

DIRECTORY OF
OPIOID/HEROIN
ABUSE
COALITIONS AND
PROGRAMS

1st Edition

February
2017

COLORADO CONSORTIUM FOR PRESCRIPTION DRUG ABUSE PREVENTION
HEROIN RESPONSE WORK GROUP



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Introduction

In May 2016, the Colorado Department of Public Health and Environment (CDPHE) partnered with the Rocky Mountain High Intensity Drug Trafficking Area (RMHIDTA) program to co-chair a Heroin Response Work Group within the Colorado Consortium for Prescription Drug Abuse Prevention. This group is made up of diverse stakeholders including the Colorado Attorney General's Office, the University of Colorado, the Denver Division of the Drug Enforcement Administration, Red Rock Recovery Center, and the Colorado Department of Human Services, as well as various prevention, recovery and treatment partners. The following five initial priority objectives were identified by the group:

- i. Prepare an impact assessment for heroin in Colorado in order to shape response strategies.
- ii. Conduct a survey of individuals who have experienced heroin addiction currently and/or in the past in order to inform strategies for prevention.
- iii. Identify activities and current practices associated with prevention, treatment, risk mitigation and recovery of heroin use and overdose.
- iv. Enhance the relationships between law enforcement, treatment providers, and public health practitioners.
- v. Increase information sharing about heroin in Colorado among law enforcement, providers from treatment, risk mitigation, and recovery programs, as well as prevention program participants.

The purpose of this report is to briefly summarize both Colorado and national programs which aim to affect the current heroin and opioid epidemic, as well as provide current points of contact (POC) for each respective program. By publishing this document, we do not intend to comprehensively represent all coalitions and programs involved in the reduction of illicit opioid and/or opiate abuse. This is the first edition of a dynamic document which will be periodically updated as new partnerships and coalitions form, strategies evolve and POCs change.



Document Organization

This document is organized into two main sections: Colorado Resources, and National Resources. Within each section, programs have been further classified as Prevention, Treatment & Recovery, or Risk Mitigation programs based on primary functions and/or emphasis. The following guidelines were used in classifying programs:

- Prevention – Primary activities include public awareness campaigns, public education, prescriber education, social media campaigns, early trend recognition (surveillance), prevention policy, community engagement, and law enforcement techniques for minimizing the supply of heroin and the diversion of opioids. In general, these coalitions and programs aim to avert the initiation of illicit opioid and/or opiate abuse.
- Treatment & Recovery – Primary activities include public safety referral programs, treatment & recovery policy activity, 24 hour helplines, and any program designed to expedite access to treatment and/or recovery services. In general, these coalitions and programs aim to facilitate the knowledge of, access to, and utilization of treatment and recovery services.
- Risk Mitigation – Primary activities include syringe access services, distribution of naloxone, and testing for transmittable diseases including hepatitis C virus (HCV) and Human Immunodeficiency Virus (HIV). Syringe access services go by many different names, but primarily serve the same overall purpose of reducing disease transmission (also known as Syringe Services Programs – SSP, Syringe Exchange Programs – SEP, or Needle Exchange Programs – NEP). In general, these coalitions and programs aim to avert the negative consequences, including illness and death, associated with illicit opioid and/or opiate abuse.

Note: **This document is simply comprised of current practices, not necessarily best practices.** A best practice is a method, technique or program that has been generally accepted as superior to alternatives. This document does not go as far as naming programs as best practices, it simply acknowledges a program as currently active and attempts to summarize their activities. **Inclusion in this document by no means indicates endorsement by the Heroin Response Work Group, or any community partners.**



Current Practices - Colorado Resources

Prevention

Boulder County Opioid Advisory Group

Boulder, Colorado

Website: opioidadvisorygroup.aspx

Main Phone: (303) 413-7500

Point of Contact: Jamie Feld

(303) 413-7530

jfeld@bouldercounty.org

In 2016, Boulder County Public Health conducted a qualitative landscape assessment to determine Boulder County's strengths, weaknesses, and to gather stakeholder recommendations related to local opioid misuse. Key informant interviews were conducted with 36 stakeholders from the county. Stakeholders included recovery organizations, behavioral health groups, treatment providers, primary care physicians, law enforcement, school districts, and community service organizations.

The result of the landscape assessment was identification of the need for a local multi-disciplinary coalition to address identified gaps and recommendations. The Boulder County Opioid Advisory Group is a group of over 84 law enforcement officials, healthcare/treatment providers and public health/prevention practitioners who have identified as interested in opioid abuse and misuse prevention.

The Boulder County Opioid Advisory Group is working on activities in the clinical, law enforcement, school, prevention, and treatment sectors. The following are some activities organized by each sector, to be finalized by the group and assessed on an ongoing basis.

Medical Community:

1. Improve provider prescribing practices around opioids
2. Reduce stigma by offering provider trainings

Law Enforcement:

1. Gain training on naloxone and overdose prevention
2. Address law enforcement linkage to treatment and other resources



3. Shift from punishment to treatment approach for opioid users
4. Support law enforcement response to emerging trends, including synthetic opioids

Treatment Agencies:

1. Advocate for expanding access to medication assisted therapies
2. Improve treatment of addicted people and enabling recovery

Prevention Organizations:

1. Improve alignment and teamwork among existing programs and opioid-related coalitions
2. Enhance access to naloxone in the community, syringe exchange programs, law enforcement, and treatment centers
3. Maintain syringe access service availability
4. Improve access to timely epidemiological data

Community Members:

1. Increase awareness of the risks and crisis
2. Enhance community voice and capacity
3. Promote safe disposal and take-back events



Communities That Care - Colorado

Statewide

Website: <https://www.colorado.gov/pacific/cdphe/ctc>
<http://www.communitiesthatcare.net/>

Point of Contact: Erin Flynn

(303) 692-6435

erin.flynn@state.co.us

As part of the nationwide Communities That Care (CTC) program, the Colorado Department of Public Health and Environment (CDPHE) has received funding to support substance abuse prevention among Colorado youth. Approximately \$7,125,000 was provided for this 2016-2017 program. The overall goal of CTC is to promote healthy youth development, improve youth outcomes and reduce problem behaviors.

The CTC prevention process consists of five phases:

1. Get Started - communities get ready to introduce CTC
2. Get Organized - form a board, or work within an existing coalition
3. Develop a Community Profile - assess community risks and strengths, identify existing resources
4. Create a Community Action Plan - create a plan for specific prevention work
5. Implement and Evaluate - selected programs are put into action, the effects are closely monitored and evaluated

Additionally, the effectiveness of the CTC program has been evaluated in a randomized controlled trial which involved 24 communities across 7 states. According to the national CTC website, "Youth from CTC communities were 25% to 33% less likely to have health and behavior problems than youths from control communities."

The 2016-2017 Colorado CTC [grantees and facilitators](#) are listed on the CDPHE website.



Douglas County Youth Substance Abuse Prevention Coalition

Douglas County, CO

Website: <http://www.dougcoprevention.org/>

Main Phone: (720) 200-9200

Point of Contact: Steven Martinez

(720) 200-1667

smartinez@tchd.org

In 2016 the Tri-County Health Department (TCHD) was awarded a Strategic Prevention Framework (SPF) grant from the Colorado Department of Human Services (Office of Behavioral Health) to focus on youth substance abuse in the Douglas County area. The Douglas County Youth Substance Abuse Prevention Coalition's prevention efforts will be geared towards alcohol (ages 12-20), marijuana (ages 12-20) and to a lesser extent prescription drugs (ages 12-25). Representation on the coalition includes the following Douglas County resources; The Douglas County Sheriff's Office, local fire and rescue, emergency medical services, school nurses, concerned parents, and public health professionals.

One key aspect of this program is that efforts are to be focused on "environmental prevention." Basically this means the coalition will focus on affecting community conditions or policies so that the availability of substances is reduced as well as the demand.

Currently TCHD is in the first year of the grant cycle and conducting step 1 of the SPF process (assess needs). In early 2017, the prevention coalition will initiate step 2 (build capacity) of the SPF process.

Some of the successes during the first phase of the grant cycle include:

- Formation of Adult Coalition and Youth Leadership Board (12-18 years of age)
- Created a presence through local events and partnerships



Douglas County: Youth Education & Safety in Schools (YESS) Program

Douglas County, CO

Website: <http://www.dcsheriff.net/school-safety/youth-education-and-safety-in-schools-y-e-s-s/>

Main Phone: (303) 660-7505

Point of Contact: Phyllis Harvey

(303) 814-7033

pharvey@dcsheriff.net

In lieu of providing the traditional Drug Abuse Resistance Education (DARE) curriculum in schools, the Douglas County Sheriff's Office created its own educational program known as the Youth Education & Safety in Schools (YESS) program. The program was first implemented in 2008, with strong partnership from the Douglas County School District. Since 2008, the program has been implemented in school districts across the state.

Below are some of the programs offered by uniformed YESS instructors:

- Friendly Faces Fake Us Out – stranger safety for elementary schools
- Internet/cyber security – staying safe while online
- Substance abuse education – illicit drugs, marijuana, prescription medications, alcohol, tobacco
 - Up the Down Staircase – illegal prescription drug and heroin use
- Teen relationships – who is a good friend, recognizing appropriate behaviors
- Text-A-Tip – a suspicious behavior reporting program for high school students

In addition to providing education in schools, the YESS program offers parental education in the form of Parent Boot Camps, where parents can learn more about various topics related to substance use and cyber safety.

The YESS program has been evaluated by [RMC Research](#) and has shown to increase knowledge for participating parents and students related to substance use including risky behaviors and consequences. The Parent Boot Camp has been evaluated and has shown to increase parent's knowledge and awareness of core issues related to raising healthy teens.



Illuminate Colorado

Denver, CO

Website: <http://www.illuminatecolorado.org>

Main Phone: (303) 413-3460

Point of Contact: Jade Woodard

(303) 845-0193

jwoodard@illuminatecolorado.org

Illuminate Colorado supports the partnership between three nationally established organizations in Colorado:

- Colorado Alliance for Drug Endangered Children
- Prevent Child Abuse Colorado
- Colorado Chapter of the National Organization on Fetal Alcohol Spectrum Disorders (NOFAS)

The agency is designed to leverage the resources of these three organizations and align their messaging strategies for a collective impact approach to the promotion of childhood well-being and the prevention of maltreatment. Illuminate Colorado provides education, guidance, and support for those interested in protecting Colorado children from drug abuse and child abuse.

Some of the Illuminate Colorado programs of particular interest include:

- [Circle of Parents in Recovery](#) - a program designed to coordinate and oversee specialized parent support groups with the goal of building protective factors into families
- [Smart Choices Safe Kids](#) - intended to educate families and communities on keeping kids safe from hazardous substances
- [Substance Exposed Newborns](#) - this program aims to lead collaborative approaches to decreasing substance use during pregnancy and increase the identification of infants and children affected by prenatal substance exposure



Northwest Community Opioid Reduction Project – The Yampa Valley Prescription Task Force

Routt, Moffat, Jackson Counties, Colorado

Website: <https://www.facebook.com/rxtaskforce>

Point of Contact: Ken Davis

(970) 879-1632

kdavis@northwestcoloradohealth.org or rxtaskforce@gmail.com

The Yampa Valley Rx Task Force, created out of the Northwest Colorado CDPHE Community Opioid Awareness and Reduction Project, has mobilized resources in Routt, Moffat, and Jackson counties to address the opioid epidemic in northwest Colorado. The diverse task force has been active in providing education to community members, hosting drug take back events, taking part in multi-sector collaboration, and has developed parenting support groups. Additionally, the Yampa Valley Prescription Task Force has maintained a presence at community events and on social media, and has strengthened support services in schools.

Currently, the Prescription Task Force has four key initiatives:

1. Connecting People – community awareness, education and family support around concerns of addiction and mental health.
2. Enhancing Place – initiatives that create safe and sober environments, changing community culture by reducing the blame, shame and judgment of addiction with compassion, empathy and support.
3. Fostering Prosperity – prevention and recovery programs; building the resources and access to referrals and treatment.
4. Expanding Partnerships – facilitate collaborations, community engagement strategies and advocacy work.



Rise Above Colorado

Statewide

Website: www.riseaboveco.org

Point of Contact: Kent MacLennan

(303) 464-1469

kent@riseaboveco.org

Rise above Colorado (RAC) is a drug abuse prevention program that targets youth ranging from 12 to 17 years of age as well as educators of youth. This organization utilizes a peer-driven engagement strategy that includes a Teen Action Council which consists of 20 teens who act as the face of the organization. Rise above Colorado proactively collaborates with teens, educators and community leaders in delivering educational programs, face-to-face outreach and uniquely tailored prevention efforts.

In addition to the Rise Above [social media campaign](#), this organization provides 100% free and targeted curriculum to educators across the state:

- Not Prescribed - provides teens in middle and high schools with the science and the stories to understand the risks of misusing prescription drugs and the tools and resources to manage their own health as well as advocate for their peers' health
- Meth Prevention - a 45 minute lesson which provides middle and high school aged youth the facts, tools and resources which enables them to understand the risks of methamphetamine use and to influence their peers

Currently, RAC is operating in the second year of a five year grant from the Colorado Office of Behavioral Health. Technical assistance and resource support is currently being provided to targeted communities across Colorado. The following counties are currently considered communities in need:

- Adams
- Arapahoe
- Grand
- Mesa
- Moffatt
- Prowers
- Pueblo
- Routt



Treatment & Recovery

Colorado Drug Courts

Statewide

Website: <https://www.courts.state.co.us/Administration/Unit.cfm?Unit=prbsolcrt>

Point of Contact: Brenidy Rice

(720) 625-5945

brenidy.rice@judicial.state.co.us

Drug courts are specialized programs that offer a non-traditional approach to the integration of treatment and criminal justice case processing. The overall goal of these problem solving courts is to reduce substance abuse and recidivism among offenders. There are 77 Colorado problem solving courts in operation as of February, 2016. More specifically, there are 18 judicial districts that offer adult drug courts, with a total of 27 programs. Separately, there are 5 judicial districts that offer juvenile drug courts, with a total of 6 programs.

According to the National Association of Drug Court Professionals ([NADCP](#)), drug court programs are evidence based best practices that are shown to be more effective than punishment alone. These programs are proven as cost effective, and data shows that drug use rates decrease with these types of programs in place. Nationwide, problem solving courts have become an important part of the criminal justice landscape and the [Center for Court Innovation](#) estimates there are more than 2,300 courts across all 50 states.

Colorado problem solving courts include:

- Adult Drug Courts
- Juvenile Drug Courts
- DUI Courts
- Adult and Juvenile Mental Health Courts
- Family and Dependency/Neglect Courts
- Veteran's Treatment Courts



Longmont Police Department – PAARI Initiative

Longmont, CO

Website: <http://www.longmontcolorado.gov/departments/departments-n-z/public-safety-department/community-programs/police-assisted-addiction-recovery-initiative-paari>

Phone: (303) 351-8438

Point of Contact: Deputy Chief Jeff Satur

(303) 651-8519

jeff.satur@longmontcolorado.gov

Currently, the Longmont Department of Public Safety (LDPS) is partnering with the Police Assisted Addiction and Recovery Initiative (PAARI) to take action against the disease of drug and alcohol addiction. Both the Longmont Department of Public Safety and PAARI are committed to:

- Encouraging drug users to seek recovery
- Distributing lifesaving opioid blocking drugs to prevent and treat overdoses
- Connecting people in active addiction with treatment programs and facilities
- Providing resources to other police departments and communities that desire to do more

The LDPS is working with the medical community as well as science-based recovery programs in order to reduce the number of drug overdoses, reduce the number of drug addicted persons, reduce the opioid drug demand and thereby devalue a seemingly endless drug supply. The program officially launched in early 2017 and has begun accepting clients.

The LDPS continues to seek two main types of resources:

1. Boulder County treatment providers ([criterion](#) available online)
2. “Angel” volunteers ([criterion](#) available online)

Note: Many law enforcement agencies around the nation are making the commitment to connect patients to treatment using the PAARI strategy. Additional information on PAARI is available on page 43 or www.paariusa.org.



Mary's Hope Sober Homes & New Beginnings Recovery

Littleton, CO

Website: <http://www.newbeginningsrecoverydenver.com>
<http://maryshopesoberhomes.com/>

Main Phone: (720) 473-7106

Point of Contact: Mary Brewer

(303) 830-2064

mary@nbr-services.com

As a self-funded non-profit 501(c)(3), this organization provides both treatment and recovery services to those affected by substance abuse issues in Colorado. Mary's Hope Sober Homes currently has 13 transitional homes located across Denver (over 80 beds). Each home is equipped with a house manager that assists clients through their recovery. Individuals in the transitional housing are subject to urinalysis testing as an accountability measure. Additionally, the non-profit provides reduced fare bus passes, a food and clothing bank, as well as access to recovery meetings.

After noticing that many of her sober living clients were relapsing almost immediately after entering her sober living homes, Mary Brewer founded New Beginnings Recovery Center (NBRC). NBRC offers inpatient programs ranging from 45 to 90 days in duration, and also has an intensive outpatient treatment program available (dependent on individual needs). Unique to NBRC, several alternative treatment options are provided:

- Low Energy Neurofeedback Stimulation
- Neurotransmitter Rebalancing
- Amethyst Crystal BioMat Therapy
- Chemical Balance Testing
- Massage Therapy
- Cognitive Behavioral Therapy (CBT) to Identify Triggers
- Family Relationship Repair
- Career Enhancement
- Exercise, Art, Pet, Group, and Trauma Therapy
- Pastoral Counseling
- Nutritional Education



Mental Health Partners

Boulder and Broomfield counties, CO

Website: <http://www.mhpcolorado.org/Home.aspx>

Main Phone: (303) 443-8500

Point of Contact: Ann Noonan

(720) 441-8234

anoonan@mhpcolorado.org

Mental Health Partners (MHP) operates a year-round, 24-hour walk-in center and detoxification center located at 3180 Airport Road, Boulder, CO (303-447-1665). In addition to the walk-in center, MHP has multiple locations in Boulder, Broomfield, Longmont and Lafayette. MHP serves all age groups including infants, children, adolescents, adults and whole families. Substance abuse treatment is among the many services offered, and patients in need are never turned away regardless of their ability to pay for services.

Originally considered a clinic, MHP is a long-standing non-profit organization serving the mental health needs of all Colorado community members. In 1971, MHP was federally designated as a comprehensive mental health center.

One of the many programs MHP is involved in is known as [Project EDGE](#) - Early Diversion Get Engaged. This 2014 program aimed to pair mental health therapists with police officers responding to mental health related calls for assistance. The overall goal is to divert individuals with behavioral health conditions before they face arrest. Individuals entering into Project EDGE agree to treatment and other compliance requirements as part of the program. This program is 100% voluntary, and provides individuals an opportunity to seek help prior to entering the justice system. This program is a three year federally funded grant program valued at \$966,666. It is expected that Project EDGE will affect nearly 2,000 individuals over the course of the project.

Currently, those who are at risk of arrest may be diverted into treatment in one of two ways:

1. MHP staff are dispatched to crisis scenes, along with specially trained law enforcement officers
2. Officers will drop off individuals at a pre-designated "warm hand-off" location



Phoenix Multisport: A Sober Active Community

Boulder, Colorado Springs, and Denver, CO

Website: <http://phoenixmultisport.org/>

Main Phone: 720-440-9175 (Denver)

Point of Contact: Dana Smith

(773) 459-8480

danas@phoenixmultisport.org

As a recovery organization, Phoenix Multisport (PM) supports individuals choosing to live a sober life. The community offers a safe and comfortable space for individuals in recovery, as well as strong peer support networks. The facilities are open to anyone who, at the time of walking in, has 48 hours of sobriety. All programs are 100% free of charge. Although donations are welcome, there are never charges associated with programming or membership to the individual. No matter whether an individual has 48 hours or 20 years of sobriety, PM encourages all to join the fun and supportive community.

Currently PM contracts with Denver Health to offer safe and comfortable meeting spaces for parolees and their parole officers. Transitioning out of incarceration can be difficult; this partnership helps to ease the transition for parolees and supports their continued sobriety. PM also partners with local homeless shelters to provide individuals experiencing housing insecurity with organized physical activity. There are three chapters located throughout Colorado; Boulder, Colorado Springs, and Denver. PM has expanded nationally and includes chapters in Orange County, California and Boston, Massachusetts.

Available activities include:

- CrossFit
- Meditation
- Yoga
- Hiking
- Strength training
- Open gyms
- Rock climbing
- Mountain/road biking



Rocky Mountain Crisis Partners – Crisis Support Line and Online Directory

Statewide, CO

Website: <http://www.metrocrisiservices.org/>

Phone: 844.493.TALK (8255)

Point of Contact: Brittany Ward

(303) 928-7113

bward@rmcrisispartners.org

The goal of the Rocky Mountain Crisis Partners is to put people in touch with the resources that specialize in mental health and substance abuse issues. The RMCP organization is supported by a coalition of funders, including state, county, and municipal governments, local corporations and small businesses, foundations, hospitals, individual philanthropists, and citizens who donate their time and money.

The RMCP operated Crisis Support Line is operated year-round, 24-hours a day and provides services to individuals, families, friends, treatment providers, law enforcement and first responders. Services are 100% free, confidential and immediate (translation services available). Additionally, a non-crisis peer support line is available as an option upon calling the crisis support line.

Mental health professionals staff the Crisis Support Line, which provides instant and expert crisis care. After callers make initial contact with the Crisis Support Line, representatives ensure continuous care is provided by following up with the community member in need.

Trained peer specialists staff the peer support line from 9:00 a.m. to 11:00 p.m. (Mountain Time). The peer specialists are people who have personal experience with mental health issues and/or substance abuse issues. Specialists are trained to provide supportive listening, coping skills, and tools for the facilitation of change, stress reduction, self-empowerment, and hope.

Additionally, RMCP maintains an [online directory](#) of treatment options available in Colorado. This directory is searchable and filtered by service category, age group, payer source, and area(s) served.



Routt County - PAARI Initiative

Routt County, CO

Website: <http://www.co.routt.co.us/index.aspx?nid=204>

Main Phone: (970) 879-1090

Point of Contact: Sheriff Garrett Wiggins

(970) 870-5501

gwiggins@co.routt.co.us

The Routt County Sheriff's Office has recently committed to a Police Assisted Addiction and Recovery Initiative (PAARI). The overall goal of the initiative is to provide a "warm hand-off" for heroin and/or opioid affected individuals between law enforcement and treatment providers. The Routt County PAARI is in partnership with the Yampa Valley Prescription Task Force.

Current tasks being worked on by the Routt County PAARI include:

- Obtaining a 501(c)(3) status
- Building community partnerships
- Establishing a funding mechanism for treatment options
- Establishing adequate infrastructure (e.g. treatment facilities and standing agreements)

Note: Many law enforcement agencies around the nation are making the commitment to connect patients to treatment using the PAARI strategy. Additional information on PAARI is available on page 43 or www.paariusa.org.



Young People in Recovery

Nationwide

Website: <http://youngpeopleinrecovery.org>

Main Phone: (720) 600-4977

Point of Contact: Jesse Wheeler

(720) 630-9169

jesse.wheeler@youngpeopleinrecovery.org

Young People in Recovery (YPR) is an active national recovery advocacy group and peer support network that maintains relationships with various stakeholders including treatment providers, state and federal agencies, and non-profit and for-profit organizations. Originally designed to assist recovering addicts transition out of inpatient recovery programs, YPR now goes far beyond that by providing a voice for those in recovery among national partners.

Local community-led chapters are created through grassroots organizing and training. The Denver Chapter is supported by grant funding and offers technical assistance and training across Colorado on recovery with the intent to destigmatize those dealing with substance abuse issues. Currently the Denver chapter is working to map all treatment and recovery sites across the state of Colorado.

Below are some of the programs and services that YPR can offer:

- [My Recovery is EPIC](#) - a proprietary curriculum offered only to YPR partners, clients, families and staff. This curriculum is centered on housing, education, employment, and recovery messaging. (E=Evidence-based, P=Peer delivered, I=Individual development, C=Community focused)
- [Preventative Health Initiative](#) - PHI refocuses youth priorities to health and wellness, preventing alcohol and other drug misuse.
- Change Agent Training for Young Adults (Catalyst) - a program that consists of peer coach curriculum geared towards 18-30 year old recovering addicts who have two or more years in recovery
- Youth & Families - Bridges Project - a grant funded adolescent treatment enhancement and dissemination program which falls under the Colorado State Department of Human Services.



Risk Mitigation

Boulder County Works Program

Boulder County, CO

Website: <http://www.bouldercounty.org/family/disease/pages/syringeexchange.aspx>

Main Phone: (303) 413-7500

Point of Contact: Patty Brezovar, Carol Helwig

(303) 413-7533, (303) 413-7522

pbrezovar@bouldercounty.org
chelwig@bouldercounty.org

The Works Program provides syringe exchange services, along with outreach and education to residents of Boulder county and surrounding areas. The Works Program provides a safe, legal and non-judgmental place to get free injection supplies confidentially at four separate locations:

- 2118 14th Street, Boulder, CO (303-444-6121)
- 3482 Broadway, Boulder, CO (303-413-7500)
- 3180 Airport Road, Boulder, CO (303-441-1281)
- 529 Coffman, Suite 200, Longmont, CO (303-678-6166)

As part of a larger disease prevention program, risk mitigation counseling is provided to residents in need. Additionally, the Boulder county program provides Human Immunodeficiency Virus (HIV) and hepatitis C virus (HCV) testing, as well as referrals to local addiction recovery services. Overdose prevention and naloxone training are provided for Works Program participants.

The Boulder County Works program is one of many Colorado programs included in the Colorado Syringe Access Providers Coalition ([CO-SAP](#)). The Boulder County Works Program and the Harm Reduction Action Center are two of the major partners within this organization. The overall mission of the CO-SAP is to promote the health, dignity and safety of individuals and communities impacted by injection drug use. This program aims to advance harm reduction policies, practices and programs throughout the state that address the effects of drug use including overdose, HIV and hepatitis C infection, addiction, and incarceration.



Colorado Naloxone for Life Initiative

Statewide

Website: <https://coag.gov/OCE>
<https://coag.gov/press-room/press-releases/09-19-16>
<http://www.corxconsortium.org/naloxone/>

Phone: 720-508-6565

Point of Contact: Jose Esquibel

jose.esquibel@coag.gov

The Colorado Naloxone for Life initiative is a collaborative effort with the Colorado Consortium for Prescription Drug Abuse Prevention (October-November 2016). The Office of the Attorney General allocated \$264,500 to aid in addressing public health initiatives which aim to affect the current heroin and/or opioid epidemic here in Colorado.

The funds were used to purchase 2,500 dual-dose naloxone rescue kits for distribution to law enforcement personnel and first responders in 17 Colorado counties with high rates of drug overdose deaths. The counties addressed in this initiative are Adams, Baca, Bent, Clear Creek, Crowley, Delta, Dolores, Fremont, Huerfano, Jackson, Las Animas, Mesa, Otero, Ouray, Phillips, Pueblo, and Sedgwick. The funds also supported 10 free and open to the public trainings in 6 regions across the state. Trainings, led by Dr. Joshua Blum of Denver Health and Lisa Raville of the Harm Reduction Action Center, covered how to administer naloxone and addressed protocols for its use.

Additionally, a portion of the funds were used to upgrade the [OpiRescu](#) app. This app is currently used to provide in-the-field instruction on how to administer the life-saving drug, as well as the ability to collect statistics on overdose reversals.

- [Goals](#) of naloxone For Life Initiative
- [5 Point Plan](#) for naloxone Rescue Kits (NRK)
- [Naloxone](#) statistics



Harm Reduction Action Center

Denver, CO

Website: <http://harmreductionactioncenter.org/>

Main Phone: (303) 572-7800

Point of Contact: Lisa Raville, Executive Director

lisa.harm.reduction@gmail.com

Since 2002, this Colorado program has aimed to educate, empower, and advocate for the health and dignity of Denver's injection drug users (IDU). Syringe access is available at a central Denver location, just north of the Colorado State Capitol. In addition to providing access to syringes, with the goal of curbing the spread of HIV and Hepatitis C, the Harm Reduction Action Center (HRAC) works closely with lawmakers, healthcare providers, law enforcement, and the general community. HRAC is Colorado's largest public health entity that works with patients and others affected by injection drug use in order to provide risk mitigation services. In 2015 alone, nearly 20,000 exchange episodes were supported by the HRAC. Some of the key elements of the program which have contributed to HRAC's growing success include:

- Engaging injection drug users (IDU) in decision-making
- Providing comprehensive and flexible services
- Becoming a certified syringe access program in 2012
- Engaging in strategic advocacy
- Providing personally meaningful opportunities for IDUs to self-advocate for their needs

The HRAC is proud of the fact that staff and volunteers strive to meet participants "where they are at" in the spectrum of their drug-use. Not only are clean syringes and disposal services made available, but participants are provided education in the areas of drug abuse and disease prevention, often administered through street outreach. Due to HRAC's willingness to engage people who participate in the risky use of substances, the HRAC has developed the reputation of being able to access IDUs that would not have otherwise been provided appropriate health education, healthcare services, or much needed emotional support.

As of February 2016, the HRAC has reportedly saved 345 lives in the past four years. This is due, in part, to the distribution and administration of naloxone (the "overdose reversal" drug) by the HRAC.



Current Practices - National Resources

Prevention

Alaska Opioid Policy Task Force

Juneau, Alaska

Website: <http://dhss.alaska.gov/AKOpioidTaskForce>

Point of Contact: Kate Burkhart

(907) 465-8920

kate.burkhart@alaska.gov

The Alaska Opioid Policy Task Force (AOPTF) was created in 2015 with the goal of providing evidence based recommendations to the Governor for the 2016 Legislature. Much like Colorado's Heroin Response Working Group, the AOPTF is made up of diverse members that represent crucial stakeholders affected by the rise in opioid abuse. The task force meets bi-weekly by teleconference and has prioritized the issues below:

- Law enforcement efforts to address the importation of heroin into the state
- Prescribing practices for pain management and opioid medications
- Insurance and Medicaid roles in helping to prevent/manage addiction
- Access to detoxification services
- Prescription opioid misuse, diversion, and abuse
- Improving opioid treatment in Alaska
- The collateral public health concerns of opioid abuse and injection drug use such as Neonatal Abstinence Syndrome (NAS), Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV)
- Risk mitigation practices, such as access to naloxone and syringe access programs
- Education and de-stigmatization
- Root causes of self-medication
- Potential collateral of policies considered

The advisory group actively supports peer recovery and includes individuals in recovery on the task force. In addition to advising the governor, the AOPTF worked with Senator Dan Sullivan to host the "[Alaska Wellness Summit: Conquering the Opioid Crisis](#)" on August 4th, 2016. The goal of the summit was to bring together federal and state officials and the Alaskan people to talk about the unique challenges of addiction in Alaska.



Camden County Addiction Awareness Task Force

Camden County, New Jersey

Website: <http://addictions.camdencounty.com/>

Main Phone: (877) 266-8222

Point of Contact: Jennifer Skokowski, Delaware Valley Medical

(856) 665-5100

This awareness organization, commissioned in 2014, is comprised of several community members representing youth, parents, businesses, schools, law enforcement, religious organizations, volunteer groups, healthcare professionals, state and local government and community members in recovery. The mission of the Camden County Addiction Awareness Task Force (CCAATF) is to increase awareness among county residents of heroin and prescription drug abuse and the effects on the community. More specific goals include:

- Reducing demand and availability
- Creating awareness programs for prevention and treatment programs
- Supporting the creation of additional resources for those affected by heroin and prescription drug abuse

The organization is broken into five workgroups, the main focus areas of these workgroups are:

- Availability reduction
- Prevention programs
- Policy and advocacy
- Awareness advertising
- Funding and resources

Visitors of the CCAATF website can learn general facts about [opiates](#), gain access to a “prevention materials [toolkit](#),” and can find resource information on [inpatient/outpatient](#) treatment programs, [prescription drop-off](#) locations and events, as well as [additional resources](#).

Additionally, CCAATF has created [Operation SAL](#) (Save a Life). This pilot program provides detoxification and treatment services for anyone that has survived an overdose. This law enforcement and health care provider partnership provides a “warm hand-off” to outpatient detoxification followed by intensive outpatient treatment. On a related note, the Camden County (New Jersey) Police Department began carrying naloxone in May of 2014. In the first two years of operations, there have been more than 200 overdose reversals reported by officers.



Diversion Alert

Maine

Website: <http://www.diversionalert.org/>

Phone: (207) 521-2408

Point of Contact: Clare Desrosiers

clare@diversionalert.org

Diversion Alert (DA) is a statewide program in Maine that links prescribers, pharmacists, and law enforcement in their efforts to confront prescription drug abuse. This is a separate program from the Maine's Prescription Drug Monitoring Program (PDMP). The goal of DA is to go above and beyond the goals of the PDMP by informing prescribers and pharmacists of illegal prescription drug activity. Instead of only providing medical information on controlled substance prescriptions, this statewide program provides criminal information related to diversion and illegal possession of prescription and illicit drugs.

On a monthly basis, DA distributes information on individuals arrested or summoned for prescription or illegal drug related crimes to prescribers, pharmacists and law enforcement agencies. When program participants register with DA, prescribers and pharmacists also gain access to an online, password protected 11-month arrest database.

Originally launched in January of 2009 in Aroostook County, the program expanded statewide in June of 2013. So far, [program outcomes](#) are promising. Additionally, DA was recognized in 2015 by the National Association of State Alcohol and Drug Abuse Directors as an [exemplary program](#).



Maryland Overdose Fatality Review Program

Maryland

Website: http://bha.dhmh.maryland.gov/OVERDOSE_PREVENTION/Pages/OFR-.aspx

Main Phone: (410) 767-6500

Point of Contact: Michael Baier

(410) 402-8643

michael.baier@maryland.gov

The Maryland Department of Health and Mental Hygiene (DHMH) has worked to allow local jurisdictions to establish local drug overdose fatality review teams (“OFR Teams”). The overall goal of these local teams is to conduct reviews of fatal overdose incidents in order to identify risk factors for overdose, and more importantly, opportunities for intervention in order to prevent the future occurrence of either fatal or non-fatal overdoses within the state. Data for the overdose reviews is provided by the DHMH Behavioral Health Administration in conjunction with the DHMH Office of the Chief Medical Examiner.

Specific program goals include:

- Identify missed opportunities for prevention and gaps in the system
- Build working relationships between local stakeholders on overdose prevention and improve overall collaboration and communication within a jurisdiction
- Recommend policies, programs, or changes to law that prevent overdose deaths and better serve people at risk for overdose
- Inform local and state overdose and opioid misuse prevention strategy

To date, local overdose review activities by 15+ separate operational teams have led to higher valued referral systems, increased focus on family outreach, the further identification of new target audiences for naloxone trainings, increased awareness of member agency staff, and changes to intake questionnaires to include questions about overdose history.



National Drug Early Warning System

College City, Maryland

Website: <https://ndews.umd.edu/>

Phone: (301) 405-9794

The National Drug Early Warning System (NDEWS) aims to monitor emerging drug use trends across the nation. Early trend recognition enables the early response to potential outbreaks of illicit drug use in our communities. NDEWS components are designed to detect, monitor, and follow-up on emerging drug trends to develop a more complete and accurate understanding of drug use in our community.

In 2014, the National Institute on Drug Abuse (NIDA) funded the Center for Substance Abuse Research (CESAR) at the University of Maryland, College Park. Also, in 2014 CESAR launched the [NDEWS Network](#) which is a virtual community that serves the purpose of connecting scientists, government officials, public health experts, practitioners, law enforcement representatives, and others for sharing and assisting with research.

NDEWS' data sources include:

- [Sentinel Sites](#) - 12 Communities across the United States that are experiencing significant substance use and/or misuse problems
- [Sentinel Community Epidemiologists](#) (SCEs) - points of contact for each of the Sentinel Sites
- [Community Epidemiologists](#) (CEs) - points of contact for additional sites of interest



New York State Senate – Heroin Task Force

Statewide

Website: <https://www.nysenate.gov/committees/heroin-task-force>

Point of Contact: Morgan Maragliano

(518) 455-3111

mmaragli@nysenate.gov

Since 2011, the New York State Senate Majority Coalition has been identifying shortcomings in heroin and opioid abuse prevention and treatment-delivery systems, and has been seeking legislative solutions for these issues. Since March of 2014, members of the New York State Senate Joint Task Force on Heroin and Opioid Addiction have been traveling across the state and listening to those who are intimately close to the heroin epidemic. More recently, the statewide Heroin Task Force for has published a 2016 report detailing recommendations for the state to meet this growing epidemic head-on.

In the [full detailed report](#), a “Four-Prong Approach” is described in detail. Legislative recommendations are fully described, which aim to impact four areas of the heroin epidemic: Prevention, Treatment, Recovery and Enforcement. In addition, fiscal year 2017 funding recommendations are laid out, which includes a total of \$166 million dedicated to counter-act the increasing threat to New York.

While much work remains to be done, this legislative roadmap is a critical first step in the implementation of important strategies identified by those experts most familiar with the issues at hand. The following are highlights from the recommendations provided in mid-2016:

- Prevention – limit initial prescriptions, spread awareness/education, establish a naloxone kit registry and increase availability
- Treatment - mandate continuing education for providers, remove barriers to MAT, examine insurance coverage, and establish assisted outpatient services
- Recovery - create a sober living task force, expand treatment options for judicial diversion participants, and increase the sharing of vital statistics
- Enforcement - enhance penalties for distribution of controlled substances on park grounds and playgrounds, facilitate the conviction of drug dealers, enhance judicial access to juvenile records for determining diversion program eligibility, create the crime of homicide by sale of an opioid controlled substance, and develop a formula to disperse funds acquired from the seizure of assets



New York Task Force – Combat Heroin and Prescription Drug Abuse

Statewide

Website: <https://www.ny.gov/governor-cuomos-task-force-combat-heroin/governor-cuomos-task-force-combat-heroin#about-the-task-force>

Main Phone: (518) 474-8390, (212) 551-9441

Pont of Contact: Arlene Gonzalez-Sanchez

(518) 457-1758

commissioner@oasas.ny.gov

This statewide Heroin Task Force is comprised of healthcare providers, policy advocates, educators, parents, and New Yorkers in recovery. The task force will initially focus on expanding awareness of heroin and opioid addiction, enhancing statewide prevention efforts, increasing access to treatment, and improving support for those in recovery.

Lieutenant Governor Kathy Hochul and the Commissioner of New York State’s Office of Alcoholism and Substance Abuse Services, Arlene Gonzalez-Sanchez, both co-chair the recently formed group. There are approximately twenty members on the task force which represent a variety of other sectors affected by the heroin epidemic in the state of New York.

In the 2016 [Heroin and Opioid Task Force Report](#), twenty-five separate recommendations are described with the specific intent to affect prevention, treatment, recovery and enforcement. Some recommendations overlap the New York State Senate Heroin Task Force recommendations, but some are made specifically by the larger New York Combat Heroin and Prescription Drug Abuse Task Force. Additionally, some members of the New York State Senate Heroin Task Force participate in the broader Statewide Task Force described here.

Since 2014, some of the work contributed by this dynamic group includes:

- Expanding insurance coverage for substance use disorder treatment; thereby increasing access to treatment
- Launch of a public awareness prevention campaign
- Increased sharing of prescription drug data with New Jersey through the Prescription Drug Monitoring Program
- Increased availability and accessibility of naloxone
- Training of first responders and community members to recognize and respond to emergency overdose situations



Partnership for a Drug-Free New Jersey

Statewide

Website: <http://www.drugfreenj.org/>

Phone: (973) 467-2100

Point of Contact: Jeannine Brown

(973) 467-2100 ext. 4

office@drugfreenj.org

This prevention program is the largest, continuous Public Service Campaign in the history of New Jersey. In 1992, the Partnership for a Drug Free New Jersey (PDFNJ) was created as a state anti-drug alliance to localize, strengthen, and deepen drug-prevention media efforts. The overall goal of PDFNJ is as follows: “That, whether in the workplace, at school, at home, or in the community, the people of New Jersey are never far from an anti-drug message.”

PDFNJ engages the community through a variety of innovative programs, including:

- [School based programs](#) – last year alone, over 80,000 New Jersey school children participated in one of the many targeted PDFNJ prevention programs
- [Community based programs](#) – including Bowl Down Drugs, [Shout Down Drugs](#), the [Heroin Artwork Exhibit](#), and the American Medicine Chest Challenge
- [Do No Harm Symposium Series](#) – focuses on provider education in order to promote better decisions for patients, as well as educating providers on the link between opioid prescription drug abuse and the rising heroin problem

Every year, the PDFNJ publishes an annual report which describes the accomplishments and community involvement for the previous year. The most recent annual report is available [here](#).



Partnership for Drug Free Kids

New York City, New York

Website: <http://www.drugfree.org>

Main Phone: (212) 922-1560

Point of Contact: Kevin Collins

(315) 853-2194

kevin_collins@drugfree.org

The Partnership for Drug Free Kids, formally known as Drug Free America, is a non-profit organization that was created in the mid-1980s in response to the crack/cocaine epidemic. Historically known for their public service campaigns geared towards prevention, in recent years the organization has broadened its horizons and began supporting parents and families in actively finding the help for their teens.

The Partnership for Drug Free Kids has a robust online community that provides ongoing and updated information via the web, including information and resources specific to the county's opioid epidemic and heroin specific [education and resources](#). The organization also now offers direct services for parents in the form of a toll-free helpline to help parents establish a course of action for their family. The helpline (1-855-DRUGFREE), different than a crisis line, is available Monday through Friday from 9AM to 5PM ET. The helpline staff is comprised of master's degree level experts in parent support. Staff is trained to listen to the concerns of parents.

Similar to many other non-profit organizations, the Partnership for Drug Free Kids relies heavily on corporate and foundation partners in order to continue the important work they do. For a list of current partners, visit the Partnership for Drug-Free Kids [website](#).



Resolve Montana – Bitter Pill Art Contest

Statewide, Montana

Website: <https://dojmt.gov/consumer/prescriptiondrugabuse/bitter-pill-art-contest/>
<http://resolvemontana.org/>

Point of Contact: Kaelyn Kelly, Stacy Zinn

(406) 444-2649, (406) 317-3725

kkelly@mt.gov, stacy.d.zinn-brittain@usdoj.gov

The United States Drug Enforcement Administration (DEA), the District of Montana U.S. Attorney's Office, and the Montana Attorney General's Office Resolve Montana initiative have come together to present *Bitter Pill: Montana Lives Affected by Rx Abuse*.

This awareness centered art exhibition aims to express the human side of prescription drug abuse and recovery. Artwork is seen as an easy conversation starter when it comes to discussing difficult topics such as drug addiction and recovery. This traveling exhibit showcases works from more than 30 amateur and professional artists from across Montana whose pieces examine the prescription drug abuse epidemic. Simply put, the art showcase provides the opportunity for positive community discussion from the perspectives of those struggling with the effects of prescription drug abuse.

This model of awareness event could be used to create conversation around heroin and other opioid abuse as well. Recent Bitter Pill events occurred at the following locations:

- 18 October – 11 November
 - Paris Gibson Square Museum of Art (Great Falls, MT)
- 22-29 January 2017
 - Montana State University (Havre, MT)
- 30 January – 5 February 2017
 - Stone Child Community College (Box Elder, MT)



Safe Communities Coalition

Hunterdon and Somerset Counties, New Jersey

Website: <http://www.safecoalition.org/home>

Main Phone: (908) 782-3909

Point of Contact: Jerri Collevechio

jcollevechio@hunterdonprevention.com

The vision of this coalition is to “Live in a Safe and healthy community by eliminating drug use, underage drinking and prescription drug abuse.” Since 2003, this organization has grown from the “Safe Homes” initiative in Hunterdon County alone, to the current organization which is highly involved in various organizations throughout both Hunterdon and Somerset Counties.

Some of the successes of this coalition include:

- The first permanent prescription drop-off box, which has collected over 500 lbs. of prescription drugs since October of 2011
- Several successful local campaigns such as “Know the Law” and “Parents Who Host Lose the Most”
- Establishment of a youth coalition which has created public service announcements for schools
- A mobile advertisement truck as part of the “Social Norms” campaign

One of the more targeted approaches to curbing the heroin and prescription drug abuse epidemic is the Steps to Action Recovery and Treatment (START) packets which are being distributed to people who have been impacted personally by addiction or substance abuse. These [packets](#) include information on treatment services, insurance concerns, no-charge naloxone training sessions and kits, current law/legislation, prescription drop box information, and upcoming narcotics anonymous meetings in the local area.



Southeast Wisconsin's Heroin Initiative

Milwaukee, Wisconsin

Website: <http://city.milwaukee.gov/Heroin-Initiative>

Point of Contact: Alderman Michael Murphy, City of Milwaukee council member

(414) 286-2074

mmurph@milwaukee.gov, edwin.huertas@milwaukee.gov

This organization has been crucial in efforts to address opioid abuse and overdose deaths in Milwaukee, Wisconsin. Alderman Michael Murphy has committed to shed light on the opioid epidemic in the Milwaukee area and has partnered with the Zilber Foundation, Milwaukee County, and the City of Milwaukee Health Department to focus on these efforts. The Zilber foundation is a private, independent grant-funding organization that works to enhance the lives of individuals, families and neighborhoods in the City of Milwaukee. With the help of the partnership, the initiative has held multiple community events which have helped to spread awareness.

Alderman Murphy's Office has recently released new information on the status of heroin in the local community:

- [Analysis of 888 Local Heroin and Opiate Overdose Deaths Yield Eye-Opening Results](#)
- [888 Bodies and Counting](#)

In 2014, Milwaukee hosted the Southeast Wisconsin Heroin [Symposium](#). The symposium brought together various diverse stakeholder groups to address the growing opioid and heroin problem. Participants included police officials, doctors, pharmacists, non-profit service groups, addicts, and government and academic institutions. The symposium committed to action oriented discussions and those who attended were asked to carry out an action item within their organizations. The state plan prioritized the following topics:

- Prescription drug abuse
- Fostering healthy youth
- Education
- Distribution and disposal of prescription drugs
- Law enforcement efforts
- Early intervention and treatment



U.S. Drug Enforcement Administration – Operation Prevention

Nationwide

Website: <http://www.operationprevention.com/>

Phone: 1-800-323-9084

The DEA and Discovery Education have partnered in an effort to combat a growing epidemic of prescription opioid misuse and heroin use. Operation Prevention’s mission is to educate students about the true impacts of opioids and kick-start lifesaving conversations in the home and classroom. Discovery Education is the leading provider of digital content to schools, with 100% access to the K-12 universe in the United States. More than 38 million educators and 3 million students access Discovery Education’s subscription services.

This program is designed to run over the next three school years. The specific goals, which are tailored to target audiences, include the following:

- Students - provide self-paced, as well as teacher-led digital lesson plans, create forums for middle school and high school students to connect with experts, and provide students opportunities to participate in a national student challenge
- Teachers - deliver real-world context to science and health classrooms across the country by providing teachers with curricula on the science behind addiction and drugs’ impact on the human brain and body
- Parents - equip parents with the knowledge and resources to start often difficult conversations, recognize warning signs of drug abuse and addiction, and take action to help and/or educate teens on the dangers of drug abuse



U.S. Drug Enforcement Administration – 360° Strategy

Nationwide

Website: <https://www.dea.gov/prevention/360-strategy/360-strategy.shtml>

Phone: (202) 307-7977

Point of Contact: Sean Fearn

(202) 307-7936

The U.S. Drug Enforcement Administration’s (DEA) 360° Strategy is a 2015 initiative based on a three-pronged approach to combating heroin/opioid use and abuse through coordinated law enforcement actions, diversion control and community outreach efforts.

The law enforcement portion of this comprehensive approach targets all levels of drug trafficking organizations and violent gangs which are supplying drugs to our neighborhoods. Diversion efforts are engaging manufacturers, wholesalers, practitioners and pharmacists to be aware of the opioid epidemic and encourage responsible prescribing practices. Lastly, community outreach efforts are working with local communities to equip and empower locals to fight the heroin/opioid epidemic.

The original three pilot cities in which the 360° Strategy have been deployed include:

- Milwaukee, WI
- St. Louis, MO
- Pittsburgh, PA

Current partner organizations include, but are not limited to:

- Department of Justice (Office of Justice Programs, Violence Reduction Network)
- Department of Health and Human Services (Substance Abuse Mental Health Services Administration)
- Centers for Disease Control
- Community Anti-Drug Coalitions of America
- DEA Educational Foundation
- Benevolent and Protective Order of Elks
- Boys and Girls Clubs of America
- Partnership for Drug-Free Kids
- U.S. Attorney’s Office



Treatment & Recovery

Arlington Police Department Opiate Outreach Initiative

Arlington, Massachusetts

Website: <http://paarius.org/arlington/>
<http://www.arlingtonma.gov/departments/police/opiate-outreach-initiative>

Main Phone: (781) 643-1212

Point of Contact: Frederick Ryan, Chief of Police

(781) 316-3900

fryan@town.arlington.ma.us

In July 2015, the Arlington, Mass. Police Department and Chief Frederick Ryan outlined a new strategy for police officers to get directly involved in the demand side of the heroin and opiate crisis by working with a public health clinician to conduct direct outreach to known opiate/opioid affected people and their families, friends, and caregivers.

The Arlington Police Department is committed to aggressively enforcing the drug laws, especially when it comes to investigating and arresting drug dealers and drug traffickers. However, once a drug dealer is arrested, police are often left with their list of customers. Until now, no action has been taken to reach out to these lists of customers. With the launch of the outreach initiative, a public health clinician has been embedded with the Arlington Police Department, and together, they are reaching out to affected persons and family members.

The goal of the Initiative is to educate families, help provide and teach the administration of potentially lifesaving naloxone, and to make addiction affected users and their families, friends, and caregivers aware of treatment options and resources available to them. Currently, [Wicked Sober LLC](#) is a critical partner to this outreach program as they assist in linking clients to treatment services in the area.

While not identical, The Arlington Outreach Initiative is inspired by the Gloucester Police Department ANGEL Initiative.



Baltimore City Heroin Task Force

Baltimore, MD

Website: <http://health.baltimorecity.gov/opioid-overdose/mayors-heroin-treatment-and-prevention-task-force>

Phone: (410) 396-3835

Point of Contact: Sean Naron

(443) 984-2623

sean.naron@baltimorecity.gov

Mayor Stephanie Rawlings-Blake convened the Baltimore City Heroin Task Force in 2014 in order to come up with urgent and actionable strategies to combat the heroin epidemic in the city and surrounding areas. Detailed information on the task force, objectives, data, and specific workgroup reports can be found in the [2015 report](#). On a related note, a city-wide fentanyl and overdose response plan was published by this group, and available [here](#).

Like many similar coalitions, this organization aimed to study the problem of heroin addiction and to propose solutions for improving access to effective treatment and neighborhood compatibility. A broad spectrum of stakeholders were engaged during the process of identifying potential best practices including representatives from government, healthcare providers, and both national and local experts. The following are the ten recommendations agreed upon by this group:

1. Develop a dashboard for the monitoring of real-time data
2. Implement citywide overdose plan
3. Develop centralized, easy-to-access intake (24/7)
4. Increase data-driven, high-impact options for treatment
5. Ensure treatment on demand
6. Develop voluntary certification and review for substance use providers
7. Facilitate an ongoing partnership and collaboration
8. Develop “good neighbor” agreement and establish best practices for providers and community members alike
9. Coordinate efforts with treatment providers and law enforcement
10. Implement comprehensive education strategy



Dayton Police Department - Conversations for Change

Dayton, OH

Website: <http://www.east-end.org/>

Phone: (937) 259-1898

Point of Contact: Emily Surico

(937) 259-1898

esurico@east-end.org

The Dayton Police Department has partnered with East End Community Services, a nonprofit organization that works to promote community development and advocacy. According to East End's executive director, "We never intended to be in the business of programming to address opioid abuse, but that's where we are needed... When we started looking at crime hot spots in our community, we found that more than 90 percent of property crimes were committed by people who were using heroin or other drugs. Crime rates have a destabilizing and stressful impact on the families and kids we work with, which is one reason we knew we had to get involved."

This organization, which works closely with a larger [Montgomery County Drug Free Coalition](#), works to hold meetings every few months that serve the purpose of providing information on opiate addiction, treatment, and support services available. Dayton police work closely with the community to identify people with substance abuse problems in order to invite them to meetings.

Meetings typically feature presentations by healthcare professionals about addiction and how opiates/opioids affect the human body. Additionally, peer supporters describe their journeys and trained motivational interviewers from the Dayton Mediation Center engage participants in one-on-one conversations. During the meetings, participants are provided free naloxone, along with the necessary training on administration. Treatment providers are also onsite during these meetings (representing faith-based, abstinence-based, and medication assisted therapy services), which provides an easy avenue for people who are looking to receive treatment services.

Approximately 285 people have attended a "Conversations for Change" meeting since May of 2014. Additionally, the Dayton police have administered naloxone 240 times to 210 people with 198 overdose reversals during the program's first 18 months of existence, which underscores the importance of dispersing Naloxone to community members.



Gloucester Police ANGEL Initiative - The Police Assisted Addiction and Recovery Initiative (PAARI)

Gloucester, MA

Website: <http://gloucesterpd.com/addicts>
<http://paarius.org/>

Main Phone: (978) 283-1212

Point of Contact: John McCarthy, Assistant Chief of Police

jmccarthy@gloucester-ma.gov

The Gloucester Police Department is credited for creating a revolutionary new policing program that is aimed at helping people struggling with addiction, instead of simply arresting them. People who ask for help will be transported to a local treatment provider, where they are paired with a volunteer “Angel” who will assist them through the treatment and recovery processes. Over a dozen treatment partners currently help to ensure that the Gloucester Police Department is capable of providing immediate assistance to people who are seeking help.

The Police Assisted Addiction and Recovery Initiative (PAARI) is a nonprofit organization whose mission is to support the Gloucester Police addiction initiative, to aid other police departments to implement similar programs, and to foster a dialogue around the unique opportunity for police departments to take direct action against the disease of drug addiction in their communities. The Gloucester Chief of Police helped to create PAARI as a way to bridge the gap between law enforcement entities and addiction affected people who are in need of assistance.

There are many police departments across the nation committing to the methods of the PAARI. Currently, the program is being shadowed by approximately 163 law enforcement agencies in 25 states. Although there certainly are differences between the various police departments committed to the model, in general PAARI committed police departments:

- Encourage opioid drug users to seek recovery
- Help distribute life-saving opioid blocking drugs to prevent and treat overdoses
- Connect addiction affected users with treatment programs and facilities
- Share knowledge and resources with other police departments and communities



Manchester Fire Department - Safe Station

Manchester, New Hampshire

Website: <https://www.manchesternh.gov/Departments/Fire/Safe-Station>

Phone: (603) 669-2256

Point of Contact: Christopher Hickey

(603) 669-2256 ext. 3503

chickey@manchesternh.gov

In May of 2016, the Manchester Fire Department (MFD) announced the implementation of "Safe Station," a program intended to aid drug/substance users who may not know where to begin looking for treatment and/or recovery services. This program relies on the partnership between the MFD, the Catholic Medical Center, [American Medical Response \(AMR\)](#), [Serenity Place](#), [Hope for New Hampshire Recovery](#), the [Farnum Center](#), and the [Elliot Health System](#).

Anyone seeking treatment and/or recovery services can locate and visit one of ten local fire stations and speak with the firefighters on duty. The firefighters will provide a medical assessment and either arrange for transport to medical facilities via AMR, or place the citizen in contact with local treatment providers. Individuals will be required to drop needles and/or paraphernalia in collection bins outside of the fire departments prior to speaking with firefighters.

The following 2016 year-end statistics were provided by Manchester Fire Department:

- 976 requests at MFD for the Safe Station program
- 347 participants have been taken to Hope for New Hampshire Recovery
- 545 participants have been taken to Serenity Place
- 80 participants were transported directly to the hospital for immediate services
- The average wait time in which AMR/MFD was not available = 12 minutes
- Age range of participants = 18-70



MATx – Substance Abuse and Mental Health Services Administration

Nationwide

Website: <http://store.samhsa.gov/apps/mat/>

Phone: (240) 276-2130

In October of 2016, the Substance Abuse and Mental Health Services Administration (SAMHSA) announced the upcoming launch of MATx, a free mobile app that will provide health care practitioners with immediate access to vital information about medication-assisted-treatment (MAT). The program officially launched on October 21st, 2016.

MATx enables health care practitioners to provide effective, evidence-based care for individuals struggling with an opioid misuse disorder. This app is intended to provide support to practitioners who currently provide MAT, as well as those who are interested in providing MAT in the future.

Some of the MATx features include:

- Information on treatment approaches and current medications approved by the U.S. Food and Drug Administration
- A Buprenorphine prescribing guide
- Clinical support tools
- Access to critical helplines and SAMSHA's treatment locators



Seattle Law Enforcement Assisted Diversion (LEAD) - LEAD National Support Bureau

King County, WA

Website: <http://leadkingcounty.org/>
<http://www.leadbureau.org/>

Point of Contact: info@leadkingcounty.org
info@leadbureau.org

This program is a pre-booking diversion program designed to get low-level drug and prostitution offenders into community-based treatment and support services. This diversion program is offered to offenders as an alternative to being processed through the traditional justice system avenues. Currently there are over 300 participants in the program according to a recent Public Broadcast Service (PBS) documentary, "[Chasing Heroin](#)."

The goals of Law Enforcement Assisted Diversion (LEAD) are to improve public safety, improve public order, and reduce the criminal behavior of program participants. The King County LEAD program differs from other law enforcement drug programs in three distinct ways:

- Interagency effort - LEAD is the result of commitment from law enforcement entities, public officials, and community programs
- Pre-booking model - LEAD bypasses booking, charging and required court appearances, which translates into cost and time savings
- Immediate case management - additional resources are made available to participants which are not available through existing public programs

Evaluation criterion and Preliminary findings from the Arnold Foundation evaluation of Seattle's LEAD program include the following:

- Reduction in drug use and recidivism - program participants were 58% less likely to be arrested than members of a control group
- Cost effectiveness - connecting patients to service through LEAD costs less than arresting them
- Impact on community quality of life - the program was associated with a positive effect on participant's income and housing prospects

Many organizations across the country are interested in adopting LEAD and replicating this successful model. Some locations of these successful implementations include Santa Fe, NM; Albany, NY; Huntington, WV; and Canton, OH among many others. The LEAD National Support Bureau is led and staffed by public health and justice system veterans who aim to assist additional jurisdictions in the implementation of a LEAD program, based on the original Seattle, WA model.



Risk Mitigation

Bureau of Justice Assistance - Law Enforcement Naloxone Toolkit

Nationwide

Website: <https://www.bjatraining.org/tools/naloxone/Naloxone%2BBackground>

Main Phone: 1 (855) 252-8822

The U.S. Department of Justice's Bureau of Justice Assistance (BJA) aims to help state, local and tribal jurisdictions achieve safer communities by providing leadership and services in grant administration and criminal justice policy development. BJA's National Training and Technical Assistance Center (NTTAC) provide resources on a wide-variety of justice-related topics, including but not limited to the development of naloxone administration programs.

The Law Enforcement Naloxone Toolkit was developed in response to the growing opioid overdose epidemic and includes answers to frequent questions about naloxone, resources including related publications and legislation, as well as sample documents and templates. These sample documents and templates include standard operating procedures, training materials and memoranda of agreement (MOA) between first responders and medical directors.

The Toolkit includes the following content categories:

- Background on naloxone
- The relationship between naloxone and law enforcement
- The administration of naloxone
- How to acquire naloxone
- Law enforcement specific training
- The issues of liability and risk
- How collaboration around the use of naloxone affects our communities



Cabell-Huntington Risk Mitigation Program

Huntington, West Virginia

Website: <http://www.cabellhealth.org/index.php>

Main Phone: (304) 523-6483

Point of Contact: Michael Kilkenny

(304) 523-6483 ext. 250

michael.e.kilkenny@wv.gov

Like many other risk mitigation programs/initiatives, this program was developed in response to a growing opioid epidemic. In the first six months of 2015 alone, Huntington (a city of approximately 50,000) saw 474 overdoses which included 34 fatal overdoses. The West Virginia based risk mitigation program consists of:

- Syringe exchange: Every Wednesday, the health department houses the syringe exchange from 9:00 a.m. to 4:00 p.m. During visits, demographic information is collected on participants, and recovery coaches are on-hand in the waiting room to provide information on different types of treatment services (faith-based, medically assisted, and clinic based). Participants meet individually with a nurse, who offers to test for infectious diseases, and provides additional information on counseling and addiction, and overdose/disease prevention.
- Naloxone deployment: Training for members of the public occurs on every Wednesday as well. Additionally, naloxone kits and trained providers are in local schools. Emergency medical services providers all carry naloxone kits, and all local police and fire personnel are undergoing training in order to be equipped with naloxone.

So far the program has seen tremendous success in the local community. From September of 2015 through April of 2016, over 1000 people have utilized services provided by the health department. Over 77,000 clean needles have been provided to the public, and over 50,000 needles have been collected. Also, during the first quarter of 2016, local area overdose fatalities were down by 40 percent, as compared to the first quarter of 2015.



Harm Reduction Coalition

Nationwide

Website: <http://harmreduction.org/>

Phone: (212) 213-6376 or (510) 444-6969

Point of Contact: Eliza Wheeler, DOPE Project Manager

(510) 444-6969 ext. 16

wheeler@harmreduction.org

William Matthews, SKOOP Project Coordinator

(212) 213-6376 ext. 38

matthews@harmreduction.org

This is a national advocacy and capacity-building organization that aims to advance harm reduction policies, practices and programs across the country. These efforts address the adverse effects of drug use including overdose, HIV, Hepatitis C, addiction and incarceration.

In addition to promoting the utilization of syringe access programs, as well as providing a comprehensive [guide](#) for the development and management of syringe access programs, this organization currently runs two Overdose Prevention (OP) programs:

- Drug Overdose Prevention and Education Project ([DOPE](#)) – West coast OP initiative
- Skills and Knowledge on Overdose Prevention ([SKOOP](#)) – East coast OP initiative

The Harm Reduction Coalition holds a biennial national conference, during which thousands of community leaders, decision makers, frontline service providers, community activists, people who use drugs and their allies come together to learn and build together. The [2016 conference](#) was held in San Diego, CA from November 3rd-6th. In a [video](#) address during the 2012 conference, the Director of the U.S. Office of National Drug Control Policy (ONDCP) openly supported the use of naloxone and needle exchange services.



Ohio Department of Health – Project DAWN

Statewide

Website: <http://www.odh.ohio.gov/health/vipp/drug/ProjectDAWN.aspx>

Main Phone: (614) 466-2144

Point of Contact: Amy Holthusen

(614) 728-3614

amy.holthusen@odh.ohio.gov

Project DAWN (Deaths Avoided with Naloxone) is a community-based overdose education and naloxone distribution program. Project DAWN participants receive training on:

- Recognizing the signs and symptoms of overdose
- Distinguishing between different types of overdose
- Performing rescue breathing
- Calling emergency medical services
- Administering intranasal naloxone

Project DAWN [sites](#) are currently located in 45 of the 88 counties within Ohio. These sites are open to the public and provide training and naloxone kits at no charge. Some of the Project DAWN sites receive naloxone kits from the Ohio Department of Health, and some receive funding from the Ohio Department of Health. Two requirements of sites that want to participate in the program are that services must be made available to any member of the public, and all services must be provided free of charge.

Additional resources available through Project DAWN include:

- Naloxone background [document](#) - provides information on the Ohio's opioid epidemic, what naloxone is, overdose and naloxone distribution programs (OENDPs), and the community-based naloxone distribution model
- DAWN Program Development [document](#) - provides steps for implementation of a DAWN program
- A DAWN [quick reference guide](#)