

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES
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Commissioner

VALERIE L. MIELKE, MSW Assistant Commissioner

March 12, 2020

Dear OTP Executive Directors and Colleagues:

As New Jersey continues to learn more about COVID-19 (the coronavirus), the New Jersey Department of Human Services, Division of Mental Health and Addiction Services (DMHAS) would like to provide interim guidance to assist Opioid Treatment Programs (OTPs) better prepare. Below lists current recommendations and resources:

How can agencies reduce the incidence of or transmission of COVID-19 at their facilities?

Encourage staff and patients at your agency to perform frequent hand hygiene. Individuals should be reminded to wash hands often with soap and water for a minimum of twenty seconds or use an alcohol-based hand sanitizer that contains 60-95% alcohol.

Post illustrative information sheets about hand washing and other preventive measures at your agency.

Educate staff and patients to avoid touching eyes, nose and mouth with unwashed hands.

Clean all "high-touch" surfaces, such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets every day. Provide sanitary wipes in your facility, when appropriate.

Keep an adequate supply of cleaning products, masks and gloves at your agency.

Where can I refer my staff and patients who want to educate themselves more about COVID-19?

It is important to review the most up-to-date guidance from national, state, and local public health agencies. Many townships and local health departments have ways to sign up for news alerts. Individuals can also use these public health agency websites and hotlines:

NJ Department of Health: www.nj.gov/health/cd/topics/ncov.shtml

• 24-Hour Hotline: 1-800-222-1222 (in-state) or (800) 962-1253 (out-of-state) Contact Information for all local health departments in NJ: http://localhealth.nj.gov
U.S. Centers for Disease Control & Prevention: www.cdc.gov/COVID19

Staying informed can help decrease the anxiety people may feel about COVID-19. It can also help prevent the spread of rumors and discourage the stigma and exclusionary behavior that can occur with COVID-19 or any other infectious diseases.

What can OTPs do to prepare for possible staffing shortages?

Review current staffing to determine essential functions and staff requirements to ensure appropriate qualifications to serve as on-call professionals for programs that need to remain operational with reduced staff.

What guidance is there from the State of New Jersey and SAMHSA to provide patients with take-home dosing during this public health emergency?

For individual patient cases, specifically patients who present with symptoms of COVID-19, which may include respiratory infection, cough, and fever, submit exceptions through the SAMHSA OTP extranet website. Consider communication outreach to clients through phone calls, emails, and signage onsite to let them know if they become sick to contact the OTP before coming onsite, so take-home approval can be request and prepared in advance for dispensing. https://otp-extranet.samhsa.gov/login.aspx?ReturnUrl=%2f

Currently, SAMHSA is not approving blanket exceptions in regards to COVID-19 but if your agency recommends providing take-home medication for a large numbers of individuals for reasons that can be justified, please contact the New Jersey State Opioid Treatment Authority via email at adam.bucon@dhs.nj.gov and submit a blanket exception request for your OTP through the SAMHSA OTP extranet website. For any blanket exception requests, OTP medical directors must include specific details about agency policies and procedures as well as a clear justification for the request. https://otp-extranet.samhsa.gov/login.aspx?ReturnUrl=%2f

Patients unstable or unsafe to manage take home doses should continue daily dosing at their agency.

Every precaution should be made to limit exposures from symptomatic patients, and to medically fragile patients.

All patients receiving take-home medication must have a lockable take-home container with written instructions on protecting their medication from theft and exposure to children, animals or other adults.

Should OTPs be worried about medication shortages and/or disruptions of a medication supply for methadone and/or buprenorphine?

At this time, there have been no reported concerns from any State of Federal partner about a potential for disruption in the medication supply for methadone and/or buprenorphine containing product. Any future updates or changes to this guidance will come from the New Jersey State Opioid Treatment Authority (NJ-SOTA).

What other action steps can OTPs do to best prepare?

Update your agency Continuity of Operation Plan (COOP) to include specific emergency plans to assist with a possible COVID-19 outbreak.

Ensure your agency has up-to-date emergency contacts for all patients and staff at your agency.

Contact patients to ensure emergency contact information is up-to-date. Please be reminded that any communications with emergency contacts should be in accordance with federal and state confidentiality laws and regulations.

Ensure your agency maintain a 3-4 week supply of medication (methadone and buprenorphine), when possible.

Provide take-home medication for higher "Phase" patients, when and where appropriate, to reduce clinic traffic. Transition patients to higher "Phases" when appropriate.

Consider extending hours at your agency to better reduce long lines and stagger clinic traffic.

Any change to operation at your agency, including closure or a modification to operating hours, must be reported by submitting a COOP Activation form to the IME COOP email address at imecoop@ubhc.rutgers.edu.

Finally, as guidance becomes more readily available from State and Federal partners, such as SAMHSA and the Drug Enforcement Agency (DEA), information and guidance will be updated and shared. In the meantime, any questions and/or concerns, please reach out via email at adam.bucon@dhs.nj.gov or by phone at (609) 438-4156.

Thank you for your attention to this matter.

Sincerely,

Adam Bucon, LSW

State Opioid Treatment Authority