The Vermont Department of Health, Divisions of Substance Use Program (DSU), Emergency Preparedness and Response and Injury Prevention (DEPRIP), and Laboratory Sciences and Infectious Disease (LSID) have strengthened their partnership to address the increasing number of opioid overdoses. Representatives from these divisions meet regularly to discuss and address challenges and gaps in services, to identify solutions and to support our community organizations in rapid response and long-term planning. This document highlights the current initiatives from across the Health Department to address opioid overdoses.

What initiatives are addressing opioid overdoses?

**Overdose Outreach**

*Overdose Outreach* is a new initiative between the Health Department and Vermont’s four syringe service programs (SSPs). Through this initiative the SSPs developed a program to actively reach people who are not connected to services to provide harm reduction education and tools, information on treatment, and recovery services. The intention is to build trust and awareness of SSP services and engage people in ongoing harm reduction strategies. Over calendar year 2022, this effort reached over 1,300 Vermonters who were not currently engaged in services, a third of whom indicated they had never interacted with harm reduction, treatment, or recovery services.

Additionally, SSPs and Recovery Centers have proactively outreached to those unhoused Vermonters living at hotels and motels throughout the state. Early in the COVID-19 pandemic, these partners recognized the need to overcome transportation barriers and provide harm reduction tools and referrals to other substance use services such as treatment at these locations.

**Mobile syringe service exchanges** are available through all of Vermont’s Syringe Service Programs (SSPs): Vermont CARES, AIDS Project of Southern Vermont, the HIV/HCV Resource Center (H2RC), and Howard Center Safe Recovery. These mobile exchanges help to meet the needs of Vermonters who are unable to access services through a fixed site location. The mobile exchanges provide sterile injection equipment, HIV/HCV tests, case management and naloxone to people either at their homes or in a public location (such as a parking lot) that is easily accessible. This form of service played a critical role in keeping at risk individuals engaged in care when Stay Home Stay Safe orders were in place during the COVID pandemic in Vermont and has continued to be utilized at a high rate.

**Safety planning for clients** is a priority for SSPs, treatment providers, and recovery center staff to reduce the risk of overdose or returning to use. This work was enhanced in response to COVID-19.
Naloxone Distribution

Vermont EMS is required to offer naloxone to any person who overdosed on opioids and have refused transportation to the hospital for additional care. Beginning in 2020, this protocol also requires naloxone leave behind kits to be provided to people who may exhibit other signs of opioid misuse when EMS (emergency medical services) arrives on scene for a non-overdose emergency. The naloxone leave behind kits may also be given to a bystander or family member who may be in a position to save a life.

Community Based Distribution of Narcan® Kits is intended to ensure those who may have the opportunity to intervene with an opioid overdose have Narcan® available to do so. This means any individual who believes they could help someone at risk of an opioid overdose, or who are at risk of an opioid overdose themselves, are eligible. It should be noted that fentanyl is being found in many illicit substances, not just heroin. Those using substances not purchased at a pharmacy are encouraged to receive Narcan® and teach loved ones where it is kept and how to use it in case of an unintentional overdose.

Harm Reduction Packs include naloxone, fentanyl test strips, rescue breathing mouth barriers, and educational information. Packs are distributed through multiple locations including the General Assistance hotels. Additional distribution locations include probation and parole, Syringe Service Programs (SSPs), recovery centers, and shelters. Fentanyl test strips will continue beyond the pilot period designated by the legislature. This initiative was enhanced in response to COVID-19.

Overdose Response Training for AHS Staff is underway to ensure all AHS staff who directly interact with Vermonters as part of their AHS role are trained in how to identify and respond to an opioid overdose.

Overdose Messaging

KnowOD is an opioid overdose prevention campaign reaching two primary audiences: people at risk of an overdose, and their family and friends. Key messaging for people at risk of an overdose focuses on six overdose prevention and harm reduction tips:

1. Never use alone—if you OD while alone, you can die
2. Go slow—start with a small amount to test drug strength
3. Call 911—in case of an overdose
4. Use new syringes—to reduce risk of infections and help to protect vein health
5. Test for fentanyl—fentanyl can be dangerous, so test with easy-to-use strips
6. Carry naloxone—Narcan® nasal spray can reverse an overdose

The campaign also highlights steps family and friends can take to lower a loved one’s risk of a fatal overdose, including where to find free naloxone, keeping naloxone on-hand (and knowing how to use it), and calling 911. New messaging also increases awareness that fentanyl can be found in opioids and other drugs like cocaine, methamphetamine, and any other powder and pills. The campaign directs people to call or visit VT Helplink or visit knowodvt.com for more information and resources.

A separate digital campaign reaches young adults, with messaging addressing the increased risks of using alcohol and prescription opioids together, side effects of misusing opioids, the risks of sharing prescriptions, fentanyl awareness, and signs of an overdose,
Community Support for Overdose Prevention

Community Action Grants have been awarded to four counties with a high burden of opioid overdoses through the CDC Overdose Data to Action Grant. Bennington, Rutland, Windham, and Windsor counties began by assessing the needs in their region and are now using this funding to identify and implement services and activities that address overdoses in their region.

Community-level Rapid Overdose Response: The Health Department has developed alert systems to identify when there is a significant increase in overdose calls to EMS and visits to emergency departments related to overdoses. A team from multiple divisions throughout the Health Department will review increases and identify community partners to allow for a rapid response utilizing local resources.

Medication for Opioid Use Disorder (MOUD)

Hub and Spoke System: Vermont utilizes a system of nine regional Hubs and over 100 Spokes, including Vermont’s six correctional facilities, to provide MOUD for Vermonter’s. Hubs provide a higher intensity of support to their clients and work closely with their region’s spoke providers which are office-based treatment locations, often embedded within primary care and family medicine offices. Patients who need a higher level of support in their treatment and recovery experience are treated by Hubs, while those who might have more stability in their treatment and recovery are treated by Spokes. Patients who are prescribed buprenorphine or naltrexone can be moved between Hubs and Spokes depending on their support needs.

Between 2016 and 2020, most Vermonters who died of a drug overdose did not have evidence that they had ever been treated for substance use disorder\(^1\). MOUD is an important strategy in Vermont’s overdose prevention efforts. This evidence-based treatment modality is overseen in partnership by the Vermont Blueprint for Health and the Division of Substance Use Programs. For more information on the Hub and Spoke system of MOUD visit [here](#).

For those looking to engage in treatment services visit [VTHelplink.org](http://VTHelplink.org).
Opioid Settlement Advisory Committee

Settlements were reached between states and drug manufacturers and distribution companies over the toll caused by prescription opioids. The Health Commissioner chairs the Vermont Opioid Settlement Advisory Committee, which was developed through Act 118. The advisory committee provides recommendation to Vermont’s legislature on how the state’s share of settlement money should be allocated, and provided its first set of recommendations to the legislature in March 2023.

For more information: Nicole Rau Mitiguy, substance misuse prevention manager, nicole.rau@vermont.gov