



**Evidence-Based and Innovative
Initiatives for Overdose Prevention and Intervention
Rhode Island Department of Health
Drug Overdose Prevention Program
December 2018**

Table of Contents

- Introduction**2
- Prevention Initiatives**
 - Training Program for Medical, Dental, and Nursing Students3
 - Project Toward No Drug Abuse (TND)3
 - Partnership with Needle Exchange Program4
 - Distribution of Fentanyl Test Strips5
 - Project Schools Using Coordinated Community Efforts to Strengthen Students (SUCCESS)5
- Rescue Initiatives**
 - Overdose Education and Naloxone Distribution (OEND)6
 - Education and Promotion of the Rhode Island Good Samaritan Law (GSL) 7
 - NaloxBox Installation 7
- Treatment Initiatives**
 - Targeted Outreach of Treatment and Recovery Support Services9
 - Providence Safe Stations9
 - Computer-Based Training for Cognitive Behavioral Therapy (CBT 4 CBT)10
 - Heroin-Opioid Prevention Education (HOPE) Initiative 11
- Recovery Initiatives**
 - Developing and/or Enhancing Local Recovery Support Systems12
 - Faith-Based Recovery Efforts13
 - CHES Health E-Recovery/Mobile Connections Digital App.....13
 - Peer Recovery Specialist Services and/or Specialized Training for Peer Recovery Specialists14
 - Support Systems to Families Impacted by the Opioid Crisis..... 15

Introduction

The Rhode Island Department of Health (RIDOH) Drug Overdose Prevention Program (DOPP) offers this collection of evidence-based and innovative drug overdose prevention initiatives to guide the development and enhancement of [Community Overdose Engagement \(CODE\) Phase Two](#) response plans. These initiatives align with the four strategies (Prevention, Rescue, Treatment, and Recovery) of Governor Gina M. Raimondo's [Overdose Prevention Action Plan](#) as a part of statewide efforts to address the incidence of opioid overdose and save lives.

These **evidence-based initiatives** were selected based on a review of scientific literature and consultancy with content experts. The initiatives demonstrated six qualifying criteria:

- 1) Valid and reliable research design;
- 2) Evidence that intervention has influenced the target population(s);
- 3) Sufficient funding requirements for short-term work plan projects;
- 4) Completion of intervention(s) within a 90-day period;
- 5) Availability of evaluation tools, or the ability to design and implement an evaluation tool within a limited timeframe; and
- 6) Alignment with one of the four Strategies of Governor Raimondo's Overdose Prevention Action Plan.

The DOPP team used these drug overdose prevention sources to select evidence-based initiatives:

- 1) [Evidence-Based Practices Resource Center](#);
- 2) [Substance Abuse Mental Health Services Administration \(SAMHSA\): Preventing Prescription Drug Misuse: Programs and Strategies](#);
- 3) [Association for Territorial and Health Officials \(ASTHO\) Primary Prevention Science-Based Approaches](#);
- 4) [Blueprints for Healthy Youth Development](#);
- 5) Published research articles; and
- 6) Information provided by Subject Matter Experts (SMEs).

In addition to evidence-based initiatives, the DOPP selected several “**promising innovations**” that have shown theoretical and experiential success. Many of these promising innovations are presently embedded in the State of Rhode Island's opioid overdose prevention activities.

It is our hope that this resource provides communities with the tools and direction needed to implement drug overdose prevention initiatives with even greater success. We invite CODE Phase Two prospective applicants to replicate and/or adapt one or more of these interventions to meet the diverse needs of communities across Rhode Island.

Together, we can inspire collaboration and turn the tide of Rhode Island's overdose crisis.

Suggested CODE Prevention Initiatives

Strategy	Prevention
Intervention	Training Program for medical, dental, and/or nursing students
Target Population	College and graduate-level health professions students
Intervention Description	Interprofessional, four-component workshop on Opioid Use Disorder (four to eight hours in duration)
Evidence	Student knowledge, skills, and attitudes toward opioid misuse increased after exposure to training program.
Evaluation Tools	Validated Overdose Attitudes and Knowledge Scales (available from RIDOH)
Links/Other Info	An interprofessional education workshop to develop health professional student opioid misuse knowledge, attitudes, and skills
Advisor	Dr. Jeffrey Bratberg Academic Collaborations Officer, RIDOH Academic Center Jeffrey.Bratberg@health.ri.gov 401-419-6303

Strategy	Prevention
Intervention	Project Toward No Drug Abuse (TND)
Target Population	High school students (Ages 14-19 years old)
Intervention Description	Interactive, classroom-based substance abuse prevention program
Evidence	Considered a model intervention by several organizations, including the SAMHSA, the US Department of Defense, and the National Institute on Drug Abuse (NIDA).
Evaluation Tools	Built into the program
Links/Other Info.	Summary: TND Experimental Trial Results Project Toward No Drug Abuse (TND) Training
Advisor	Leah Meza Project TND Manager, Institute for Prevention Research leahmedi@usc.edu 323-442-8202

Strategy	Prevention
Intervention	Partnership with Needle Exchange Program
Target Population	Adults at risk for drug overdose and/or transmission of blood-borne diseases (i.e., HIV, hepatitis B, hepatitis C) through shared syringes.
Intervention Description	<p>In partnership with AIDS Care Ocean State's (Education, Needle Exchange, Counseling, Outreach, Referrals (ENCORE) Program, municipal leaders can distribute naloxone and other services (i.e., clean needles, HIV and hepatitis C testing, condoms, and referrals) to drug users through street outreach, a mobile van, and home delivery. These services can be coordinated with public safety officials (i.e., police and fire departments) to identify locations to offer services</p> <p><i>Note: Funds cannot be used for the purchase of naloxone or syringes, clinical care, or drug disposal programs</i></p>
Evidence	The current ENCORE Program is well established in five communities throughout Rhode Island. Approximately 500 active drug users utilize these services each year. In the first six months of 2018, the ENCORE Program distributed 64 kits of naloxone to 57 clients. Twenty-three clients stated that they used naloxone in overdose situations. The ENCORE Program has successfully reduced the transmission of HIV among injecting-drug-users to nearly zero in recent years.
Evaluation Tools	To be determined by municipalities with technical assistance from RIDOH.
Links/Other Info	ENCORE Needle Exchange Service
Advisor	<p>Thomas E. Bertrand, MPH, MA Chief, Center for HIV, Hepatitis, STD, and TB Epidemiology; Rhode Island Department of Health Thomas.Bertrand@health.ri.gov 401-222-4655</p>

Strategy	Prevention
Intervention	Distribution of Fentanyl Test Strips (FTS)
Target Population	Active drug users
Intervention Description	Provide harm reduction education and distribute FTS to active drug users.
Evidence	FTS can effectively prevent overdoses. Evidence has shown that users changed drug-use behavior after using FTS to test drugs.
Evaluation Tools	To be determined by municipalities with technical assistance from RIDOH and Brown.
Links/Other Info	Use of rapid fentanyl test strips among young adults who use drugs Fentanyl test strips as an opioid overdose prevention strategy: Findings from a syringe services program in the Southeastern United States Implementation Toolkit is available through Brown University.
Advisor	Max Krieger, MS Research Assistant, Brown University School of Public Health maxwell_krieger@brown.edu 401-863-1448

Strategy	Prevention
Intervention	Project Schools Using Coordinated Community Efforts to Strengthen Students (SUCCESS)
Target Population	Middle and high school students (ages 12-19 years old)
Intervention Description	Student Assistance Counselors provide an assessment and conduct individual and group sessions for students with alcohol, drug, school, family, peer or other problems that can lead to alcohol and drug use. Prevention efforts are aimed at changing student, parent, and community norms and expectations about substance use.
Evidence	Favorable effects of program on alcohol and other drug use; Considered a model intervention by several organizations, including SAMHSA's National Registry of Evidence Based Program and Practices (NREPP).
Evaluation Tools	To be determined by municipalities with technical assistance from RIDOH.
Links/Other Info	Residential Student Assistance Program Rhode Island Student Assistance Services
Advisor	Sarah C. Dinklage, LICSW Rhode Island Student Assistance Services 401-732-8680 sdinklage@risas.org

Suggested CODE Phase Two Rescue Initiatives

Strategy	Rescue
Intervention	Overdose Education and Naloxone Distribution (OEND)
Target Population	General public
Intervention Description	<p>To be determined by municipalities with RIDOH technical assistance. Examples of past interventions can be found here.</p> <p>To be considered for successful implementation:</p> <ul style="list-style-type: none"> ● Identify people/places where consistent, monthly training can be facilitated; ● Identify and train volunteers (Preventing Overdose and Naloxone Intervention (PONI) Train-the-Trainer curriculum available); ● Develop a social marketing and/or publicity plan; and ● Incorporate the partnership of local healthcare and social service professionals. <p><i>Note: Funds cannot be used for the purchase of naloxone. PONI may be able to donate naloxone kits.</i></p>
Evidence	OEND has been found to have a low-rate of adverse events and to reduce overdose-related mortality.
Evaluation Tools	<p>Validated by Research:</p> <ul style="list-style-type: none"> ● Opioid Overdose Knowledge Scale ● Opioid Overdose Attitude ● Brief Opioid Overdose Knowledge
Links/Other Info	Are take-home naloxone programs effective? Systematic Review Utilizing Application of the Bradford Hill Criteria Poniri.org
Advisors	<p>Linda Mahoney Administrator II, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH) Linda.Mahoney@bhddh.ri.gov 401-462-3056</p> <p>Michelle McKenzie, MPH Sr. Project Director, The Miriam Hospital MMcKenzie@Lifespan.org 401-793-4790</p>

Strategy	Rescue
Intervention	Education and Promotion of the Rhode Island Good Samaritan Law (GSL)
Target Populations	Culturally diverse populations, law enforcement, active drug users, patients enrolled in medication-assisted treatment, and the general public.
Intervention Description	Education and promotion of the Rhode Island Good Samaritan Law (GSL) using plain language for the design and development of GSL-related educational materials.
Evidence	There is evidence to suggest that more education on Rhode Island’s GSL is needed and that knowledge of the GSL is associated with 911-calling behavior. An evidence-based educational intervention specific to GSL was not found.
Evaluation Tools	To be determined by municipalities with RIDOH technical assistance.
Links/Other Info	Factors associated with knowledge of a Good Samaritan Law among young adults who use prescription opioids non-medically Knowledge of the 911 Good Samaritan Law and 911-calling behavior of overdose witnesses SAMHSA Good Samaritan Law Toolkit
Advisor	Michelle McKenzie, MPH Sr. Project Director, The Miriam Hospital MMcKenzie@Lifespan.org 401-793-4790

Strategy	Rescue
Intervention	NaloxBox Installation
Target Population	To be determined by municipalities; RIDOH can provide hotspot maps of overdoses to help inform location-based installation
Intervention Description	A NaloxBox is a “smart” cabinet strategically installed in a public setting that allows bystanders to respond to an opioid overdose. Each NaloxBox contains four doses of naloxone, a mask for rescue breaths, and information on how to access treatment for addiction and take-home (personal) naloxone. <i>Note: Funds cannot be used for the purchase of naloxone</i>
Evidence	Innovation
Evaluation Tools	To be determined by municipalities, with RIDOH technical assistance.

Links/Other Info	To date, one research study has found that co-locating naloxone with AEDs is not likely to have significant reach. It is possible that other sites that have been identified as local “hot spots” will have an impact.
Advisor	Erin McDonough Director, Naloxone and Overdose Prevention Education Program; RI DMAT Medical Reserve Corps emcdonough@ridmat.org 401-489-5927

Suggested CODE Phase 2 Treatment Initiatives

Strategy	Treatment
Intervention	Targeted outreach to vulnerable and underserved populations to connect and coordinating follow-up of treatment and recovery support services.
Target Population	Individuals with mental health disorders, homeless, veterans, and high-risk populations as determined by a municipality.
Intervention Description	To be determined by municipalities. For example: Organizing a multidisciplinary team comprised of mental health professionals with experience with co-occurring disorders, peer recovery specialists to implement street outreach targeting the most high-risk and underserved populations. Team will provide referrals to treatment and recovery, transportation to services, and information about community resources (i.e., shelters and food banks).
Evidence	Innovation
Evaluation Tools	To be determined by municipalities with RIDOH technical assistance.
Links/Other Info	<p>Implementing peer recovery services for overdose prevention in Rhode Island: An examination of two outreach-based approaches</p> <p>Resources:</p> <ul style="list-style-type: none"> ● Prevent Overdose RI Support Line: 401-942-STOP (7867) ● Behavioral Health Link: 401-414-LINK (5465) ● Anchor Recovery peer recovery support specialists ● Rhode Island Homeless Coalition trainings on street outreach ● House of Hope ● Establish Uber Health or Lyft account (or other method of transportation) to transport people to services such as BH Link in East Providence or Safe Stations in Providence. ● Refer to Operation Stand Down for Veterans
Advisor	<p>Jonathan Goyer Outreach Coordinator, Anchor Recovery Center JGoyer@CareNE.org (401) 741-0014</p>

Strategy	Treatment
Intervention	Providence Safe Stations
Target Population	People who are struggling with Opioid Use Disorder (OUD).

Intervention Description	Fire stations become “safe” places where anyone can seek help for OUD without fear of legal repercussions. Services are available 24 hours a day, seven days a week. Clients are immediately connected to counselors, recovery coaches, and other treatment resources.
Evidence	Innovation. New Hampshire Safe Stations is currently undergoing a formal evaluation by the Dartmouth Center for Technology and Behavioral Health . As of November of 2018, Providence reports 63 clients were served since its inception in January.
Evaluation Tools	To be determined by municipalities with RIDOH technical assistance.
Links/Other Info	Providence Safe Stations Nashua Safe Stations
Advisor	Captain Zachariah Kenyon EMS Chief, Providence Fire Department zkenyon@providenceri.gov

Strategy	Treatment
Intervention	Computer-Based Training for Cognitive Behavioral Therapy (CBT 4 CBT)
Target Population	Individuals with OUD
Intervention Description	Providers must be willing to offer space. Computer-Based Training for Cognitive Behavioral Therapy is a self-guided web-based program that teaches a variety of skills that are specific for helping people to reduce symptoms of OUD. People working with CBT 4 CBT usually complete one module per week. Watch a demo .
Evidence	Clients who use CBT 4 CBT <i>in addition</i> to their regular treatment for OUD to reduce their use more than people in standard treatment alone.
Evaluation Tools	Included as a part of the program.
Links/Other Info	Summaries of the studies supporting effectiveness of this program.
Advisor	Kathleen Carroll, PhD Yale School of Medicine Contact: Angela Moore

Strategy	Treatment
Intervention	Rhode Island State Police to implement Heroin-Opioid Prevention Education (HOPE) Initiative with local law enforcement.
Target Population	<ul style="list-style-type: none"> • Patients discharged from a hospital or Emergency Department (ED) after suffering an overdose • Inmates who received substance-abuse treatment in prison and are released • Individuals who fail to attend a required Drug Court hearing • Individuals referred to the HOPE Initiative from law enforcement or general public.
Intervention Description	The HOPE Initiative brings treatment and recovery support services directly to overdose survivors and others at-risk for overdose by utilizing the resources of local law enforcement in coordination with substance use clinicians and recovery coaches.
Evidence	Innovation
Evaluation Tools	To be determined by municipalities, with technical assistance from RIDOH and expert advisor.
Advisor	<p>Captain Matthew C. Moynihan Opioid Enforcement and Prevention Coordinator, Rhode Island State Police matthew.moynihan@risp.gov 401-444-1008</p>

Suggested CODE Phase 2 Recovery Initiatives

Strategy	Recovery
Intervention	Developing and/or enhancing local recovery support systems
Target Population	To be determined by municipalities with RIDOH technical assistance.
Intervention Description	<p>Invest in local recovery support services. These are non-clinical support services that are used in conjunction with treatment to support individuals in their recovery goals. Recovery support can include:</p> <ul style="list-style-type: none"> ● Transportation to and from treatment and recovery-oriented activities ● Employment or educational supports ● Specialized living situations (i.e., recovery housing) ● Peer-to-peer services, mentoring, coaching ● Spiritual and faith-based support ● Parenting education ● Self-help and support groups ● Outreach and engagement ● Education about strategies to promote wellness and recovery ● Recovery community centers
Evidence	May vary depending on type of support service. More information: SAMHSA .
Evaluation Tools	To be designed by municipalities with RIDOH technical assistance.
Links/Other Info	Recovery and Recovery Support
Advisor	<p>Linda Mahoney Administrator II, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals Linda.Mahoney@bhddh.ri.gov 401-462-3056</p>

Strategy	Recovery
Intervention	Faith-Based Recovery Efforts to Reduce Fear and Discrimination Against those who have SUD and their family members
Target Population:	People served by faith-based organizations
Intervention Description:	<p>Faith-based organization to implement one or more of the following:</p> <ul style="list-style-type: none"> • Host or offer space to recovery support programs and support groups • Provide educational opportunities such as “Addiction 101” that encourages understanding, compassion, and a reduction in stigma. • Offer training programs to build the capacity of communities to respond • Support Individuals and Families in Rebuilding Their Lives • Focus Efforts on Youth and Prevention (see prevention efforts above) • Join Local Substance-Use Prevention Coalitions to Inform, Connect, and Strengthen Your Efforts
Evidence:	Recommended by the US Department of Health and Human Services
Evaluation Tools:	Dependent on the intervention chosen by the municipality with RIDOH technical assistance.
Links/Other Info:	<ul style="list-style-type: none"> • Detailed Practical Toolkit published by US Department of Health and Human Services • Video by US Department of Health and Human Services: “Recovery, Prevention, & Hope: National Experts on Opioids Equip Faith and Community Leaders” • A Mental Health First Aid (MHFA) course is available, which includes how to respond to substance use disorders.
Advisor	<p>Jessica Swanson, MBA Drug Overdose Prevention Program Project Coordinator, Rhode Island Department of Health Jessica.Swanson@health.ri.gov 401-222-3329</p>

Strategy	Recovery
Intervention	E-Recovery/mobile connections app: CHESS Health
Target Population	People seeking and/or undergoing OUD treatment
Intervention Description	CHESS Health is a smartphone app that promotes positive behavior change and provides 24/7 support.
Evidence	<p>A-CHESS has been used by more than 7,000 people and used by 60 treatment centers nationwide.</p> <p>A pilot study of the feasibility and potential effectiveness of using smartphones to provide recovery support</p> <p>Research trials have shown that patients had significant improvements in:</p> <ul style="list-style-type: none"> • Risky drinking days • Illicit drug-use days • Quality of life

	<ul style="list-style-type: none"> • Human immunodeficiency virus screening rates • Number of hospitalizations
Evaluation Tools	Municipalities can work directly with ACHESSE vendor (and with RIDOH) to develop a <u>short</u> evaluation.
Links/Other Info	<ul style="list-style-type: none"> • A pilot study of the feasibility and potential effectiveness of using smartphones to provide recovery support • A-CHESSE research trials • A-CHESSE Relapse Prevention App demonstration
Advisors	<p>David Gustafson, PhD, University of Wisconsin School of Engineering and Preventative Medicine Angela Moore amoore@chess.health</p>

Strategy	Recovery
Intervention	Peer Recovery Specialist Services and/or Specialized Training for Peer Recovery Specialists
Target Population	Active drug users and/or individuals in active recovery
Intervention Description	Provide a space (e.g., churches, community centers) for peer recovery support specialists to provide peer support services to individuals in an underserved location.
Evidence	Innovation
Evaluation Tools	Dependent on the intervention chosen by the municipality with RIDOH technical assistance.
Links/Other Info	<ul style="list-style-type: none"> • Parent Support Network • ANCHOR Recovery
Advisor	<p>Linda Mahoney Administrator II, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals (BHDDH) Linda.Mahoney@bhddh.ri.gov 401-462-3056</p>

Strategy	Recovery
Intervention	Support systems to families impacted by the overdose crisis
Target Population	Families affected by opioid-related trauma (i.e., overdose or family member struggling with opioid use disorder).
Intervention Description	By utilizing local and other resources, develop a network a support to families affected by overdose in your municipality.
Evidence	Community reinforcement training for family and significant others of drug abusers: a unilateral intervention to increase treatment entry of drug users.
Evaluation Tools	To be designed by municipalities with RIDOH technical assistance.
Links/Other Info	<ul style="list-style-type: none"> • Summary of the studies supporting effectiveness of Community Reinforcement and Family Training (CRAFT) • Resources Education Support Together (REST) - REST uses Community Reinforcement and Family Training (CRAFT) to teach family members about communication building, positive reinforcement, and communication problem solving to discourage using behavior. • Allies in Recovery • The Family Taskforce - The Family Task Force is a strong group of active and informed families of youth and adults who have or had opioid and substance use disorders who provide support, educate, and advocate for accessible and effective substance use prevention, treatment, response, and services that promote abstinence and recovery. • Parent Support Network of Rhode Island • Department of Behavioral Healthcare, Developmental Disabilities and Hospitals • Behavioral Health Link • Prevent Overdose RI • Providence Safe Stations
Advisors	<p>Laurie MacDougall Founder & Executive Director, Resources Education Support Together l.macdougall@psnri.org 401-467-6855</p> <p>Trisha Suggs Associate Administrator, Project Director for the State Youth and Young Adult Treatment Planning Grant; Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals Trisha.suggs@bhddh.ri.gov 401-462-2773</p>