



Emergency Department Drug Overdose Surveillance and Linkage to Care Program

Epidemiology and Response Division
New Mexico Department of Health

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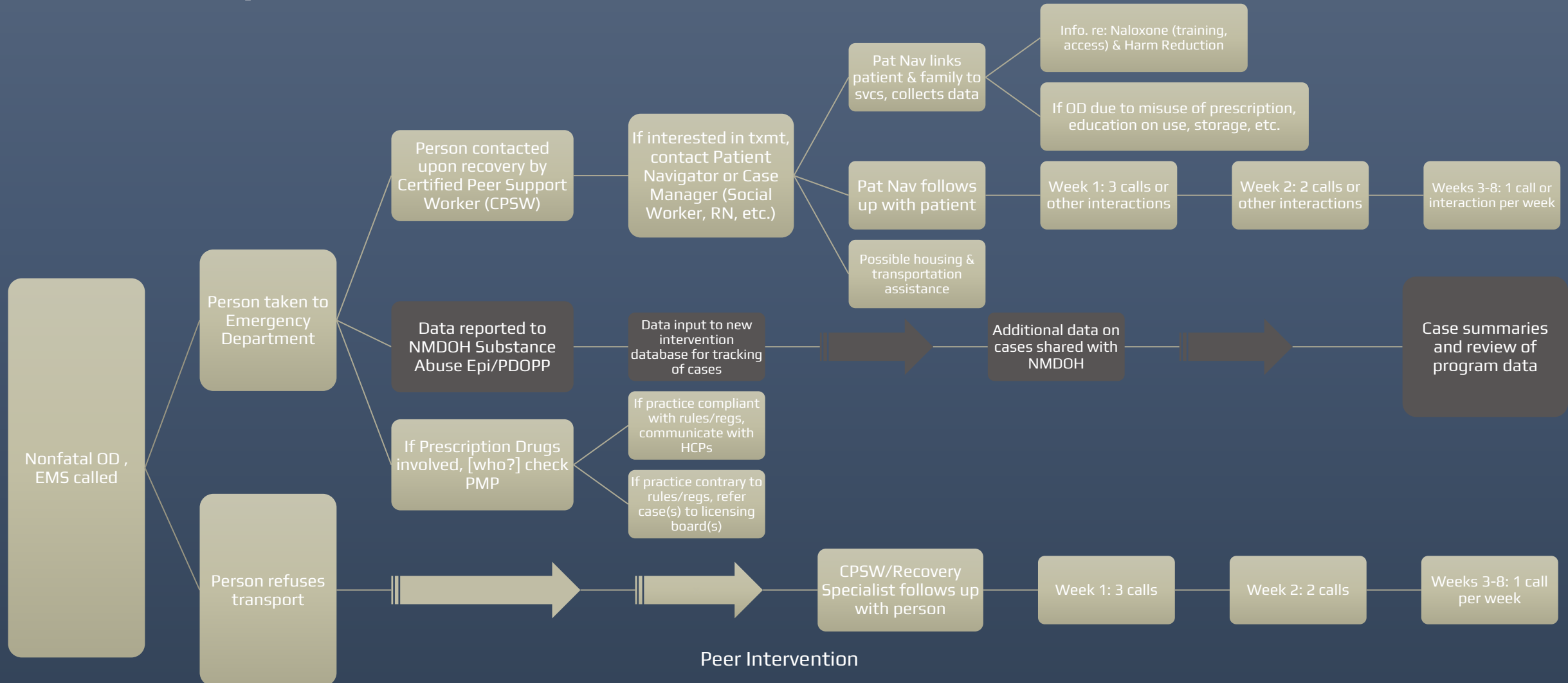
Overview

- ED Intervention Program
 - Peer Support Worker Program within the Emergency Department
 - Emergency Department work flow
- ED Surveillance
 - Flowchart/Structure
 - Notifiable Conditions Form
 - Challenges (from reporting)
 - Successes (improvements made)
 - Data
- ED Peer Support Programmatic Improvements
- ED Lessons Learned
- ED Evaluation Year 2 of Overdose 2 Action Grant Questions (2020-2021)

Emergency Department: Peer Support Workers Program

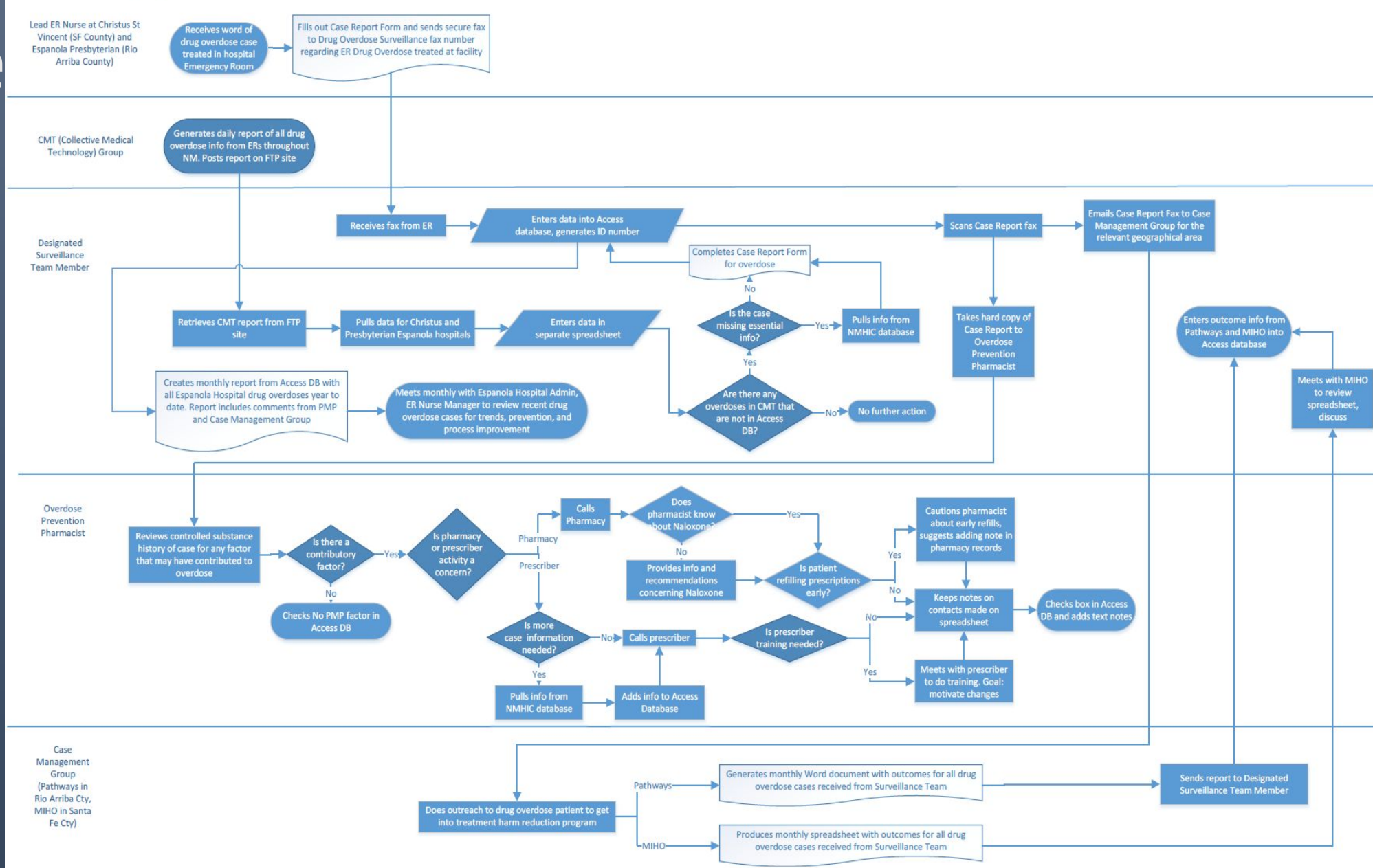
- The pilot began in December 2016 at Presbyterian Espanola Hospital. Christus St. Vincent joined the intervention in January 2018. Followed by Presbyterian Hospital downtown Albuquerque in 2019.
- The aim of the program is to:
 - Link non-fatal overdose patients to recovery and treatment services
 - Educate and hand out naloxone during Emergency Department visit
- Current participating partners:
 - 3 health systems for linkage to care through peer support workers
 - 7 hospitals for the Overdose Notifiable Conditions Reporting
 - 4 more hospitals beginning in August 2021

In-depth linkage to care attempts in Emergency Department (model from pilot in 2017)



Overall Surveillance flow chart

Drug Overdose Surveillance Process Last Revision: July 25, 2019



Flow chart: Part 1

Drug Overdose Surveillance Process

Last Revision: July 25, 2019

Lead ER Nurse at Christus St
Vincent (SF County) and
Espanola Presbyterian (Rio
Arriba County)

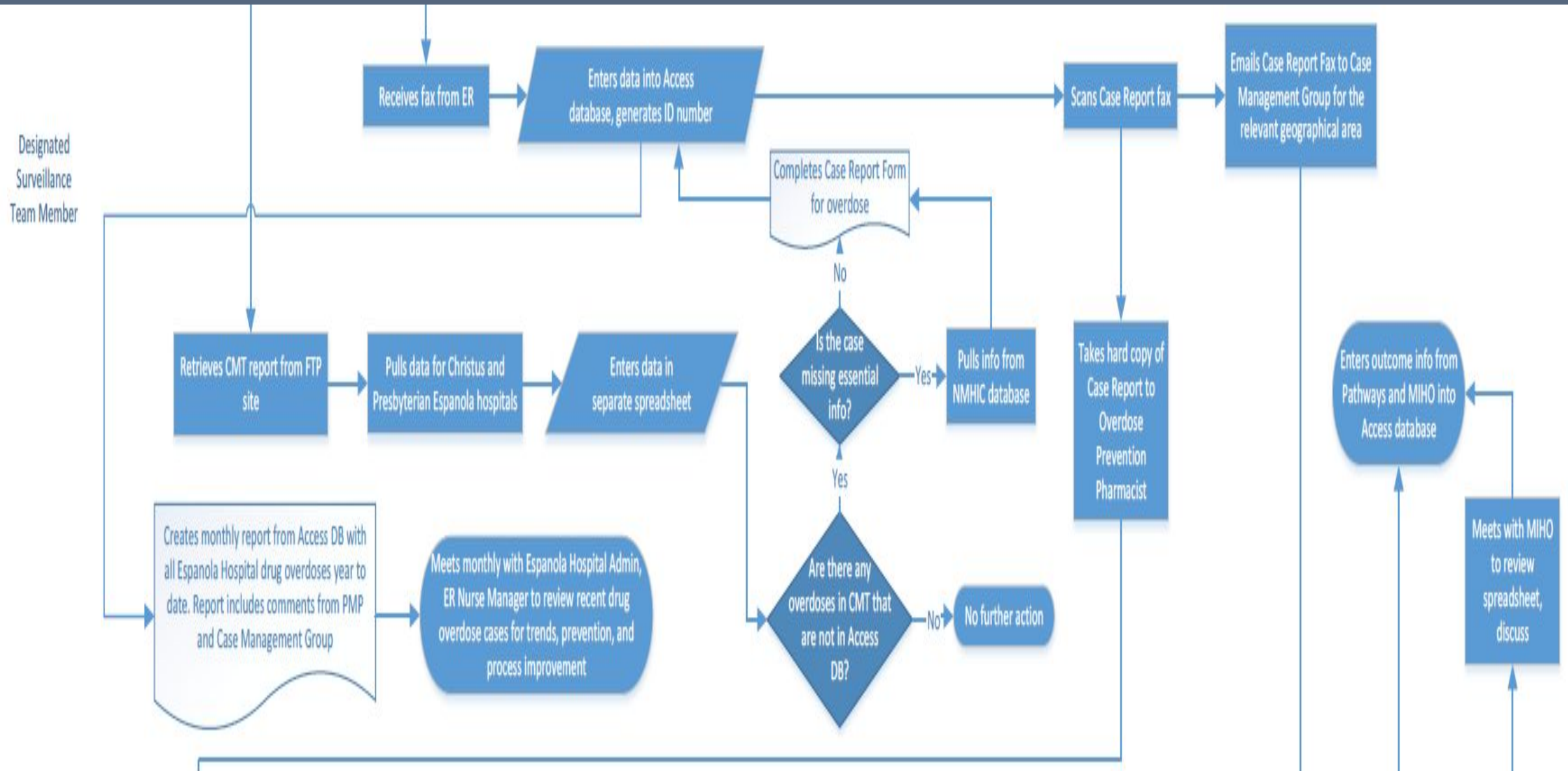
Receives word of
drug overdose case
treated in hospital
Emergency Room

Fills out Case Report Form and sends secure fax
to Drug Overdose Surveillance fax number
regarding ER Drug Overdose treated at facility

CMT (Collective Medical
Technology) Group

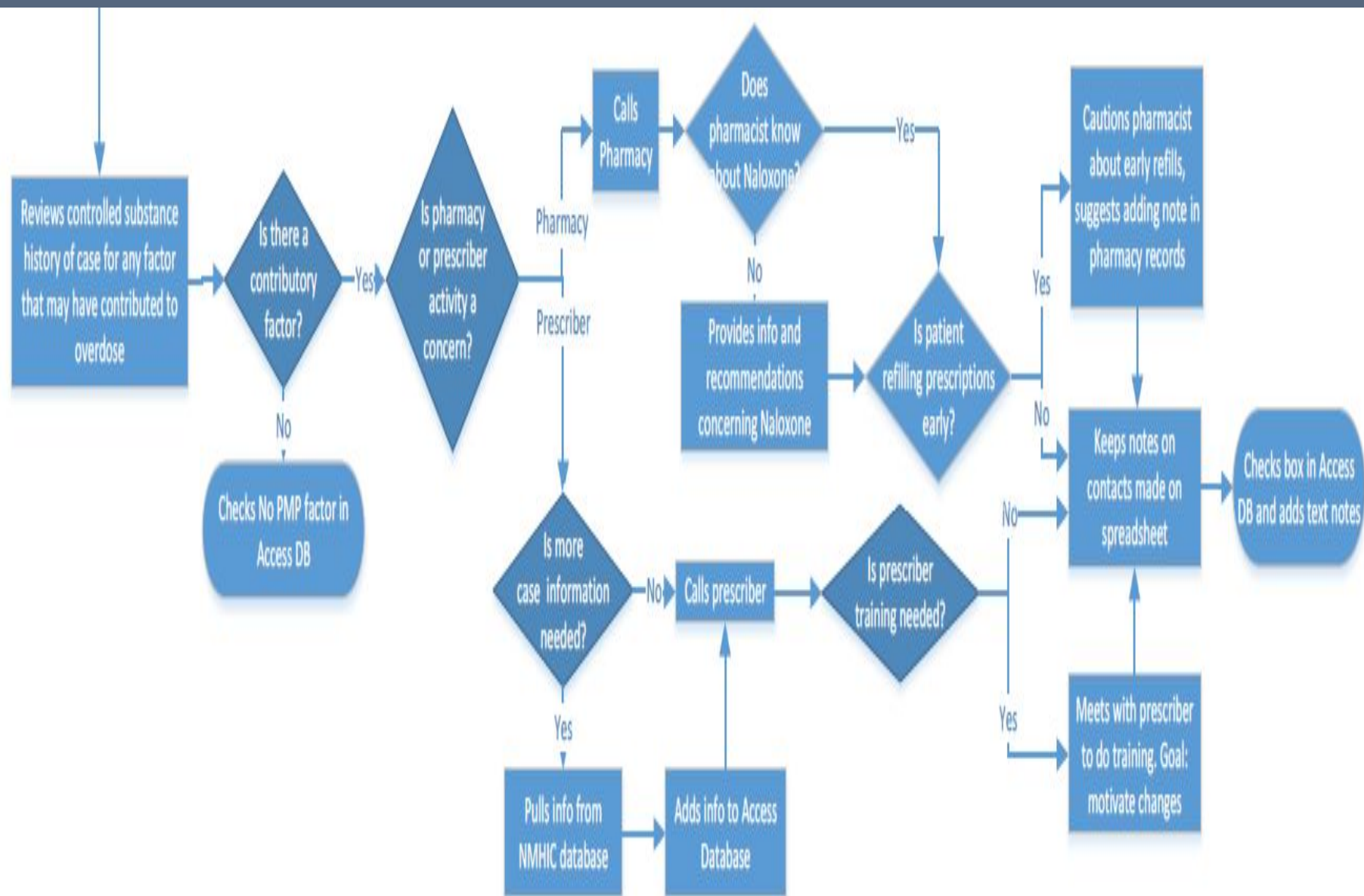
Generates daily report of all drug
overdose info from ERs throughout
NM. Posts report on FTP site

Flow Chart: Part 2



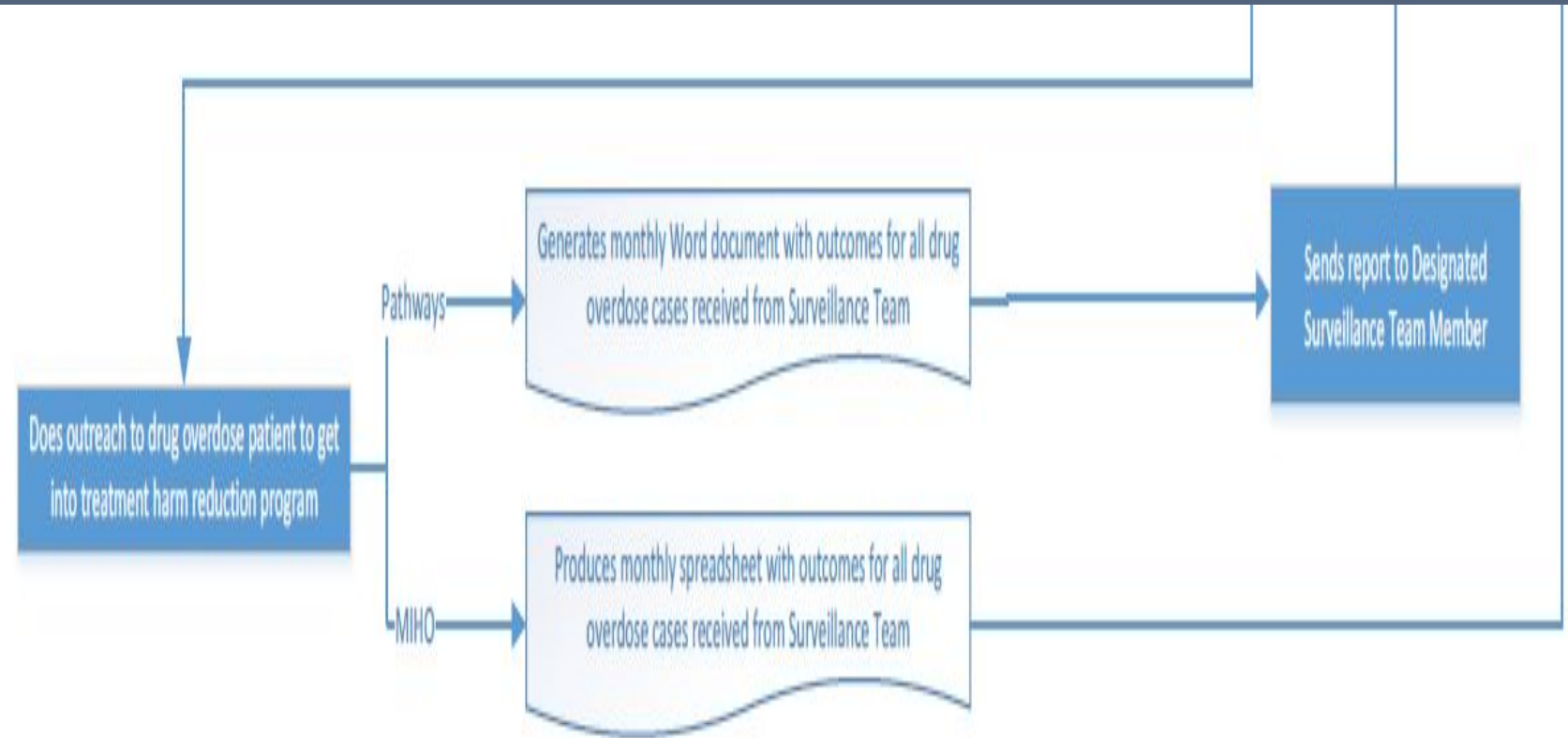
Flow Chart: Part 3

Overdose
Prevention
Pharmacist



Flow Chart: Part 4

Case
Management
Group
(Pathways in
Rio Arriba Cty,
MIHO in Santa
Fe Cty)





Drug Overdose (Notifiable Condition) Report Form

Date Form Completed:	Reporting Facility:
Date Patient Seen in ER: Time Patient Seen in ER:	Person Preparing Report:
Medical Record Number (MRN):	Phone Number:

Patient Information

Last Name:	First Name:	MI:	DOB:
Sex: Male ☐ Female ☐ Other ☐	Ethnicity: Hispanic ☐ Not Hispanic ☐ Unknown ☐		
Race: American Indian/Alaska Native ☐ Asian ☐ Black/African American ☐ Native Hawaiian/Pacific Islander ☐ White ☐ Unknown ☐			
Street Address:	City:	State:	Zip:
Phone number:	Other contact phone number:		
Did patient die of overdose? Yes ☐ No ☐	Did patient have a known prior overdose? Yes ☐ No ☐ Unknown ☐		

Suspected Substance(s) Involved in Overdose: Check all that apply

Prescription opioid ☐ Heroin ☐ Fentanyl ☐ Methadone ☐ Benzodiazepine ☐ Methamphetamine ☐ Cocaine ☐ Buprenorphine ☐ Other ☐ (please list below)
Other medication(s) or substance(s) taken by patient (if applicable):

Was alcohol involved in the OD? Yes ☐ No ☐	Was drug test performed? Yes ☐ No ☐
Was OD intentional? Yes ☐ No ☐ Unknown ☐	If yes, patient referred for psych services? Yes ☐ No ☐ Unknown ☐

Additional Information

Was naloxone (Narcan) administered to patient? Yes ☐ No ☐ Unknown ☐	If yes, by whom?	
Is patient interested in further treatment/follow up? Yes ☐ No ☐ Unknown ☐	Did patient leave ER with naloxone? Yes ☐ No ☐ If yes, # kits:	
Was patient admitted to hospital? Yes ☐ No ☐ Unknown ☐	If yes, time and date:	
Engaged by peer support worker in ED? Yes ☐ No ☐ Unknown ☐	If yes, name of peer worker:	Date/Time of Encounter

Comments on Peer Support:

Transport/Transfer

Was patient transported to hospital by Emergency Services? Yes ☐ No ☐	If yes, which service?
Was patient transferred TO another healthcare facility? Yes ☐ No ☐	If yes, which facility?

Other Comments

FAX report to: Injury and Behavioral Epidemiology Bureau, ATTN: Prescription Drug Overdose Prevention Program

FAX 505-476-3633

Phone 505-827-2286, 505-827-2238, or 505-827-476-3545

Processing Data

- Surveillance team member
 - Enters into NMEDSS
 - Looks up in Health Information Exchange (HIE)

Case Management Providers refer to

- Pathways
- MIHO (Mobile Integrated Health Outcomes) in Santa Fe
- COOP (Connection Outreach and Overdose Prevention) in Santa Fe
- HEART (Home Engagement and Alternative Response Team) in ABQ
- LCFD (Las Cruces Fire Department)
- Peer Hub

Feedback...

- Successful outreach
- Pathways
 - Biweekly feedback report
- MIHO
 - Access to outreach database

MIHO Approach...

- Intensive, street-based (100% mobile) case management overseen by an LMSW;
- Harm-reduction focused, client-centered and strength-based services;
- 30 clients per case manager (at least one contact with each client each week is typical);
- Intensive client research to improve successful contacts (EMS calls, NMDOH/ER data, Jail Website, NM Courts and more).

Now: Peer Support Workers Program

- Understanding that the pandemic has impacted how the peer support program was envisioned and being flexible with how program staff at partnered EDs had to make changes and adjust in response.
- Challenges and successes for the peer support workers on linkage to care.
- Year 2 Evaluation Results/Analysis will come in August
- Active/ongoing OD surveillance report from the ED will be continued

ED Linkage to Care Improvements

- Data Reporting Tool Update with more focus on linkage to care
- Basic analysis by Quarter [3 months] with follow up with Coordinator and ED staff for clarifying data reporting questions by Evaluator.

Harm Reduction Services	MAT education
Emergency Hotline Numbers	MAT initiated
Housing/Rental Assistance	MAT Referral
Food/Meals	Referral to RTC
Transportation	Warm hand-off to RTC
Benefits	Referred to 12 step
Interpersonal Safety/DV	Psych eval completed
Clothing	Psych referral for Outpt
Utility Assistance	Engaged in Outpt psych
Shelters	D/c with scheduled admit at RTC
Legal Assistance	Engaged in community SUD support group
	Linkage to Faith-based or spiritual resources
	Referred to Outpt counseling
	Engaged in Outpt counseling
	Pt engaged in IOP
	Pt referred for IOP
	Shelter resources
	SF Connect Referral
	Referred to detox
	Admitted to detox
	Discharged Home
	Housing Information
	Food Resource Info
	Harm Reduction Services
	Food Box/Food Pantry

Lessons Learned

- Emergency Department based active surveillance has allowed the Emergency and Response Division at NMDOH to quickly identify high risk patients and follow up through various case management programs.
- It's important that the health department make overdoses reportable in order to collect additional information that can be used for secondary prevention of drug overdose like the Peer Support Workers Intervention within the Emergency Department.
- Must have on-going buy-in of health system administrators, Emergency Department staff and community partners to be clear on Notifiable Conditions Reporting and follow up of patients.

Emergency Department Peer Support Program Evaluation Questions for Year 2

- To what extent has the ED intervention been successful in linking individuals who overdose to services and treatment?
 - Number and percent of clients linked to specific services including treatment types.
- How could the ED intervention structure and its implementation be improved in each ED?
 - Number of NM ED's consistently reporting nonfatal overdoses and participating in the intervention
- What factors influence the applicability and feasibility of executing the linkage to care ED initiative within NM?
 - Description of ED partners and services offered
 - Ex: Services being peer support, case management, or other.

What's next...

- Data
 - Total OD surveillance Report
 - Total opioid cases
 - Total Referrals
 - Total feedback/successful outreach
 - Recidivism

Thank you!

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