

**FY 2022 PERFORMANCE PLAN**

<b>Opioid Response Program</b>		<b>BHD/RSSB</b>	Emily Sigveland, x4216 Suzanne Somerville, x7340
Program Purpose	Reduce the number of opioid-related overdoses in the community through outreach, engagement, and streamlined access to treatment for individuals with opioid-use disorders.		
Program Information	<p>The Opioid Response Program has several components:</p> <ul style="list-style-type: none"> <li>• The Arlington Addiction Recovery Initiative (AARI), a community stakeholders group that includes representatives from the CSB, public schools, police and fire departments, local hospitals and treatment centers, and interested citizens. AARI maintains a website, <a href="http://onearlinton.org">onearlinton.org</a>, and subcommittees focus on prevention, community awareness, outreach after incidents, increased access to treatment, alternative sentencing, and data collection.</li> <li>• Medication-assisted treatment for individuals with primary opioid use disorders, including the Office-based Opioid Treatment (OBOT) program and referral to the Alexandria methadone clinic. Treatment can include use of buprenorphine and naltrexone, which block the effect of opioids.</li> <li>• A screening and referral initiative, in which staff use the SBIRT model to train community primary-care partners in identification and referral to treatment of individuals with a substance-use disorder.</li> <li>• Outreach and support by peer recovery specialists, and a telephone warm line for information and support.</li> <li>• Outreach to individuals with a non-fatal opioid overdose within 24 hours of being notified.</li> <li>• Education and marketing to community members about medication take-back boxes.</li> <li>• Trainings for staff and community members in the use of Narcan, the opioid overdose reversal medication.</li> <li>• The COVID-19 pandemic impacted these activities in many ways. Community outreach activities initially stopped, then switched to virtual as much as possible. Trainings became virtual, with Narcan kits mailed out afterwards. Overdoses increased nationwide and Arlington felt the impact. The peer outreach program continued. Most services switched to telehealth. As access to the COVID-19 vaccine increased at the end of FY 2021, more in-person services were provided, and the program plans on taking a hybrid in-person/virtual approach moving forward.</li> </ul> <p><b>Target population</b> includes individuals with opioid use disorders who may be involved with the criminal justice system, have prior treatment experiences, are IV-drug users, and/or are at high risk for relapse behavior and/or overdose. Community partners and family/social supports are included in the target population and are engaged through outreach, education, and engagement efforts to try to connect individuals with opioid use disorders to needed treatment, resources, and services.</p> <p><b>Funding sources</b> include local funds, insurance reimbursement, and grants.</p>		

**FY 2022 PERFORMANCE PLAN**

	<ul style="list-style-type: none"> <li>• <b>Partners</b> include the criminal-justice system, homeless shelters and other social services agencies, public health and primary healthcare providers, private and public-sector substance use disorder treatment programs, community self-help organizations, and regional Community Services Boards, all of whom refer clients for treatment.</li> </ul>
Service Delivery Model	<ul style="list-style-type: none"> <li>• In FY 2022, the team primarily utilized in-person services for its OBOT group sessions. When appropriate, individuals were provided virtual services to enhance access. Community events were held both in-person and online.</li> <li>• In FY 2023, the program anticipates offering a similar service delivery model.</li> </ul>

**PM1: How much did we do?**

Staff	<p>4.25 FTEs</p> <ul style="list-style-type: none"> <li>• 1.0 FTE Clinical Supervisor</li> <li>• 1 FTE Mental Health Therapists</li> <li>• 1.5 FTE Peer Recovery Specialists</li> <li>• 0.25 FTE OBOT prescribers</li> <li>• 0.5 FTE Outreach and prevention specialist</li> </ul> <p>Additional support is provided by interns, police and fire departments, public schools, public health nursing staff, and the CSB prevention manager</p>
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Customers and Service Data		<b>FY 2019</b>	<b>FY 2020</b>	<b>FY 2021</b>	<b>FY 2022</b>
	Number of clients served (unduplicated)	67	88	96	108
	Number of clients served in OBOT	41	37	33	36
	Number of clients served in Alexandria methadone clinic	19	18	16	18
	Number of clients outreached following an overdose (Jan-Jun 2019)	9	33	48	54
	Number of visits to OneArlington website (Jan-Jun 2019)	3,965	6,378	16,913	7,492
	Number of people trained on Narcan administration	580	523	716	1,398
	Number of Narcan boxes distributed	493	484	624	1,323
	Number of pounds of medications collected at take-back boxes	1,939	2,196	2,632	2,318
	Number of medication deactivation bags distributed (Jan-Jun 2019)	320	481	95	609
	Number of Fentanyl Test Strips dispensed	N/A	N/A	N/A	2,232

**FY 2022 PERFORMANCE PLAN**

**PM2: How well did we do it?**

2.1	Community outreach and training
2.2	Clients outreached within 24 hours of referral by law enforcement

**PM3: Is anyone better off?**

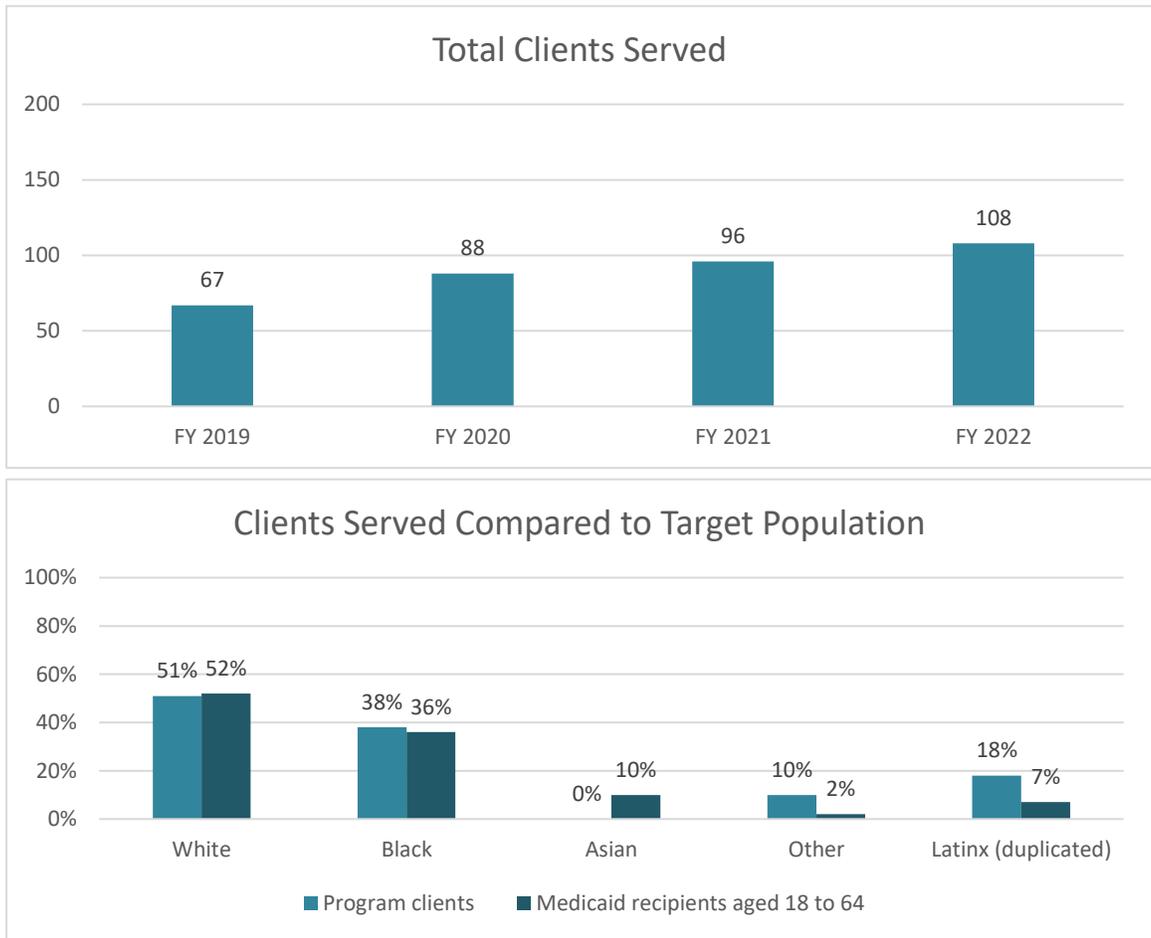
3.1	Number of fatal and non-fatal overdoses
3.2	Clients' successful engagement in treatment services
3.3	Clients' improvement in functioning as a result of services received

FY 2022 PERFORMANCE PLAN

Opioid Response Program

Measure 1 Total clients served (unduplicated)

Data



Data Summary

- From FY 2019 to FY 2022, the number of clients served in the OBOT and Methadone clinics increased 61%.
- The selected comparison population for the racial equity analysis is Medicaid recipients aged 18 to 64. Medicaid recipients are often those most in need. For many of those individuals, the Department of Human Services may be the only accessible substance use services provider.
- Data for this measure is collected in the agency’s electronic health record.
- 28% of OBOT and Alexandria Methadone clients (15) are missing data on race and 39% (21) are missing data on ethnicity. Demographic data is not available for clients outreached after an overdose. They have been excluded from the race and Latinx calculations.

What is the story behind the data?

- Overall clients served by the Opioid Response Program continues to increase in conjunction with a rise of overdoses. The program reaches out to all individuals who have a non-fatal overdose if they provided their contact information to Arlington County Police Department.
- The majority of program clients are under age 40. In FY 2022, 28% of program clients were in their 20s and 30% were in their 30s.

**FY 2022 PERFORMANCE PLAN**

- In FY 2022, 26% of program clients were also diagnosed with a serious mental illness.
- In general, program demographics are similar to Arlington County Medicaid recipients. The biggest variance was in Asian clients, as the program served no Asian clients. A review of overdoses in Arlington County found that there were very few Asian individuals with documented overdoses. This is consistent with Virginia trends, where 67% of fatal overdoses are White individuals, 26% are Black, 4% are Hispanic, and 2% are from another race. Asian individuals are included in that “other” category and thus make up a tiny fraction of overdose deaths in the commonwealth.
- The number of Narcan boxes distributed in FY 2022 doubled thanks to strong partnerships with Marymount University and other community partners. Additionally, a new electronic system was established allowing for people to directly request Narcan without e-mailing program staff. This helps protect requestee confidentiality, and removes a barrier to access.
- In FY 2022, the Opioid Response program continued to increase its outreach to other agency programs, collaborating with the Treatment on Wheels and Jail Based Services teams on harm reduction.

<b>Recommendations</b>	<b>Target Dates</b>
<ul style="list-style-type: none"> <li>• Continue serving Opioid users in Arlington, and outreaching any individuals who experience an overdose.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>• Review data entry for demographic elements, including race and ethnicity</li> </ul>	<ul style="list-style-type: none"> <li>• FY 2023 Q2</li> </ul>

**Forecast**

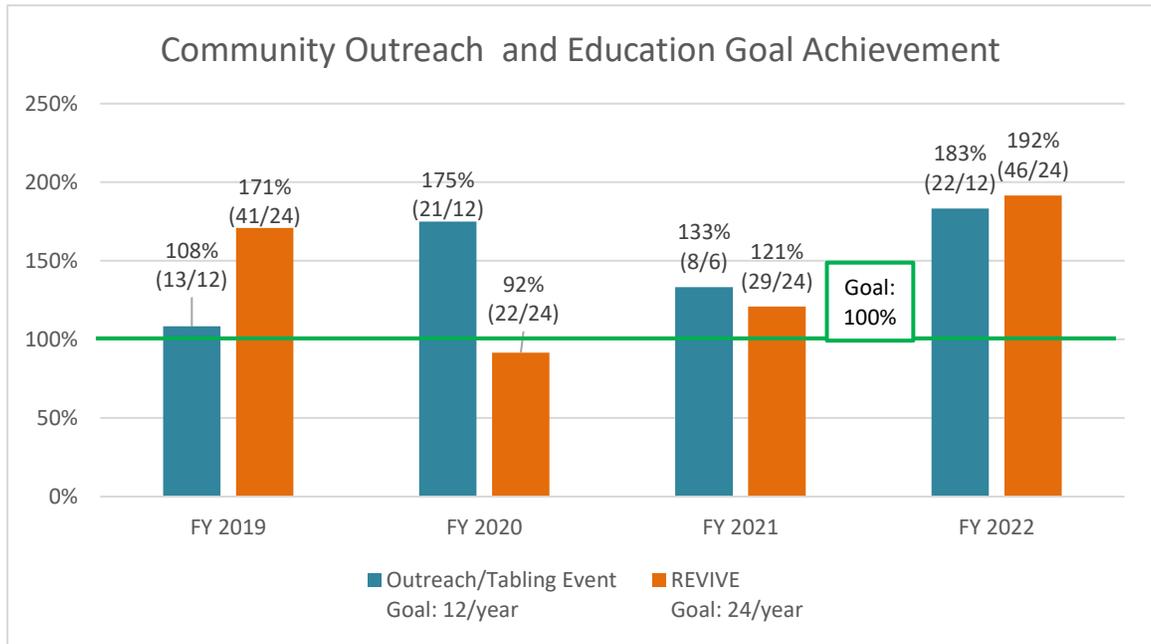
- In FY 2023, the program anticipates serving 118 clients.

FY 2022 PERFORMANCE PLAN

Opioid Response Program

Measure 2.1 Community outreach and training

Data



Data Summary

- In FY 2022, the team participated in 22 community outreach events.
- In FY 2022, the team provided 46 REVIVE trainings (Virginia’s opioid overdose reversal training) to the community. Trainings were provided to a variety of groups including high-risk client/community groups, County staff, homeless shelters, and the criminal-justice system, among several others.
- 1,323 boxes of Narcan were dispensed after the trainings.

What is the story behind the data?

- The program’s goal is to lead one community awareness event a month and two Narcan trainings a month. In FY 2021, the goal for outreach events was decreased to one event every two months due to constraints added by the COVID-19 pandemic. The goal was brought up to previous levels in FY 2022 due to the protections afforded by the COVID-19 vaccine.
- The program met its goal for both types of events in FY 2022.
- In general, the program found that virtual events were better attended than in-person ones. The relative anonymity of attending an online session is a huge benefit for some attendees, as it allows them to learn the information without the possibility that others will attach stigma to them. However, it was sometimes difficult to get all participants to fully engage with the virtual trainings, which is why the program moved to a hybrid format in FY 2022 offering in-person and virtual trainings.
- In FY 2022, tabling events were done in person with 919 individuals visiting the tables during these events.
- On average, 110 individuals were trained in how to reverse and overdose either through abridged trainings or full 1-hour REVIVE Trainings each month by AARI. The lowest month of training attendance was November 2021 at 64 individuals and March 2022 saw the highest level of attendees with 182 individuals were trained.

## FY 2022 PERFORMANCE PLAN

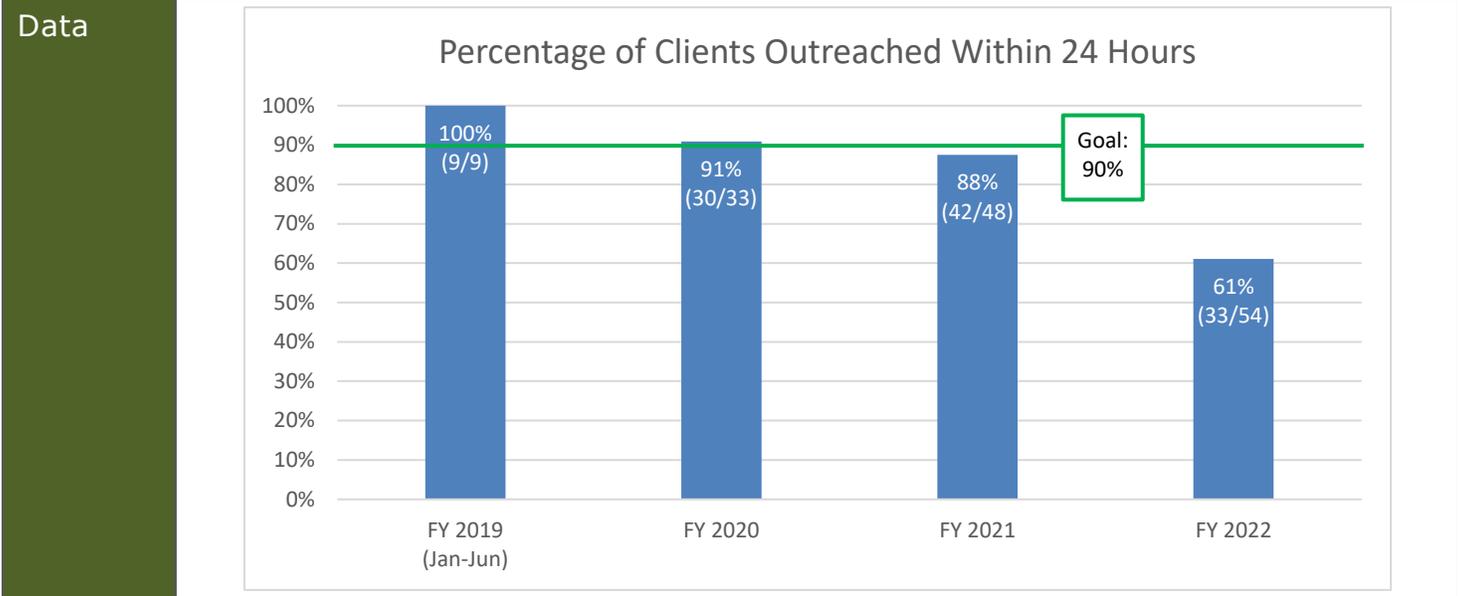
- Educational events (panel discussions and presentations) were also well attended, with an average of 36 attendees per event. The most attended educational event was in June, when 80 individuals attended a harm reduction panel discussion.
- Narcan trainings continued to focus on high-risk behavioral health clients, shelters, and community groups who come into regular contact with individuals who misuse substances.
- New policies were implemented in FY 2021 to expand Narcan access. All clients entering services with Arlington’s Behavioral Healthcare Division are offered Narcan if they mention any substance use. Additionally, the jail services team ensures that all those leaving the jail are given access to Narcan.
- In FY 2022, 24 virtual and 22 in-person REVIVE trainings were offered. Virtual trainings happen twice a month at scheduled intervals, while in-person trainings are done by request.
- To reach the young adult population, REVIVE trainings are held for Marymount University students. In FY 2022, the program targeted residential advisors and student athletes for trainings, as well as providing general trainings open to all students.
- In FY 2022, Narcan trainings continued to be provided to restaurant staff to help them learn what to do in the event of an overdose at a restaurant.
- The program also provides passive outreach throughout the year through Public Service Announcements and digital advertisements on social media platforms.
- Signage has been placed throughout Sequoia 3 to help educate client about Opioid resources.

Recommendations	Target Dates
• Explore posting signage for DHS clients in Sequoia 1 waiting areas, and integrating into new staff Safety training.	• FY 2023 Q4
• Consider increasing the goals to 24 for outreach/tabling events	• FY 2023 Q1
• Consider updating the measure to capture the abridged Narcan trainings the program is providing, as the program is moving towards providing more of these targeted trainings rather than REVIVE.	• FY 2023 Q3
• Continue to use police data to track opioid-related arrests and overdose hot-spots and adjust where trainings are presented as needed.	• Ongoing
• Continue tracking the number of attendees via clicker at each in-person outreach event.	• Ongoing
• Continue to explore options for virtual outreach events and presentations and track the number of attendees.	• Ongoing
• Continue to explore outreach strategies to reach at-risk youth through partners such as the DHS Child and Family Services division, the Second Chance program, and truancy officers.	• Ongoing
Forecast	
• In FY 2023, it is expected that the frequency of outreach events and REVIVE trainings will reach the goals of 22 and 36 each, respectively.	

**FY 2022 PERFORMANCE PLAN**

**Opioid Response Program**

<b>Measure</b>	2.2	Clients outreached within 24 hours of referral by law enforcement
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<b>Data Summary</b>	<ul style="list-style-type: none"> <li>DHS staff provide outreach to individuals who have experienced an overdose within 1 business day of the police report documenting their overdose. Police reports may not be immediate after an overdose.</li> <li>In FY 2022, there were 54 overdoses reported by police to staff that included some form of contact information. 33 of those individuals received outreach within 1 business day.</li> </ul>
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**What is the story behind the data?**

- In the past, the team received a report from the police with the name and contact information of each person who overdosed. Through FY 2022, outreach was provided to the individual within 24 hours of receiving the report.
- In FY 2022, Arlington County Police Department began sending reports each Friday that summarized all of the opioid related cases, including overdoses, to the Opioid Response Program. Because the program often learns about overdoses more than 24 hours after they occurred, the number of clients outreached on time has decreased. The new goal that the program has adopted for FY 2023 is outreaching clients within a week of receiving the report.
- For those outreached in FY 2022, 26% accepted Narcan, 30% accepted fentanyl test strips, 26% accepted treatment, and 22% accepted peer support. Additionally, 9 witnesses to an overdose accepted Narcan. Some outreached individuals reported that they already had Narcan, which is why they declined the offer.
- In FY 2021, the program began to conduct outreach to individuals six months after overdose to check in and offer connections to treatment, Narcan, and Fentanyl test strips. This has continued in FY 2022.

<b>Recommendations</b>	<b>Target Dates</b>
<ul style="list-style-type: none"> <li>Continue tracking outreach efforts.</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> </ul>

**FY 2022 PERFORMANCE PLAN**

<ul style="list-style-type: none"><li>• Continue to track the resources that individuals were referred to and regularly review outcomes and successes with the team.</li></ul>	<ul style="list-style-type: none"><li>• Ongoing</li></ul>
<ul style="list-style-type: none"><li>• Improve data sharing plan with fire department to outreach individuals who do not come into contact with police.</li></ul>	<ul style="list-style-type: none"><li>• FY 2023 Q4</li></ul>
<ul style="list-style-type: none"><li>• Consider replacing this measure with a new one that will track the percentage of clients accepting one or more supports after an overdose. This chart will categorize outreached clients into three categories – offered and accepting a support, offered and declining a support, and not accepting a support.</li></ul>	<ul style="list-style-type: none"><li>• FY 2023 Q1</li></ul>

**Forecast**

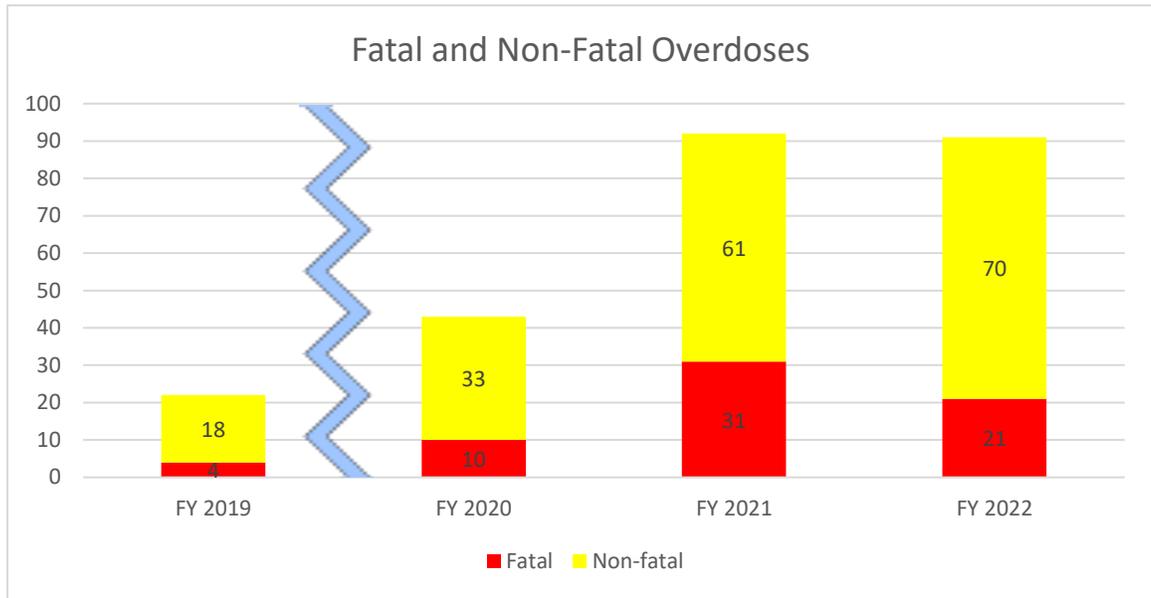
- In FY 2023, it is expected that 90% of individuals who experience an overdose will be outreached within one week of the program receiving notification of the incident.

FY 2022 PERFORMANCE PLAN

Opioid Response Program

Measure 3.1 Number of fatal and non-fatal overdoses

Data



Data Summary

- In FY 2022 the number of overdoses reported to the police were similar to the historically high numbers of FY 2021.
- In FY 2020, data collection was updated to include overdoses for those who lived outside of Arlington County.
- In FY 2022, 73% (51/70) of the non-fatal overdoses and 85% (18/21) of the fatal overdoses were Arlington residents.
- Information is received from monthly police data reporting. Data is consistent with annual Virginia Department of Health data.

What is the story behind the data?

- There was a decrease in fatal overdoses in FY 2022. This may be due to an increase in Narcan distribution, as the program has noted more and more reports of individuals being revived via Narcan by either friends or paramedics. It is critical to continue Narcan distribution, as it is the best defensive against fatal overdoses.
- In FY 2022, 24% (17/70) of the non-fatal overdoses and 52% (11/21) of the fatal overdoses were Arlington CSB clients. One of the fatal overdoses was connected to the OBOT program and none of the non-fatal overdoses were, which speaks to the effectiveness of the program.
- There continues to be a concern with other substances being contaminated with Fentanyl in the community, which continues to lead to overdose deaths from unsuspecting users who may not have Narcan. In FY 2022, the program began distributing Fentanyl test strips across the agency and in the jail to help clients identify contaminated substances.
- The increase in non-fatal overdoses starting in FY 2021 may be impacted by changes in Virginia law that bar police officers from arresting clients at the scene of an overdose. Some clients and their family members may feel more comfortable seeking medical assistance in the event of an overdose, leading to a greater number of these cases being reported.

## FY 2022 PERFORMANCE PLAN

- Arlington County is home to National Airport, a major travel hub. Multiple overdoses occurred in hotels near the airport. It is possible that the influx of travelers to Arlington increased overdose numbers above regional trends.
- In FY 2022, Opioid overdose emergency boxes were placed around the DHS campus to expand access Narcan in the event of an emergency to all agency clients and staff. These boxes were also installed at all library branches as well as the shelters.
- There is currently no effective way to track overdoses that did not have police involvement.

Recommendations	Target Dates
<ul style="list-style-type: none"> <li>• Maintain a close working relationship with the police to ensure the data is received.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>• Outreach individuals who overdosed non-fatally within one week of receiving reports from the police</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>• Continue providing Narcan to the community and offering Narcan to witnesses of overdoses.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>• Continue to explore alternative sources for data on overdoses not reported to ACPD, including from the Virginia Department of Health and the new ConnectVirginia statewide tool being launched in FY 2022.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>• Do an equity analysis of Opioid overdoses for CSB clients in Arlington, utilizing new incident reporting systems. Revisit processes for ensuring CSB staff are able to distribute Narcan on request.</li> </ul>	<ul style="list-style-type: none"> <li>• FY 2023 Q4</li> </ul>
<ul style="list-style-type: none"> <li>• Improve data sharing plan with fire department to outreach individuals who do not come into contact with Police.</li> </ul>	<ul style="list-style-type: none"> <li>• FY 2023 Q4</li> </ul>

### Forecast

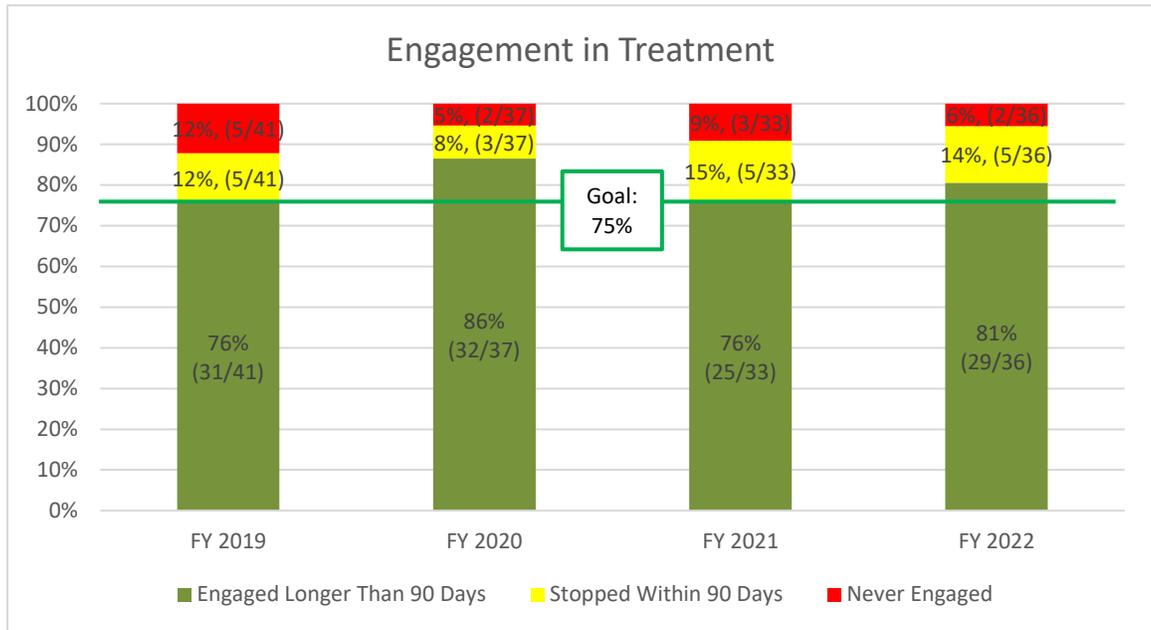
- In FY 2023, it is anticipated that the number of total overdoses will decrease slightly from the FY 2022 levels, with 70 non-fatal and 18 fatal overdoses. These anticipated numbers remain high as the effects of the pandemic continue to be felt.

FY 2022 PERFORMANCE PLAN

Opioid Response Program

Measure 3.2 Clients' successful engagement in treatment services

Data



Data Summary

- Data includes clients who were served in OBOT in each fiscal year.
- 29 of the 36 clients (81%) served in FY 2022 remained engaged in services after 90 days.

What is the story behind the data?

- In FY 2022 staff noted that many clients expressed exhaustion and burnout while coping with the national public health crisis, which interfered with active engagement in services. However, at the end of the Fiscal Year the program was able to get a number of new clients enrolled in services.
- To help re-engage clients, the program began offering in-person services early in FY 2021. However, many clients expressed hesitancy with meeting in-person due to the risk of contracting COVID-19. Both virtual and in-person services were available, with clients encouraged to seek services that best fit their needs.
- In FY 2022 the program returned to full-time in person services, with the option to have individual therapy via telehealth when someone is not feeling well and/or there is a barrier to coming to the building. The program also conducted a survey and focus groups to determine what the clients wanted to see to support increased engagement. From the survey and focus groups, additional groups were added to work with clients' schedule, times of groups were adjusted, and contingency management strategies were increased.
- A chart review was conducted of the eight clients who did not fully engage with services. They fell into two major groups – clients who stopped responding to contact, and those that moved out of the area.
- An equity analysis of the eight clients who were not engaged did not indicate any major discrepancies in outcomes in FY 2022 across race, ethnicity, or gender.
- Engagement rates for clients receiving Vivitrol treatment are typically high, due to legal involvement. The treatment is provided to incarcerated Arlington residents with opioid dependence who voluntarily consent to an opioid-blocker injection and ongoing OBOT

**FY 2022 PERFORMANCE PLAN**

treatment. Recently, the program has received fewer referrals for vivitrol, as the jail has moved towards providing suboxone instead.

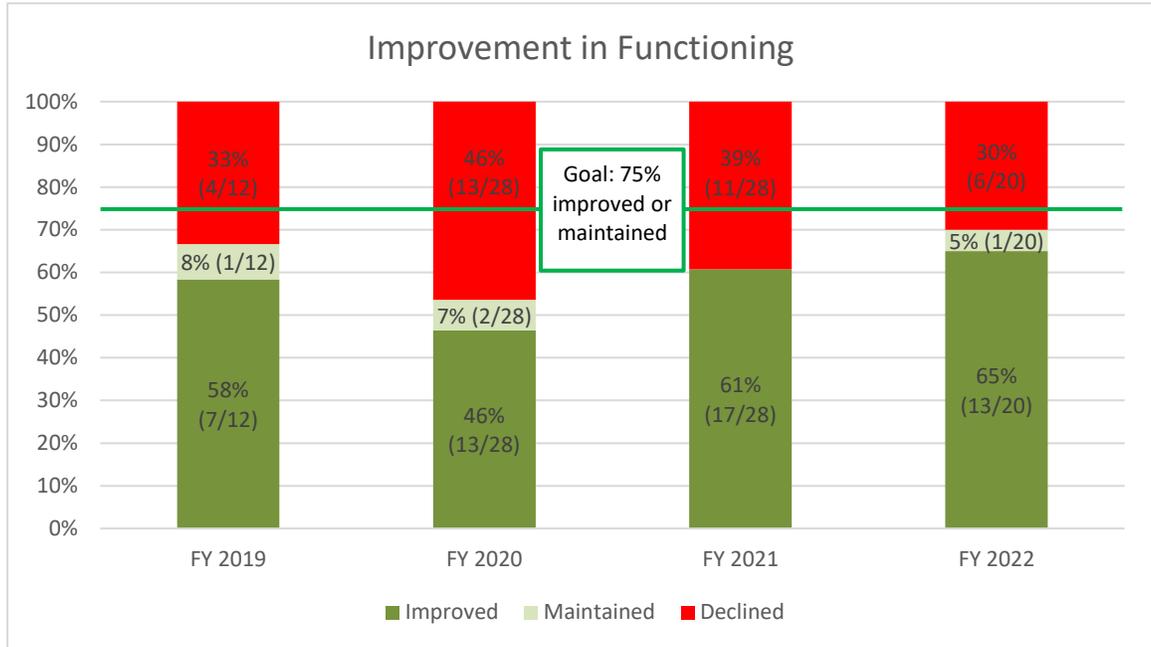
<b>Recommendations</b>	<b>Target Dates</b>
<ul style="list-style-type: none"> <li>Continue to explore strategies for successfully engaging in the OBOT program.</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>Continue to review any barriers to engagement and problem-solve around those.</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>Continue monitoring client engagement through a racial equity lens to determine if any programmatic changes are needed.</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> </ul>
<ul style="list-style-type: none"> <li>Consider a policy detailing the frequency with which clients will be observed when tested for abstinence from substances, as this can provide a barrier to client engagement.</li> </ul>	<ul style="list-style-type: none"> <li>FY 2023 Q2</li> </ul>
<b>Forecast</b>	
<ul style="list-style-type: none"> <li>In FY 2023, it is estimated that 75% of clients will engage in treatment longer than 90 days.</li> </ul>	

FY 2022 PERFORMANCE PLAN

Opioid Response Program

Measure 3.3 Clients' improvement in functioning as a result of services received

Data



Data Summary

- In FY 2022, 20 clients in the program were administered more than one DLA-20 functional assessment, and changes in scores from first administration to most recent administration are provided here. Three clients were administered only one DLA-20 and are not counted.
- 13 of the 20 clients improved their scores.

What is the story behind the data?

- In FY 2022, the number of clients improving their DLA-20 score continued to increase over previous years. The new program manager stepped in to refocus the program and make it more client centered, which may have impacted the increase.
- In FY 2022, the program saw more clients graduate and move through the program phases than in previous years.
- Clients with co-occurring mental health outcomes often achieve lower rates of improvement in medication assisted treatment. Among the 10 clients with co-occurring mental health conditions included in this measure, DLA-20 scores increased for only 40%.
- In FY 2022, there were 36 clients served in the OBOT program; not all participants had DLA-20s completed due to lack of engagement in treatment during the 30 days prior to the quarterly.

Recommendations

Target Dates

- |   |           |
|---|-----------|
| • In addition to DLA results, continue to collect client satisfaction surveys twice per year, in December and June. | • Ongoing |
| • Continue to review statewide DLA improvement data through the utilization management committee in BHD.            | • Ongoing |
| • Continue to ensure consistent collection of DLA-20 data.  | • Ongoing |

**FY 2022 PERFORMANCE PLAN**

<ul style="list-style-type: none"><li>Continue to identify high risk clients who will benefit from office-based services and follow guidelines related to continuing face to face services when appropriate.</li></ul>	<ul style="list-style-type: none"><li>Ongoing</li></ul>
<ul style="list-style-type: none"><li>Explore the possibility of developing pre-contemplation and maintenance stages for the program to continue to reduce treatment barriers.</li></ul>	<ul style="list-style-type: none"><li>FY 2023 Q3</li></ul>
<b>Forecast</b>	
<ul style="list-style-type: none"><li>In FY 2023, it is expected that 70% of clients will show stability or improvement in functioning, as many long-term clients are experiencing challenges as the COVID-19 pandemic continues across the country.</li></ul>	