## **Opioid Epidemic in New Jersey**

Adam Bucon, LSW Division of Mental Health and Addiction Services October 30, 2015

State of New Jersey DHS Department of Human Services

## NJ Substance Abuse Monitoring System (NJSAMS) Data

#### 2014 Total Treatment Admissions= 65,553

Heroin as Primary Drug= **24,059 (41%)** Other Opioids as Primary Drug= **4,594 (8%)** 

#### Level of Care (LOC) Data

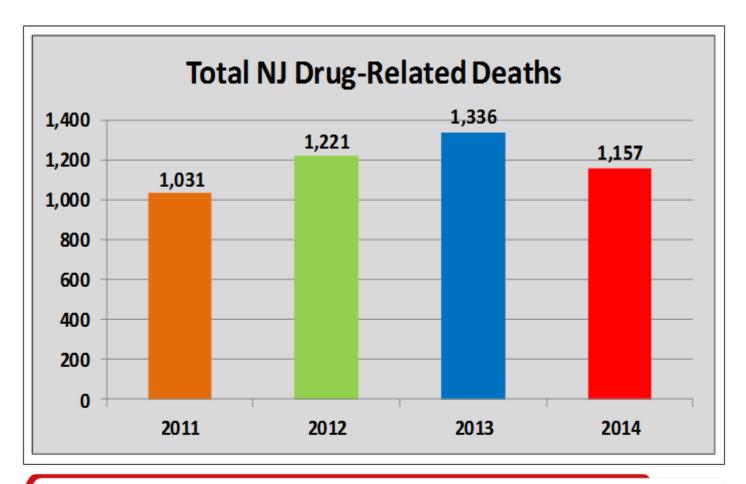
Opioid Maintenance Outpatient (OP)= **7,175 (11%)** Opioid Maintenance Intensive Outpatient (IOP)= **401 (1%)** 



#### 2014 Opioid Treatment Admissions

- Five counties with highest incidence of opioid treatment admissions
  - Ocean County= **3,098**
  - Essex County= 2,588
  - Monmouth County= 2,388
  - Camden County= 2,286
  - Atlantic County= 2,125

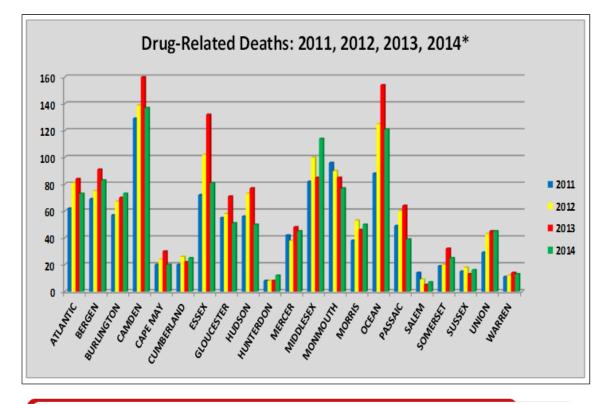




Preliminary information indicates there were 1,157 fatal drug overdoses during 2014. There were 1,336 fatal drug overdoses during 2013, a nine percent increase over 2012, and a 30% increase over 2011. The 1,336 drug-related deaths during 2013 equates to approximately four lives lost per day. Drugrelated deaths involving multiple drugs are also increasing, up 45% between 2011 and 2013. During the same period, fatal heroin overdoses increased by 250, representing 82% of the total increase. In April 2014, law enforcement agencies began carrying Naloxone to combat this epidemic, administering the



Services



While Camden, Essex, and Ocean Counties have consistently had large numbers of drug-related deaths, Burlington, Cumberland, Hunterdon, Middlesex, Morris, Salern & Sussex Counties all began showing increases in 2014.

State of New Jersey DHS Department of Human Services

# DMHAS Opioid Overdose Prevention Program

N.J. Department of Human Services Division of Mental Health and Addiction Services



#### Opioid Overdose Prevention Program: Purpose and Intent

- The program provides education to individuals at risk for an opioid overdose, their families, friends and loved ones to recognize an opiate overdose and to subsequently provide lifesaving rescue measures to reverse the effects of an opioid overdose
- The opioid overdose prevention program includes:
  - Outreach to at-risk individuals
  - Educational component
  - Collaboration with interested stakeholders
  - Distribution of naloxone rescue kits



#### DMHAS Opioid Overdose Prevention Pilot Program

- In September 2014, funding provided to four (4) licensed, non-profit Opioid Treatment Programs (OTPs) in the State of NJ
- Four agencies servicing the five (5) counties in NJ with the most reported overdose deaths in eighteen month period (January 1, 2013-June 30, 2014)
  - Atlantic
  - Camden
  - Essex
  - Monmouth
  - Ocean

DHS Department of Human Services

### Expansion of Opioid Overdose Prevention Program

- Three (3) regional contracts awarded
- Contracts to begin November 1<sup>st</sup>
  - Morris County Prevention is Key, Inc. (Northern Region)
    - Bergen, Essex, Hudson, Morris, Passaic, Sussex and Warren Counties
  - JSAS HealthCare, Inc. (Central Region)
    - Hunterdon, Mercer, Middlesex, Monmouth, Somerset, and Union Counties
  - Urban Treatment Associates, Inc. (Southern Region)
    - Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Ocean and Salem Counties



- Contracted programs are responsible to provide one training per week for a total minimum of 52 trainings per year
- Trainings will be held in <u>all</u> 21 counties
- Trainings will be available during daytime, evening and weekend hours, based upon county and community request



# DMHAS Opioid Overdose Recovery Program

N.J. Department of Human Services Division of Mental Health and Addiction Services



#### Purpose and Intent

- To respond to individuals reversed from opioid overdoses and treated at hospital emergency departments as a result of the reversal
- DMHAS, the Governor's Council on Alcoholism and Drug Abuse (GCADA) and the Department of Children and Families (DCF) provided funding to support this initiative
- DMHAS made four awards, one in each of the following counties:
  - Camden- Center for Family Services, Inc.
  - Essex- Turning Point, Inc.
  - Monmouth- Barnabas Health Institute for Prevention
  - Ocean- Barnabas Health Institute for Prevention



#### Purpose and Intent

- The Opioid Overdose Recovery Program will utilize Recovery Specialists and Patient Navigators to engage individuals reversed from an opioid overdose to provide non-clinical assistance, recovery supports and appropriate referrals for assessment and substance use disorder treatment
- The Recovery Specialists and Patient Navigators will maintain followup with these individuals and deliver or assertively link individuals to appropriate and culturally-specific services while providing support and resources throughout the process.



- The overall goal and mission of the proposed program is to:
  - Increase linkage to appropriate care in the community
  - Assist in ending the "revolving door" where too many individuals endlessly cycle in and out of emergency departments and never connect to treatment or recovery support services
  - Promote improved recovery, wellness, and healthy lifestyles
  - Reduce public healthcare expenditures for individuals living with an opioid use disorder
  - Improve health behaviors, clinical outcomes, and quality of life



- Each contract will have three key positions:
  - <u>Recovery Specialist</u> (minimum associate's degree preferred, high school diploma or equivalency required) will engage individuals reversed from an opioid overdose and provide non-clinical assistance and recovery supports while maintaining follow-up with these individuals
  - Patient Navigator/Trainer (bachelor's degree in health, psychology, counseling, social work, education or other behavioral health profession) will be responsible to refer and link individuals into substance use disorder treatment
  - <u>Program Supervisor</u> (master's degree in health, psychology, counseling, social work, education or other behavioral health profession) will be responsible for the supervision of the Recovery Specialists



- Contracted providers will provide on-call Recovery Specialists to engage and support patients in emergency departments, across their county, a minimum of 84 hours weekly from Thursday 7 p.m. through Monday 7 a.m., and Patient Navigators to assist in linking patients to treatment/recovery supports
- Coverage will be comprised of a minimum of seven shifts of 12-hours each:
  - Thursday 7 p.m. to Friday 7 a.m.
  - Friday 7 a.m. to 7 p.m.
  - Friday 7 p.m. to Saturday 7 a.m.
  - Saturday 7 a.m. to 7 p.m.
  - Saturday 7 p.m. to Sunday 7 a.m.
  - Sunday 7 a.m. to 7 p.m.
  - Sunday 7 p.m. to Monday 7 a.m.



- Contracted programs will assist in linking individuals to appropriate services where there may be barriers to accessing treatment
- Contracted programs will also have protocols and procedures regarding pregnant women and how they will collaborate with the hospital social worker and/or hospital staff to ensure coordination and access of MAT services





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