



Broome Opioid Awareness Council

September 14, 2022 | 1pm – 2:30pm
Virtual Zoom Meeting • Broome County Health Department

Agenda

Call to Order: Marissa Knapp, Opioid Overdose Prevention Coordinator

Join Zoom Meeting:

<https://broome.zoom.us/j/83067097691?pwd=d0d5UXBhMEZUS3duREt1TjBTTEwwUT09>

Meeting ID: 830 6709 7691

Passcode: 2022

1. Welcome and Introductions-

In Attendance: Ernest Cureton (Salvation Army), Kristin Russell (Broome County Health Department), Marissa Knapp (Broome County Health Department), Mary McFadden (Broome County Health Department), Jules Denning (Finger Lakes Prevention Resource Center), Erica Robinson (Helio Health), Cara Fraser (UHS), Maria Fabrizi (Prevention Coalition of Broome County), Colleen DeLuca (UHS), Susan Wheeler (Community Member), Christopher Ryan (Broome County Health Department), Kurt Zumbach (Broome County Probation), Megan D'Introno (UHS), Calvin Brown (UHS), Jillian Beloch (Broome County Mental Health), Jo Ann Moore (Lourdes), John Snider (Two Rivers Church), Kelly Sullivan (VOICES Recovery Center), Dani Berchtold (SUNY Broome), John Barry (STAP), Sidney Graham (Lourdes Youth Services), Murph Shea (VOICES Recovery Center), Hannah Driskell (Broome County Public Defenders), Brooke Traver (Binghamton University), Alex Buncy (Binghamton University), Sherece Laine (Binghamton University/Broome County Health Department), Nancy Williams (Broome County Department of Social Services/Mental Health), Michael Bender (Broome County Health Department), Alexis Pleus (Truth Pharm), Wendy

Antalek (Broome Tioga BOCES), Carmela Pirich (Addiction Center of Broome County), Megan Olmstead (Broome County Mental Health), Courtney Hayes (Truth Pharm), Craig Halwachs (Hillside Family of Agencies), Brian Norris (Broome County Security)

2. Narcan Summit-

- The goal of the discussion was to get an idea of the landscape of the Naloxone distribution happening in Broome County.
 - BCHD is working on a strategic plan for BOAC and thought this would be a good time to start the discussion.
 - There was a survey that was sent out before the meeting to the identified OOPP providers to gain a sense of what their activities and capacity. Thank you to all those OOPPs who responded!
- Naloxone Needs Assessment Survey- See Attached PPT slides.
 - Questions on the PPT:
 - How many OOPPs reported on their numbers to get the amounts of Naloxone distributed?
 - 2-3 did not have their quantities, but were looking into their numbers
 - Are there any OOPPs that were not identified?
 - NYSDOH website has information on where you can get Narcan, it is a map layout and mostly identifies the pharmacies and not the community agencies.
 - John mentions that it could be intentional due to Naloxone supply coming from the AIDS institute, not the DOH. The primary issue may be funding, as the AIDS institute spends about 8-10 million a year on Naloxone for the entire state. Recently OASAS has agreed to giving more money to the department for Naloxone distribution, so we may see a change in the map and how it is presented.
 - Family Counseling Services
- Strengths:
 - What are our community assets? Where are our programs excelling?
 - The benefit of COVID-19 was the adaption of the OOPPs- providing naloxone via drop off and virtual trainings

- After some conversations, it seems that it was a benefit because it was a less threatening way and people felt more comfortable reaching out via Facebook and text.

- It seems safe to assume there was over 2,000 people who were trained in 2021, which is impressive.
- The timeliness of the OOPPs for being able to train people within the hour- the availability of the quick turnaround time from OOPP partners is remarkable.
- The community perception of Naloxone has shifted in a positive direction. One of the STAP employees was invited to a school's health class to give a Naloxone training to seniors in the high school. Maria (PCBC) also was approached by a school district to have their staff and community trained. Truth Pharm has also been approached by schools and sent replacement kits when needed.
- Broome County has done better with alerting of spikes, which has helped with community OOPPs to push for naloxone distribution in the community.
- Also, during spikes the assistance from the BCHD connecting community agencies to high-risk locations to meet people where they are at has been incredible at getting kits distributed.
- The combination of PSAs, media releases, along with the connections to the naloxone trainings have added as well.
- Walk up Narcan training at all tabling events has helped push the distribution of naloxone in the community.
- Adaptability of the OOPPs, many who had specific target populations but open their trainings to community members during the times of overdose spikes.

- Weaknesses:

- Where do we lack (i.e. location, population, time, etc.)?
 - Emergency services giving out cards with information about OOPPs or leave-behind programs through EMS
 - School students- all schools should be training students and staff on Naloxone
 - NYS allows for the distribution of naloxone to anyone 16 and older with no questions
 - OOPPs have the capacity to evaluate if anyone younger than that can comprehend/understand

the training and administration of naloxone

- Hospital ER after someone is released from being treated for an overdose
 - NY Matters has been implemented, and it would be a great program for ERs to get involved in.
ER providers can prescribe 2-3 days of suboxone and bridge the person with NY Matters to have them connect with a MAT provider that will continue the treatment.
- Treatment centers- when someone is released from treatment
- The jail population
- Vending machines:
 - STAP is looking at getting vending machines
 - ACBC ordered 2 vending machines- Carmela reached out to the Sheriff to put the vending machine at the jail but did not receive a response.
 - Ideas on locations: library, bus stations, rural communities, mini-marts, convenience stores
 - Carmela can share pictures of what would be put in the vending machine. There is a lot of customization to it when ordering. People who are interested in utilizing it can get a card that will allow them access to it.
- STAP often runs into issues with reaching capacity on their naloxone ordering, John is working on this with the AIDS institute, but it is a challenge for them. The capacity issue for STAP is more difficult because they have multiple different counties they serve and every ESAP participant is given naloxone when needed. STAP also gets their naloxone from a subcontractor through the NYSDOH and get limited from that.
- Binghamton University/ SUNY Broome
 - There is a lack of discussion on naloxone need on BU campus
 - There seems to be a disconnect, higher ups possibly not accepting there is use on campus while others are asking for Naloxone and harm reduction measures
 - BU Office of Emergency Management reached out to BCHD to provide naloxone in all of their AEDs on campus.

- Maria suggested the recovery group that is getting started at BU as an option for a student group
 - There was a question on if BU UPD carries naloxone- this will be looked into
- Opportunities:
 - Is there a group we are not currently targeting (i.e. bars, students- higher ed and school aged, seniors, faith-based communities, past trainees who's kits expire, etc.)
 - For those whose kits are used- is EMS leave behind a good option? Does EMS purchase their naloxone or receive it from a state entity? Mike Bender offered to investigate this. Can they be provided with kits to distribute to the public?
 - Mobile app that identifies the OOPPs in the area and has videos on naloxone trainings
- Threats:
 - Stigma and decision maker perception associated with naloxone- the stigma lies in the population that uses cocaine, counterfeit pills, etc.
 - Getting the public to buy in harm reduction
 - Addressing the fentanyl myths such as if there's fentanyl on a surface and someone touches it they can overdose etc.
 - Encouraging rescue breathing along with Naloxone use
 - If Naloxone supply chain falls apart
 - Hesitations on calling 911 from people. A discussion on the Good Samaritan Law would be helpful, but possibly a good discussion for Peer Response with law enforcement.

3. BOAC/Health Department Updates-

- DEA Take Back Day-
 - October 29th from 9am-1pm at the Health Department
 - If you would like to table at the event, please reach out to Kristin Russell-
Kristin.Russell@broomecountyny.gov
 - Thank you STAP, for partnering with us on collecting sharps again!

- Sharps Kiosk-
 - The health department received a sharps disposal kiosk from the NYS DOH for the community to dispose of sharps/syringes.
 - The policy and procedures are being approved at the Health Department, once this is finalized, there should be a more definitive date in the opening.
 - This kiosk will be available for anyone to dispose of sharps/syringes when the Health Department is open.
- Pharmacy Initiative-
 - The pilot project is happening with UHS and Lourdes pharmacies.
 - Anyone who is prescribed a short-term opioid will receive a Detera drug deactivation bag.
 - There was a lot of press that came to the news release and there has been great feedback on this.
- Accidental Injury and Death Review Team-
 - Kristin and Marissa are reaching out to partners to meet individually about this initiative.
- Community Education Opportunities-
 - Health Department staff and Prevention Coalition staff are very interested in starting community education events again.
 - Over the summer, there was a parent café that was held at Deposit School District, where “Dead on Arrival” was shown and there was a discussion held afterwards.
 - If anyone knows of a group that is interested in this, please reach out.

Next Meeting: Wednesday October 12, 2022 at 1pm.

Location: TBD