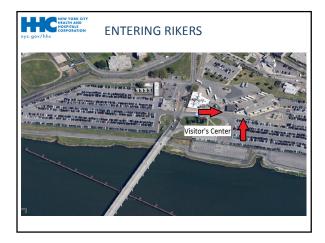


OVERDOSE PREVENTION FROM JAIL TO COMMUNITY

- As part of DOHMH's Opioid Overdose Prevention Initiative, THCC is a registered Opioid Overdose Prevention Program with the ability to distribute Naloxone .
- Each kit contains two doses of the medication, instructions for use and information on reporting the overdose reversal.
- THCC conducts outreach with friends and families of inmates at the Central Visitor's Center, training individuals interested in Naloxone use who can then receive a free kit after their visit.
- Rationale: overdose victims can't reverse their own OD. They are dependent on the training and response of those around them.





















ANY PROBLEM STARTING THE PILOT IN FEBRUARY?

5. Dispensing naloxone (pilot before NYS approved Standing Order prescribing)

MAPPING ANALYSIS

AIM: Determine if OD kits dispensed at Central Visitor Center reach NYC communities with highest rates of reported opioid overdoses, concentrated poverty, and people returning home after incarceration

METHODS: Analyze zip code information collected from visitors and compare against:

- The New York City Department of Health and Mental Hygiene report "Unintentional Drug Posioning (Overdose) Deaths Involving Opioids in New York City, 2000-2013 (august 2014)
- The NYC areas with high rates of return after incarceration.



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> RESULTS June 1 2014- May 30 2015

While passing through Riker's Central Visitor Center: - 2,014 were trained to identify the signs of an overdose

While heading to the bus after visiting:

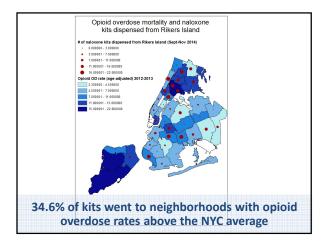
- 1,532 received OD kits (2 doses of naloxone per kit)

People receiving kits reside in 38 distinct

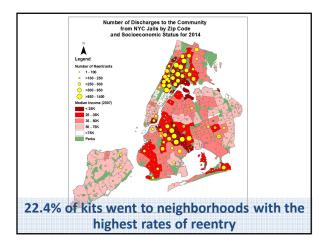
neighborhoods across New York's five boroughs:

– 34.6% report above average opioid overdoses

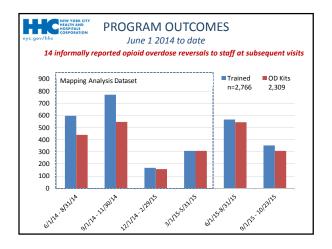
- 22.4% have highest rates of return after incarceration
- 15.1% are areas with the highest poverty rates.











NEXT STEPS

- Formal program evaluation started in August 2015

 Goal: identify how often distributed kits are used and in what context
 - Design: Longitudinal cohort study with in-person, telephone, and text message closed-ended questionnaires
- Approximately 289 enrolled
- Follow-up surveys scheduled for 1, 3 and 6 months after receipt of naloxone
- Preliminary results suggest kits are being used
 232 reached by phone; 125 responded to text
 - 19 reported using kit through either call or text
 - 1 reported to staff at Visitor Center

7% report overdose reversal in 1st month





CONCLUSIONS

- Generally, the distribution of Naloxone kits at the Riker's Island visitors center was successful in reaching the communities with the highest rates of opioid overdose
- Initial findings demonstrate that providing overdose education and naloxone to jail visitors can directly reach target populations
- However, the south shore of Staten Island, a middle class neighborhood with high rates of opioid overdose, was not reached by this distribution method.

HECHORATION THANK YOU

CHS: Lea Hane, Angel Molina, Franc Valdes, Lloyd Walker

NYC DOHMH: Hillary Kunins, Zina Huxley-Reicher, Emily Winkelstein, Monique Wright, Amy Hecker, Lara Maldjian

<u>NYC Department of Correction</u>: IT Department and Central Visitor Center staff

<u>Community partners</u>: ACQC, LESHR, FROST'D, Harlem United, NYHRE, SACHR, VOCAL, WHCP