CAPITAL REGION

Harm Reduction Education & Technical Assistance

This snapshot summarizes narrative findings from learning sessions held with key regional stakeholders identified by the Public Health Networks and community agencies. Data sources are listed under corresponding infographic.

INVOLVE PEOPLE WITH LIVED EXPERIENCE IN **PLANNING & EVALUATION**

PROVIDING NON-STIGMATIZING SERVICES

COLLABORATION

ACROSS THE

Nursina

Some peer mentorship programs reported, peers are the first point of contact when entering the Doorway. The majority of organizations report staff members in recovery or using surveys in their quality improvement plans. Experience-based co-design used in regional planning (FORE grant).

Organizations have people with lived experience as staff, training provided by people with lived experience is seen as important in fostering understanding. Motivational interviewing trainings widely conducted. Cultural humility trainings are reported across region. Access to language line services is reported in Concord.

Strong partnerships with the Doorway reported by all organizations. Uniquely, EMS is very engaged via Project First. Coordination among agencies is strong, especially with the Capital Area Leadership Team.

INFECTION PREVENTION

CONTINUUM OF CARE

Collaboration with Public Health Network to provide services, especially for vaccinations and information for clients. Transportation is noted as a barrier for clients. The Doorway has been helpful for vaccinations, infection prevention. Access to sterile injection equipment limited, multiple agencies report that a local syringe service program (SSP) is needed in region.

12 254 85 A BEST PRACTICE : CAPITAL STATEWIDE = 254 REGION = 27 **100% ACCESS** SELL SYRINGES **NO SYRINGE SALES DID NOT RESPOND**

PHARMACY SYRINGE ACCESS

SOURCE: SURVEY OF ALL NH RETAIL PHARMACIES CONDUCTED BY UNH IN 2020 (N= 174: TOTAL NH RETAIL PHARMACIES = 254: RESPONSE RATE 68.5%)

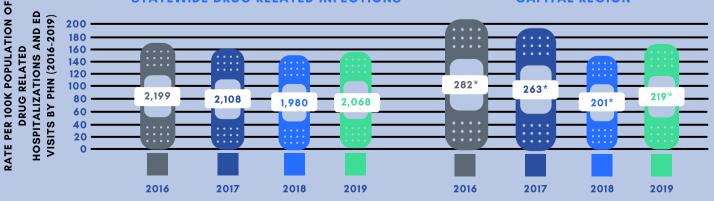
SYRINGE SERVICES PROGRAM ACCESS



*DISTANCES TO CLOSEST SYRINGE SERVICES PROGRAMS FROM PUBLIC HEALTH NETWORK IN CONCORD, NH

> SOURCE: SYRINGE SERVICE PROGRAMS REGISTERED IN NH. VT. AND ME

HOSPITAL DISCHARGES WITH CONCURRENT INFECTION AND OPIOID USE^ **STATEWIDE DRUG RELATED INFECTIONS CAPITAL REGION**

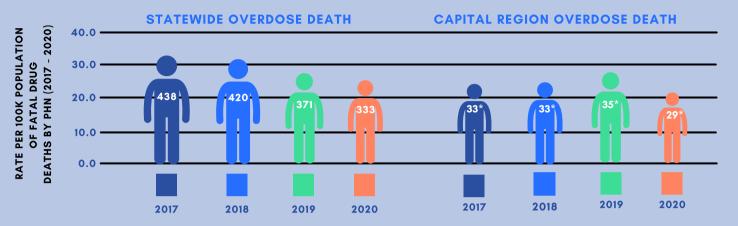


*THE SIZE OF THE BANDAGE IS THE RATE PER HUNDRED THOUSAND, TO ALLOW FOR COMPARABILITY. THE NUMBER ON THE BANDAGE REPRESENTS THE ACTUAL NUMBER OF ED AND INPATIENT DISCHARGES WITH CONCURRENT INFECTION AND OPIOID USE CODES. SOURCE: OFFICE OF HEALTH STATISTICS AND DATA MANAGEMENT, BUREAU OF PUBLIC HEALTH STATISTICS AND INFORMATICS, NH DEPARTMENT OF HEALTH AND HUMAN SERVICES^INCLUDED CASES OF CELLULITIS, ABSCESS, SKIN INFECTION, BACTEREMIA, SEPTIC ARTHRITIS, OSTEOMYELITIS, OR ENDOCARDITIS AND OPIOID USE, OPIOID ABUSE, OPIOID DEPENDENCE, OPIOID POISONING, OR ADVERSE EFFECT OF OPIOID

ACCESS TO NALOXONE

All partners report sufficient access to naloxone. Acknowledgment that peers are reversing overdoses without calling 911, state-reported overdoses are underreported. Multiple organizations do street outreach including naloxone distribution in Concord.

REFERRAL TO SUD TREATMENT SERVICES Doorway engaged in referrals with community partners, opportunities exist to engage with more treatment providers. Shortened turnaround time and barrier removal needed to enable immediate access to treatment. More Intensive Outpatient Program (IOP), detox, and residential treatment services are needed in region. New Recovery Community Organization (RCO) coming to Concord soon.

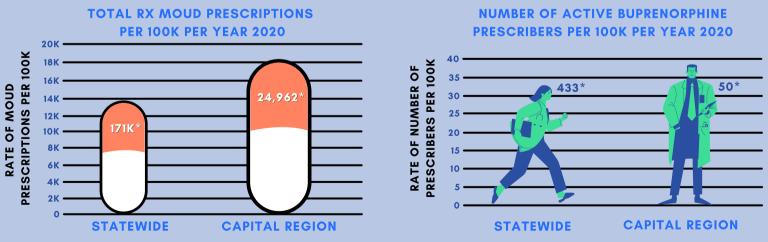


*THE SIZE OF THE PERSON IS THE RATE PER HUNDRED THOUSAND, TO ALLOW FOR COMPARABILITY. THE NUMBER ON THE PERSON IS THE ACTUAL NUMBER OF OVERDOSE DEATHS. SOURCE: OFFICE OF THE NH MEDICAL EXAMINER (2017-2020)

HOUSING

Need for greater access to low-barrier housing, no subsidized housing available. Long waitlist for shelters and housing, 8-10 year waiting list for Section 8. Some organizations provide hotel vouchers, but there is stigma reported and concerns about housing COVID-positive folks in hotels.

ACCESS TO MEDICATIONS FOR OPIOID USE DISORDER (MOUD*) Multiple options/programs for MOUD throughout the region. Stigma in the community reported for MOUD, some see it as "enabling"; opportunities exist for provider and community education. One MOUD friendly sober living facility.



*THE SIZE OF THE ICON IS THE RATE PER HUNDRED THOUSAND, TO ALLOW FOR COMPARABILITY. THE NUMBER ON THE ICON IS THE ACTUAL NUMBER OF PRESCRIPTIONS OR PRESCRIBERS. SOURCE: THE NH PRESCRIPTION DRUG MONITORING PROGRAM (2020)



IMPACT OF COVID-19

Increase in telehealth allowing for low-barrier access at a critical time, but there are barriers in access to tech and tech literacy. Street outreach more limited. Increase in homelessness noted.