

Pursuant to Local Law 225 of 2017 to amend the administrative code of the city of New York, in relation to requiring the department of social services and the department of homeless services to offer training to certain individuals in administering opioid antagonists, the Department of Social Services respectfully submits the attached plans.

**Opioid Overdose Prevention Training Plan for the Human Resources Administration (HRA) HIV AIDS Services Administration (HASA)**

Recognizing the toll that the opioid epidemic is having on New Yorkers across the city, and with the passage of Local Law 225 in December of 2017, the Human Resource Administration’s HIV AIDS Services Administration began to implement a naloxone training program for staff and clients.

§ 21-129.3 Requires that the department develop and implement an opioid overdose training plan to offer opioid overdose training to residents of HASA facilities who may encounter persons experiencing or who are at a high risk of experiencing an opioid overdose. No later than March 1, 2018, the commissioner of the department of social services shall submit to the mayor and the speaker of the council, and post online, a comprehensive opioid overdose training plan for such residents. Such plan shall include, but need not be limited to:

- a) Strategies for the agency to offer opioid antagonist administration training to such residents of HASA facilities;
- b) Information on how such residents will be informed about the availability of such training;
- c) Information specific to the availability of such training;
- d) Information specific to the availability of opioid antagonist at HASA facilities; and
- e) The date by which the implementation of such plan will commence.

**A. Strategies for the agency to offer opioid antagonist administration training to HASA clients:**

- The strategy focuses primarily on clients of HASA facilities identified by HRA/HASA where staff or clients may encounter persons at high risk of experiencing an opioid overdose. HASA intends to offer training to all HASA clients on the use of naloxone and provide trained clients and relevant staff with kits.
- Any individual who is at risk of an overdose or may be likely to witness an opioid overdose should be offered naloxone training.
- HRA will train clients as “responders”.
  - A responder is an individual who is trained on how to recognize and respond to an overdose and how to administer naloxone.

- All responders receive a kit that can be replaced when used.
- HRA/HASA will train identified HASA, contracted and identified housing staff as “dispensers”
  - A dispenser is an individual trained and approved by the Opioid Overdose Prevention Program (OOPP) to train others on administering naloxone to an overdosing person.
  - Dispenser trainings include education on overdose risks, assessment, response, and administration of intra-nasal naloxone. Dispensers become NYS certified overdose trainers and can provide a brief 5-10 minute responder training and distribute naloxone kits to HASA clients.
- HRA/HASA OOPP will report all naloxone dispensed to the Department of Health and Mental Hygiene (DOHMH)
- HRA will conduct:
  - Dispenser training to identified HASA and contracted staff so that they can train HASA clients as responders.
  - Dispenser training to identified Serviceline staff, Directors, Supervisor Level II staff, Credentialed Alcohol and Substance Abuse Counselors (CASAC’s) and other volunteer HASA staff in the Centers so they may offer responder training to appropriate HASA clients (those using opioids or interacting with individuals who do) at the time of their emergency housing placement request.
  - Dispenser training to CASAC’s in the HASA Centers so they may offer responder training to appropriate HASA clients at the time of a substance use assessment by a CASAC.
  - Responder training to HASA staff members who volunteer to become qualified so they may respond to opioid overdoses in HASA Centers and during field visits to clients.
  - Dispenser training for designated HASA emergency transitional housing staff.
  - Responder training to designated emergency SRO housing staff.
  - Responder training events to clients at HASA emergency housing sites.
  - Refresher training to responders every two years from the date of the initial training.
- In addition, the HRA Opioid Overdose Prevention Program will partner with community based harm-reduction providers on providing trainings to clients in HASA emergency housing.

**B. Dissemination of information on the availability of naloxone training for HASA clients**

The HRA OOPP will provide:

- Informational posters announcing the date, location, times when specific naloxone responder trainings will be conducted at HASA Centers.
- Informational posters/flyers including date, location, times when specific naloxone responder trainings will be conducted at HASA emergency housing sites.
- Informational posters announcing the availability of naloxone kits at HASA centers.

**C. Dissemination of information specific to the availability of such training**

The HRA OOPP will provide:

- Informational posters announcing the date, location, times when specific naloxone responder trainings will be conducted at HASA Centers.
- Informational posters/flyers including date, location, times when specific naloxone responder trainings will be conducted at HASA emergency housing sites.

**D. Dissemination of information specific to the availability of opioid antagonist at HASA facilities**

The HRA OOPP will provide:

- Informational posters announcing the availability of naloxone kits at HASA centers.
- Informational posters/flyers announcing the availability of naloxone kits at HASA emergency housing sites.

**E. Implementation Date: April 1, 2018**

## **Opioid Overdose Prevention Training Plan for the Department of Homeless Services (DHS)**

Following Mayor de Blasio's 90-day review of homeless services, DHS has been implementing a series of 46 reforms aimed at addressing gaps in service delivery and historically inadequate programming that developed over decades, as well as enhancing the safety and security of shelter clients, including restoring accountability that had been missing for many years. These efforts include significant improvements in how DHS delivers and ensures health care for those seeking or residing in shelter, recognizing that vulnerable and homeless New Yorkers navigate a myriad challenges, which include a greater likelihood of medical illness, mental health and substance use issues, and poor health outcomes.

And as a part of these reforms, in September 2016, DHS strengthened its long-standing naloxone training practice by promulgating an agency policy requiring staff from all shelters to participate in comprehensive naloxone trainings to ensure shelters across the city are equipped to administer the life-saving drug.

Building on nearly a decade of work DHS continues to train staff, security and residents. Beginning in 2009 DHS Peace officers have been trained in naloxone administration during their basic training. Since 2014, DHS has partnered with the NYU Medical School to train clients at the 30<sup>th</sup> Street shelter, with more than 120 clients trained in the last calendar year alone.

§ 21-320.3. The department shall develop and implement an opioid overdose plan to offer opioid overdose training to shelter residents who may encounter persons experiencing or who are at a high risk of experiencing an opioid overdose. No later than March 1, 2018, the commissioner of the department of social services shall submit to the mayor and the speaker of the council, and post online, a comprehensive opioid overdose training plan informed, to the extent practicable, by the reporting pursuant to section 17-190, for such residents. Such plan shall include, but need not be limited to:

- a) Strategies for the agency to offer opioid antagonist administration training to such shelter residents;
- b) Information on how such shelter residents will be informed about the availability of such training;
- c) Information specific to the availability of such training;
- d) Information specific to the availability of opioid antagonist at shelter facilities; and
- e) The date by which the implementation of such plan will commence.

### **A. Strategies for the agency to offer opioid antagonist administration training to shelter residents**

- The strategy focuses primarily on settings identified by DHS where staff or clients may encounter persons at high risk of experiencing an overdose, but also offers training to all DHS sites served by the DHS Opioid Overdose Prevention Program (OOPP) and provides guidance to independent OOPPs that serve DHS facilities.

- The DHS OOPP will provide monthly Training-of-the-Trainer (TOT) training to DHS facilities and program staff so that they can train other staff and shelter residents as responders. These Train-the-Trainer two-hour sessions are provided to new, or not yet trained, shelter/sites providers, not served by an independent OOPP, and will include education on overdose risks, assessment, response, and administration of intra-nasal naloxone. The DHS OOPP will conduct staff TOT trainings at Intake and Assessment shelters to front line staff so they can train new residents as Overdose Responders.
- Staff assigned to perform Intake and Assessment will offer training and naloxone kits to all new clients, as part of the intake process. Intake and assessment workers will become NYS certified overdose trainers and provide a brief 5-10 minute naloxone training to clients presenting at Intake, per a standard training script. They will have each client either complete the naloxone Recipient Form, or otherwise record all required information, and provide a single-step Narcan intranasal kit.
- Medical providers that serve DHS facilities will operate as independent OOPPs and be responsible for training staff and clients at their sites. All independent OOPPs serving DHS facilities and programs must provide training and support similar to the DHS OOPP for their sites.
- Any individual who is at risk of an overdose or may be likely to witness an opioid overdose should be offered naloxone training.
- DHS facilities residents will be offered training to recognize signs of an opioid overdose, and encouraged to report any suspected overdose that they witness to the staff on duty, immediately, for intervention. Training will be offered at the point of Intake and Assessment, as well as routinely at DHS facilities likely to serve clients at high risk of overdoses.
- The DHS OOPP will partner with the Department of Health and Mental Hygiene (DOHMH) on providing trainings to clients in shelters where there are overdoses.
- The DHS OOPP will report all naloxone dispensed to the Department of Health and Mental Hygiene (DOHMH)

**B. Dissemination of information about how shelter residents will be informed of naloxone training**

- The DHS OOPP will provide opioid prevention signage to programs informing that naloxone is available on site and the location of the kits as well as educational materials.
- The site staff identified as the Overdose Prevention Champion will post signage in the facility to inform shelter residents of upcoming naloxone trainings, and dispensing drives, announcing the date, location and time of training.
- Shelter residents will be informed of trainings during client house meetings.
- Shelter residents will be informed of trainings during one-on-one engagements with their shelter or site worker.

**C. Information specific to the availability of training**

- Monthly TOT Naloxone trainings will be provided to staff at DHS facilities that do not have an independent OOPP, by the Office of the Medical Director at 33 Beaver Street, New York, NY. The DHS OOPP will inform DHS Programs of the training dates, and the program provides a training listing.
- A schedule of client training will be prominently displayed at all shelter facilities.
- Trainers will:
  - Offer training to all interested clients.

- Provide information to clients directly and in signage as to the availability of training.
- Encourage residents to register for training.
- Offer a Dispensing Drive once a month to the larger shelter population.
- Offer a Dispensing Drive after each overdose incident.

**D. Information specific to the availability of opioid antagonist at shelter facilities**

- DHS facilities will have signage indicating that there will be naloxone on site, including information informing that naloxone is a safe medication that reverses overdose from opioids such as heroin and prescription painkillers.
- Notices will be prominently posted in common areas indicating the location of and how to access naloxone, including the main facility phone number for direct contact.
- Signage will be posted prominently at all shelters, in public spaces, throughout the facility, reinforcing the message that naloxone is available on site.
- Educational posters will be posted in each facility to provide information on opioid prevention and fentanyl use, and how to save a life with naloxone.
- Shelter staff will inform all clients, upon arrival for the first time at a shelter, that at least one staff member is available, on each shift, to intervene in cases of suspected opioid overdose.
- Trained Responders will have ready and immediate access to the facility's shared naloxone kits, which should be stored in a safe, accessible location.
- DHS OOPP-trained facilities will list the names of staff capable of intervening in the case of a suspected opiate overdose.

**E. Implementation Date: April 1, 2018**