

Program Administration

- 3 Trained Opioid Overdose Prevention Educators are PCHD staff.
- 1 Nurse Practitioner Prescriber works under Physician Medical Director (since HB170 passed we can dispense on site). Previously partnered with 1 Pharmacy who still acts as ordering/storage facility.
- Began billing MC for SBIRT and kit June 2014 to make program self-sustaining.
- Project DAWN is incorporated into other public health programs that are already administered by the PCHD such as:
 - HIV and STD Disease Transmission Prevention
 - Injury Prevention Program
 - Vivitrol Relapse-Prevention Program
 - Syringe Exchange Program



Community Support/ Key Partners/ Challenges

- Widespread public community acceptance. Addicted individuals act to save others with their kits and bring others into the program. They ARE our best community partners.
- 1 Pharmacy has agreed to stock it and act as a distribution point.
- Local ADAMHS Board is influencing other ADAMHS Boards in Ohio to fund Naloxone Programs. I am acting as the state OACBHA technical resource and made a presentation to them last Fall.
- Partnerships with local treatment facilities recruits clients.

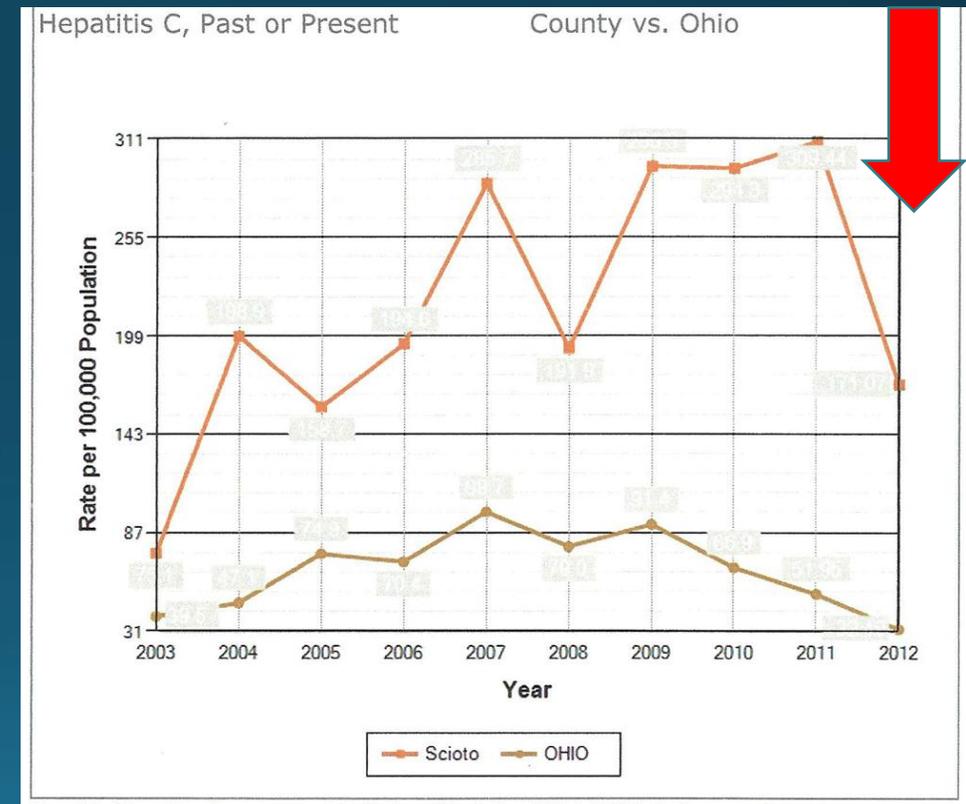
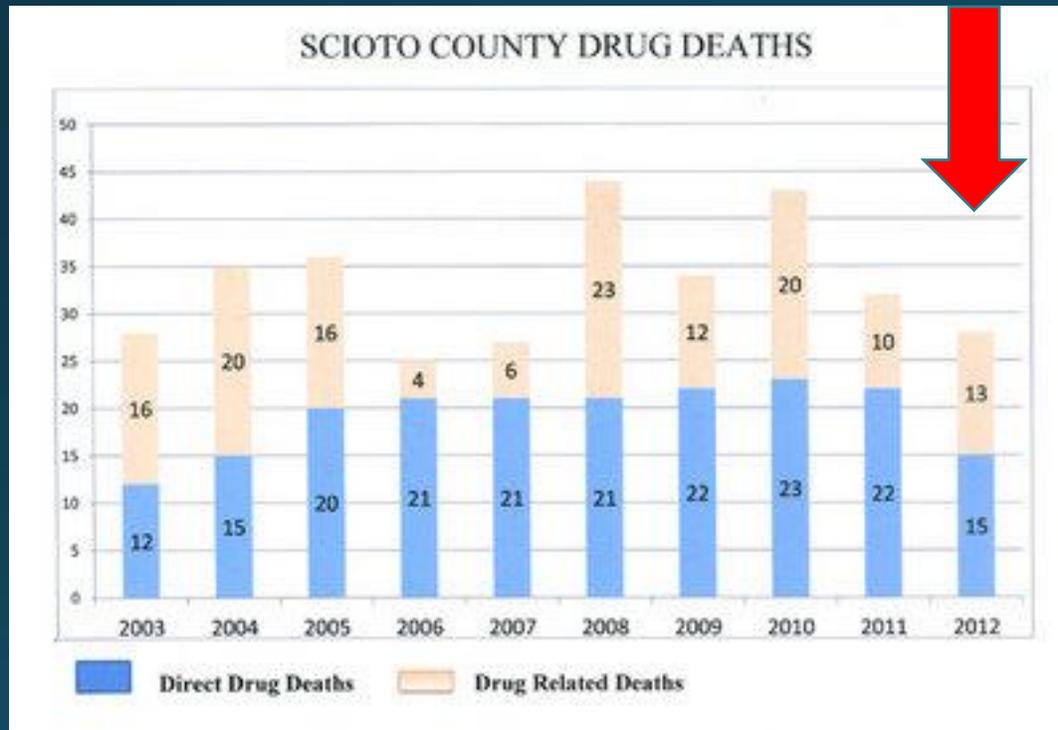
Challenges

- So far not much interest by local LE to carry or use Naloxone. Several reports of LE “confiscating” Naloxone kits from clients being addressed. Local Court arranging for LE training and putting pressure on local LE to participate. Currently no funding for LE.
- So far not much local interest by local SAT facilities to administer it to discharged clients.
- So far not much interest by chronic pain patients on high doses of opioids.

Successes

- So far 124 Naloxone Kits have been distributed.
- Have influenced several Ohio ADAMHS Boards to fund Project DAWN programs in their counties.
- 26 successful overdose reversals in Scioto County. All have survived. Many have saved multiple victims.
- Finally able to personally furnish naloxone and kits from PCHD in one visit and also to bill MC due to HB170.
- We have increased access to addiction treatment and have referred many clients who are now on MAT.
- Slight reduction in fatal OD rates (heroin increasing) and 50% reduction in Hep. C
- Sharing all program materials widely throughout Ohio and Kentucky enabling more programs to operate. Speaking at Appalachia state conferences.

Scioto County 2012



Lessons learned.....

- Project DAWN works well when incorporated into other “feeder programs”.
- Figure out what works best in YOUR community.
- Doing groups is O.K. just establish some guidelines to protect privacy.
- Best if you can do appointments as well as “walk-ins”.
- Best if you can accomplish the education session and give them the complete kit at the same visit.