

Save Lives Oregon/ Salvando Vidas Oregon

September 2022

Oregon
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What we'll cover

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Agenda

- Introduction to the Save Lives Oregon /Salvando Vidas Oregon Initiative
- Background on overdose crisis
- Share the role of Community Partner Leadership Team
- Harm Reduction Supply Clearinghouse

Who we are

Save Lives Oregon/ Salvando Vidas Oregon

Led by a diverse group of harm reductionists from across the state.

We are a community of local, state and service organizations working across Oregon to reduce overdose, save lives and support safer communities.

Began our work in 2020, when the COVID-19 pandemic heightened the overdose crisis and left many families, neighborhoods and communities struggling.

In response, we launched a resource hub to provide harm reduction information and life-saving supplies such as naloxone to organizations and tribal communities on the front lines of harm reduction.



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The Miracles Club



Max's Mission



Outside In

The continuum of care

Harm Reduction is not the only solution—but is a critical element to support hope, healing and health.



Our philosophy

Many roads lead to recovery

We're here because we believe everyone in Oregon deserves the opportunity to be healthy and safe.

We know that our health care and social systems need to do more to support people who face the highest risk of overdose caused by long standing systemic racism and other system failures.

We believe people who use drugs should have agency in creating safer lives and safer communities.

We know that there are many roads that lead to recovery. Harm reduction is a proven step that people take to find hope, healing and health.

Our offerings

Life-saving strategies,
life-changing partnerships

Technical assistance

Leadership team members provide needed support and training to partner organizations looking to learn about, integrate or expand harm reduction strategies into their services.

Communications toolkit

Resources and tools to build support and understanding for harm reduction within partner communities and organizations.

Supplies

Enhance access to life-saving supplies for partner organizations by connecting those who qualify to the Harm Reduction Supply Clearinghouse, and other supply sources for items.

What we know: Background

An ongoing overdose crisis



Two out of 3 Oregonians know someone living with a substance use disorder — these are our loved ones, neighbors and friends.

At the beginning of 2020, we were already in an overdose crisis.

The stress and isolation of the COVID-19 pandemic, and its effect on services, including access and delivery of medical, behavioral, social and community services heightened our existing overdose crisis.

Oregon ranks

- 1st in the nation for prevalence of methamphetamine and prescription opioid misuse
- 2nd highest in the nation for percentage of the population (12 and older) with past year illicit drug use disorder (IDUD) (9.0%) and
- 3rd highest in the nation for prevalence of SUD (18.2%)

An ongoing overdose crisis



Comparing the 12 months prior to the pandemic (March 2020) to the 12 months ending September 2021, Oregon experienced a **73.8% increase in provisional overdose deaths**, compared to 39.2% nationally.

The number of provisional overdose deaths involving

- **Synthetic opioids increased 358%** (from 98 to 449)
- **Psychostimulants rose 90%** (from 290 to 550)

According to Oregon's 2020 SUDORS data on overdose deaths

- 84% involved methamphetamine, heroin, or fentanyl used alone or in combination with other drugs
- Only 2.7% of individuals who died of drug overdose were being treated for a substance use disorder (SUD) at the time of death
- Naloxone was only administered in 11.5% of opioid-involved deaths

An ongoing overdose crisis



The highest rates of overdose deaths in Oregon occurred among

- Middle aged people (aged 35 – 44 or 45 – 54)
- Black individuals, and
- People experiencing homelessness

Rates of non-fatal overdose Emergency Department (ED) visits are also increasing.

- In early 2022, suspect non-fatal all drug overdoses reported by EDs rose 15%
- Rates of stimulant overdose ED visits are highest among young adults (18 – 24), Black individuals, and in the Central and Eastern regions
- Rates of opioid overdose ED visits are highest among those aged 25 – 34, American Indian / Alaskan Native (AIAN), Black individuals, and in the Southwest and Southwest-Coast regions

Harm Reduction Supply Clearinghouse Project

Eligible participants

Entities who directly serve people using substances or at highest risk for overdose

- Community-based organizations with 501(c)(3) status or 501(c)(3) fiscal sponsorship
- Harm Reduction and Syringe Service Programs within Community Health Clinics or FQHCs
- Local Public Health Authority Harm Reduction and Syringe Service Programs
- Tribal community and health care programs that serve people who use drugs
- Withdrawal management or residential substance use disorder treatment programs for clients who are waitlisted, dismissed, or leave
- Uniformed First Responder agencies implementing 'Leave Behind' naloxone distribution programs
- Jails providing release packets that include naloxone and/or other harm reduction supplies to people who may be at risk of overdose when they are released

Supplies

Supplies available are those that prevent overdoses, prevent disease transmission, and help people who use drugs reduce harm to themselves and others.

Available resources include:

- Overdose prevention supplies, including both nasal and IM naloxone
- Infection prevention and minor wound care supplies
- Sterile syringes
- Personal and program-sized sharps containers
- Masks, gloves and foot care supplies

Clearinghouse supplies are intended to be handed directly to people who use substances and people who are at highest risk for overdose.

More Information

Save Lives Oregon/Salvando Vidas Oregon Website

- [SaveLivesOregon.org](https://www.SaveLivesOregon.org) / [SalvandoVidasOregon.org](https://www.SalvandoVidasOregon.org)

Clearinghouse Application Direct Links

- [Apply](#)
- [Presentar solicitud](#)

Toolkit Information Topics

- Toolkit Overview
- Save Lives Oregon Initiative & Clearinghouse One Pager
- Harm Reduction One Pager
- Addressing Common Concerns about Harm Reduction
- Frequently Asked Questions
- Talking Points

Article

[Shin, Sarah S et al. "It wasn't here, and now it is. It's everywhere": fentanyl's rising presence in Oregon's drug supply." *Harm reduction journal* vol. 19,1 76. 11 Jul. 2022, doi:10.1186/s12954-022-00659-9](#)

Thank you

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Extra Slides

Harm Reduction Supply Clearinghouse Project Key Metrics

Key metrics

163 Participating entities*

Entity Types / Programs include

- 3 Tribal entities
- 74 Community Based Organizations
- 30 Community Health Clinic/FQHC/Street Response
- 21 Syringe Service Programs
- 19 Substance Use Disorder/Withdrawal Management Programs
- 15 Local Public Health Authorities
- 19 Uniformed First Responder Agencies
- 6 Jail/Correctional Agencies

Broad Spend Areas

- 92% for naloxone (nasal and intramuscular injection)
- 5% for infection prevention, minor wound care, hygiene and cleaning
- 4% syringes
- 1% sharps containers

*As of July 2022

Key metrics

Naloxone Saturation

Goal: Community naloxone saturation

Purpose: Maximize probability of naloxone use during a witnessed overdose to avert overdose deaths

Naloxone Saturation Estimate:

Oregon's saturation estimate was to distribute 82,000 community-based naloxone kits or 84,000 pharmacy-initiated kits to reach saturation and 240 annual deaths [using 2017 overdose death data].

[Irvine, Michael A et al. "Estimating naloxone need in the USA across fentanyl, heroin, and prescription opioid epidemics: a modelling study." *The Lancet. Public health* vol. 7,3 \(2022\): e210-e218. doi:10.1016/S2468-2667\(21\)00304-2](#)

Project and Order Status

- First full-time staff person hired
- Onboard process improvement in place
- Host 1 to 3 "How to Order" meetings a week
- 488 orders processed
- 180,010 doses of naloxone distributed
- 1,394,350 syringes

Naloxone Bridge Support

- 101 bridge support shipments
- 16,782 bridge naloxone doses

Our journey

Our impact

There has been an increasing amount of community support with harm reduction

From participating agencies...

- One of our community members has used the Narcan we distributed to save two individuals from overdosing.
- One of our patients came to an appointment and said that someone had used the naloxone we gave him to rescue him, our patient.
- We have seen a huge increase in [naloxone] use...The individual who is getting them [naloxone] into the trap houses reported two lives were saved over a one-week period with the naloxone kits...The individuals who use in the community are taping the kits on the walls of the trap houses...The feedback that I am receiving is that these kits are saving lives in the community.

What we accomplished

We recognize that there are voices and communities not reflected and it is critical to expand the reach and cultural agility of our work.

Our high-level wins:

- Leadership team expansion from 5 to 10 agencies
- Initiative brand and messaging, communication tools and website developed.
- Transition to MMCAP/Cardinal providing online ordering, better pricing, and the ability direct ship naloxone under one prescriber signature
- Over 180,000 doses of naloxone distributed
- 100% of SSPs distribute naloxone
- Met naloxone community saturation estimate, however since 2017, overdose deaths involving fentanyl have increased 508%.
- Addition of full-time staff person from CDC Foundation

What we learned

We recognize that there are voices and communities not reflected and it is critical to expand the reach and cultural agility of our work.

Important learnings along the way:

- Each leadership team member and their agency brings a tremendous amount of experience and value to our collective work, and it will take our entire ecosystem to accomplish our shared purpose of saving lives during this ongoing overdose crisis
- If we are to center and lift-up entities who have historically struggled under systemic racist structures, it is critical to recognize and continue the work to eliminate the gaps, inequities and power imbalances
- The need for naloxone is broader and greater than the current scope/funding of the SLO/SVO Harm Reduction Supply Clearinghouse.

Where we've been

Enhance **access to life saving supplies and resources** for organizations with **existing programs** that support people who are at risk of overdose or infection.

Phase one: urgent COVID-19 response

Launched the Harm Reduction Supply Clearinghouse in November 2020, as a component of the Behavioral Health COVID-19 response. The Harm Reduction Supply Clearinghouse was a resource for community groups with existing harm reduction efforts affected by COVID19 shutdowns.

Phase two: expand the initiative

Re-opened the Clearinghouse to initial participants and new applicants July 2021 with MMACP Infuse and Cardinal distributor, and an online order platform.

Leadership team formation: Feb – June 2022

Through a series of sessions with the team, defined our shared identity and shared purpose.

SLO/ SVO Leadership Team's 5 key tasks

1. Outreach and engagement	2. New partner support and cultivation	3. Supply assistance	4. Program design and implementation	5. Reporting
<p>Drive awareness for SLO/SVO with a focus on supporting equitable access to Harm Reduction supplies and resources offered through the initiative.</p>	<p>Continued engagement and relationship building with potential partners who are actively looking at how to integrate new strategies that reduce drug related harm in and with people who use drugs.</p>	<p>Guidance for organizations ready to integrate new harm reduction strategies and/or expand on existing efforts that empower and support people who use drugs to minimize harm.</p>	<p>Supporting organizations approved to access supplies.</p>	<p>Ensuring organizations have the tools, information and ability to complete all necessary reporting on time.</p>

Where we're headed



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Max's Mission



The need:

As our communities continue to develop their own systems and programs for harm reduction activities, Save Lives Oregon will support equitable access to these evidence-based services within Black and Brown communities and the organizations that serve them.

Our objectives:

1. Engage and support organizations that directly serve people who use drugs with learning more about harm reduction, starting, integrating, or expanding a harm reduction activities in their communities.
2. Work toward an initiative that is equitable and able to serve organizations in all communities throughout Oregon and Indian Country.

Shared Purpose Statement

The SLO/SVO Leadership Team is a diverse group of harm reductionists who support people who use drugs.

We do this by activating our networks and sharing our expertise with organizations best positioned to expand the Save Lives Oregon/Salvando Vidas Oregon harm reduction initiative across Oregon and Native communities—guiding them from awareness to partnership.