

Using data to inform overdose prevention & response

Division of Substance Use Programs

January 2025

Overdose Data to Action in States Cooperative Agreement (OD2A-S) is a federal grant from the Centers for Disease Control & Prevention (CDC) awared to the Vermont Department of Health, Division of Substance Use Programs (DSU). The grant amount is \$3,272,032 annually for a or a five-year grant period (September 2023 – August 2028). This is a continuation of the previous OD2A grant (September 2019 - August 2023).

What is the goal?

The purpose of OD2A is to understand and track the complex and changing nature of the drug overdose epidemic and use that information to guide overdose prevention efforts tailored to the needs of Vermont and local communities.

What are the strategies?

1. Data - Improve Surveillance

- Collect and report emergency department (ED) data on suspected all drug, opioid, heroin and stimulant overdoses, including descriptions of circumstances of death using death certificate and medical examiner/coroner data; and identify counties with high rates of
 - ED visits due to overdoses and drug-related fatalities. Conduct a "Social Autopsy" of accidental and undetermined drug-related fatalities among Vermont residents to identify trends in how Vermonters who died of a drug overdose interacted with state systems prior to death to identify and implement intervention strategies with people at risk of an overdose. The 2023 iteration of the report includes an analysis of 2021 data, an executive summary and recommendations and are available at HealthVermont.gov/DSUReports
 - Collect, maintain and analyze datasets to identify trends that inform actions and activities to address overdose; and disseminate the information to partners and evaluate the effectiveness of funded activities.
 - Monitor ED and emergency medical services (EMS) data to identify potential spikes in overdoses for more real-time response.

KEY HIGHLIGHTS

- **Over 145 people received overdose** training between July 2023 – June 2024
- **38 clincians received training**
- **194 people received services** • through recovery coach overdose prevention & response:
 - 40 were engaged with law 0 enforcement
 - 55 were received care from EMS 0
 - 99 were people experiencing \cap homelessness

2. Action – Data-informed Prevention

- Convene surveillance analysts and programmatic staff monthly, and in response to spike alerts or other concerns, to discuss data and determine appropriate outreach in response.
- Improve interstate prescription drug monitoring to ensure prescribers are making informed decisions. Expand community-led overdose response efforts and linkages to care through local Recovery Centers. The current focus populations are unhoused people and people involved with emergency services, criminal justice systems and health systems. Community Partners: Turning Point Centers of Springfield, Rutland and Bennington.
- Support efforts of state-wide syringe service programs (SSP) providing harm reduction training, case management and community outreach community partners: AIDS Project of Southern Vermont, Vermont CARES, HIV/HCV Resource Center and Howard Center's Safe Recovery program. Support medical providers to analyze their own prescribing data and identify trends and workflow improvements to ensure prescribers adhere to the Vermont rules for prescribing opioids for pain and developing education materials for medical providers related to xylazine to improve overdose and wound care. Community partner: UVM Medical Center's Office of Primary Care (OPC) Area Health Education Center (AHEC).
- The Health Department's naloxone public health administrator continues to oversee planning, administrative and consultative work of the naloxone distribution program which includes training partner agency staff on the protocol for administering naloxone, with ongoing focus on naloxone distribution that is informed by drug-trends identified in toxicology reports and community drug-checking efforts.
- Continue programming focused on reducing substance use while pregnant and increasing social supports for pregnant and post-partum people to increase protective factors and decrease risk of fatal overdose. Community partners: Lund and Turning Point Center of Central Vermont.

How will the strategies be sustained?

The activities that are associated with training and development of improved reporting and enhancements to the Vermont Prescription Monitoring System will still be available after the grant is complete. Other activities are dependent on continuation of funding through federal grants, settlement funds or local support.

How will the outcomes be measures?

The OD2A program has a dedicated evaluation staff member. This staff has worked with the CDC to develop an evaluation plan to best assess the impacts of the OD2A grant funding and programming. Long term, the primary measure used to assess the impact of the grant will be the rates of opioid overdose emergency department visits and overdose deaths in Vermont.

Using data to help Vermonters.

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