

The logo for CareZONE is a blue brushstroke shape containing the word "CareZONE" in white. "Care" is in a cursive font, and "ZONE" is in a bold, sans-serif font.

CareZONE

THE KRAFT CENTER
for Community Health



BOSTON HEALTH CARE *for*
the HOMELESS PROGRAM



GE Foundation

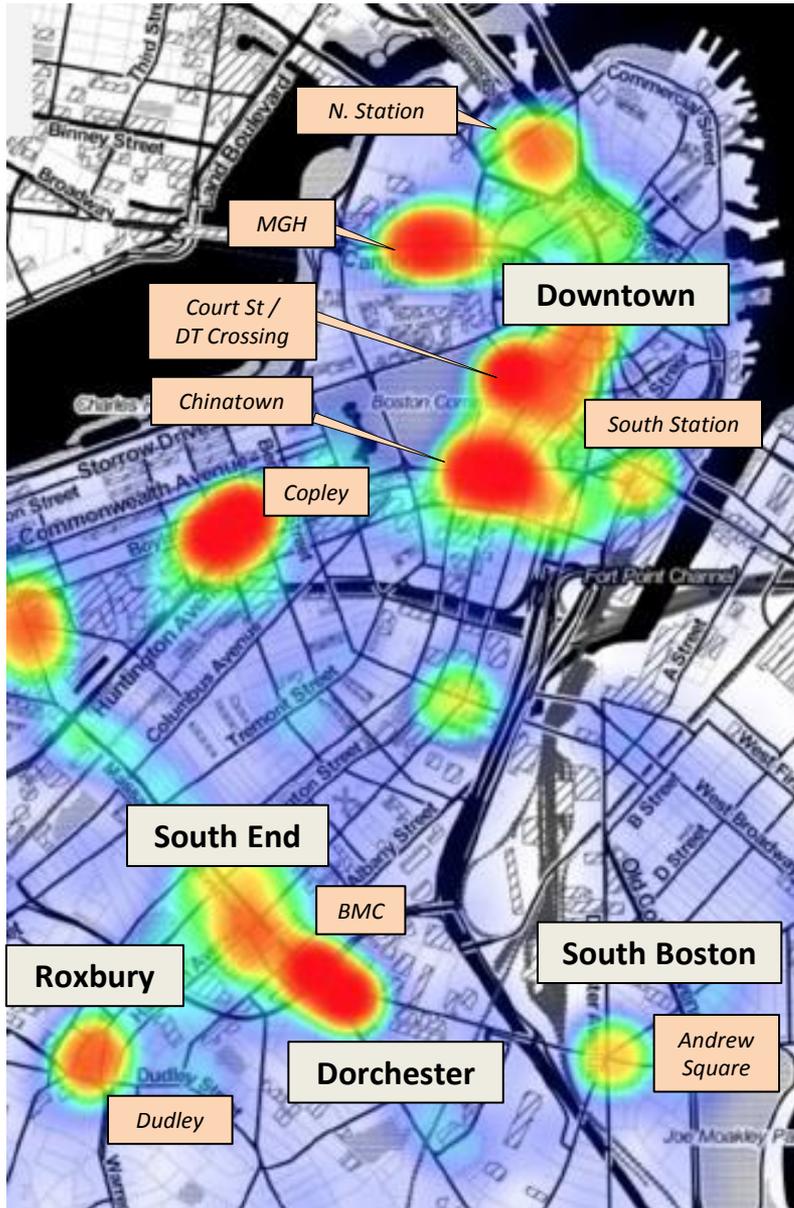


Briefing On *CareZONE* Program

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Harm Reduction Commission, January 28, 2019

Assessing a Public Health Crisis



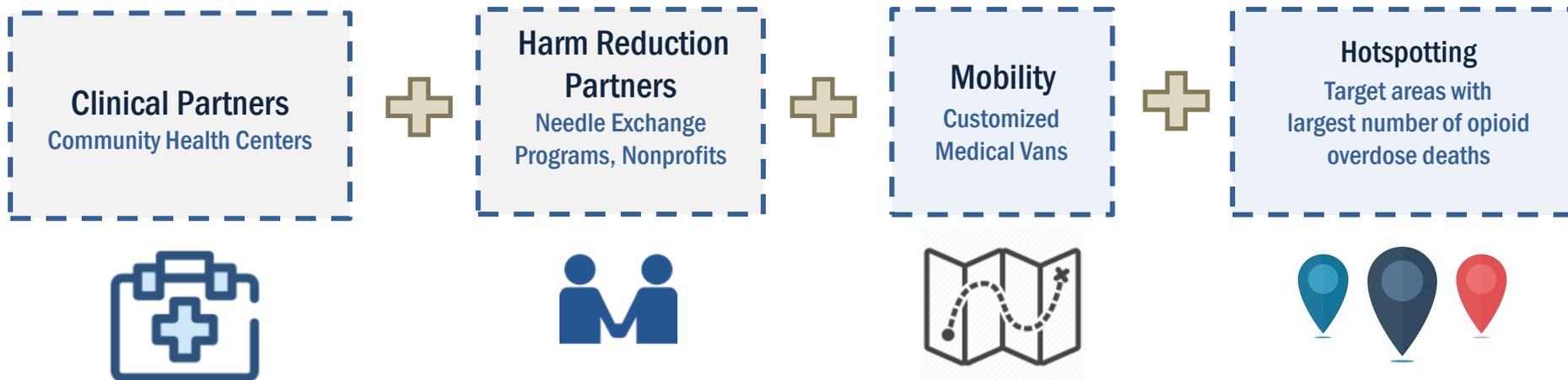
2016 Boston Area Narcotic Related Incidents:

- Nearly every Boston neighborhood affected by the opioid epidemic.
- Fentanyl present in the majority of deaths.
- A significant number of OUD victims were homeless.
- Increasing availability of OBAT programs but:
 - ❑ Few buprenorphine-waivered clinicians & OBAT programs in community-based health centers;
 - ❑ Few OBAT programs offering the full range of harm reduction services.

Substantial need for access to low-threshold treatment & harm reduction services for the most marginalized populations

Proposed Idea: The *CareZONE* Model

CareZONE uses precise, data driven hotspotting to bring low-threshold, on-demand addiction care & harm reduction services directly to populations at highest risk of near-term death.



Engaging Community Leaders & Stakeholders

- **Neighborhood Associations**

- Downtown North Association
- West End Civic Center
- Dudley Street Neighborhood Association
- Mt. Pleasant Neighborhood Association
- Orchard Gardens housing development

- **Community Health Centers and Hospitals**

- Boston Medical Center – Grayken Center for Addiction Medicine
- Dimock Community Health Center
- Massachusetts General Hospital - Substance Use Disorder Initiative
- Massachusetts League of Community Health Centers
- North End Waterfront Health Center
- Whittier Street Community Health Center

- **Homeless Service Organizations**

- Bay Cove Human Services
- Jim Greene – Director, Emergency Shelter Commission, City of Boston
- Pine Street Inn
- Saint Francis House

- **Other Community Partners/Outreach**

- Massachusetts Department of Public Health
- City Hall – Office of Neighborhood Services
- City & State Elected Representatives
- District A-1 Police Department
- District B-2 Police Department
- Boston Inspectional Services, Community Liaison to Roxbury
- TD Garden – Sr. VP Business Operations & Director of Security
- Local business owners in Dudley Square
 - Owners of Dunkin' Donuts, Haley House & Final Touch

Elements of *CareZONE* Model

1 Acute & Preventive Care	<ul style="list-style-type: none">• Immunizations (prioritize Hepatitis A and B, Influenza, Tetanus)• TB screening• Age/gender appropriate cancer screening• Screening for Sexually Transmitted Illness• Wound care for skin abscesses, including incision/drainage
2 Chronic Disease Management	<ul style="list-style-type: none">• HIV treatment• Substance Use Disorder treatment• Hypertension management• Diabetes management
3 Referrals	<ul style="list-style-type: none">• Behavioral Health at BHCHP's main site• HCV treatment at BHCHP's main site• Specialty medical care at MGH and BMC• Other community-based referral locations based on patient preference
4 On Demand Addiction Treatment	<ul style="list-style-type: none">• Inpatient detox (transportation arranged)• Medications for addiction treatment:<ul style="list-style-type: none">• <u>Buprenorphine</u>: Prescribed directly on van, with ongoing monitoring for diversion and compliance, in conformance with state Prescription Monitoring Program• <u>Naltrexone</u> oral or intramuscular, prescribed and administered directly on the van• <u>Methadone</u>, referral to Opioid Treatment Programs
5 Harm Reduction	<ul style="list-style-type: none">• Naloxone kit distribution and overdose prevention education• HIV, HCV testing• Syringe exchange• Risk reduction counseling• Fentanyl testing

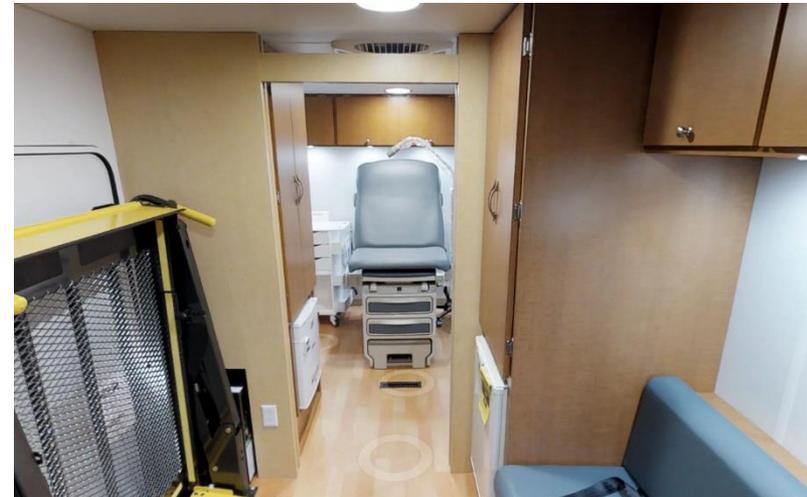
The CareZONE Van



- Capital & operating costs:
 - \$160,000 van & medical build;
 - \$177,000 operating costs of 1-year pilot (4 sessions/week)
- 24 feet long – smaller than most medical units
 - No commercial license required
- Volta System - Lithium battery powers the van
 - No generator required
 - Plugs in at night & recharges when motor on

The *CareZONE* Van

- Reception area when patients enter
- Clinical room in back with a medical chair
 - Laptop, wifi, and printer in lockable cupboard – can log into EHR and print prescriptions on site
 - Sink
 - No bathroom (by design)
- Two refrigerators
 - One for food, and a lockable one for vaccines
- Wheelchair lift makes van handicap accessible
- Bike rack for mobile outreach workers



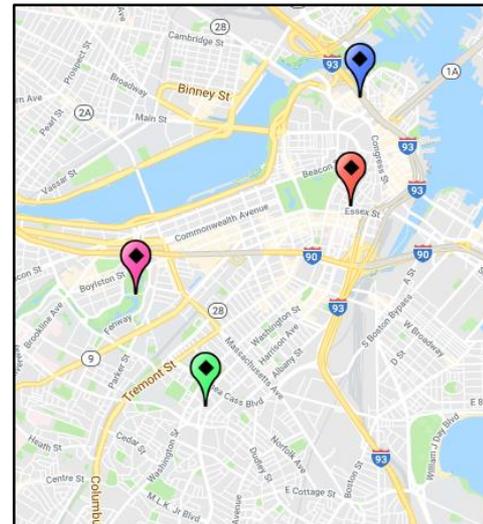
CareZONE Staff

- Buprenorphine-waivered MDs from Boston Health Care for the Homeless Program (led by Jessie Gaeta, MD);
- Harm reduction specialists and outreach workers from Boston Public Health Commission's AHOPE Program (led by Sarah Mackin, MPH);
- Virtual access to specialists (e.g. dermatologists and behavioral health);
- Coming soon: recovery support staff



A Day on the Van

- Currently staff 4 sessions/week;
- Van parked in same spot each week; team disperse by foot to engage potential patients
- Offer new syringes, collect used syringes, and distribute naloxone
- Interested patients brought back to the van to meet clinicians
- Can receive primary care or MAT
- Outreach workers walk patients to nearby pharmacy to fill MAT prescription immediately
- Facilitate access to OBAT program; weekly follow up on van until warm handoff made



Weekly Clinical Sites

Downtown – West End on Haverhill Street and the other in Downtown Crossing on Chauncy Street.

Roxbury – The van holds clinics in Dudley Square.

Fenway – The van holds clinics in The Fens.

Rapid Mobilizing to Address a Public Health Emergency

- The van has assisted in time-sensitive responses to find and treat new cases of HIV and Hep A infections among people who inject drugs
 - 20 screened for HIV
 - 11 screened for Hepatitis C
 - 7 patients prescribed buprenorphine
- Other services offered include:
 - HIV prophylaxis (PrEP & PEP)
 - Vaccines for Hepatitis A, Hepatitis B, & meningitis
 - Treatment for STIs
 - Needle distribution
 - Naloxone kits offered
 - Connections to medical respite care



Preliminary Evaluation Results, January-October 2018



Number of Contacts

Van staff made **3,457** contacts with people who inject drugs. Our expert outreach team from AHOPE engages with individuals known to have opioid use disorder as well as those exhibiting signs of addiction.



Syringe Exchange

Van staff distributed **36,510** syringes and collected an estimated **40,891***. Syringe exchange is an important harm reduction practice to reduce the spread of HIV & Hepatitis, reduce the risk of soft tissue infection, encourage safe disposal, and provide risk reduction counseling.



Patient Encounters

Van clinicians had **248** total patient encounters. Some patients have accessed clinical services multiple times. Follow-up visits from patients represented **57%** of the total encounters on the van.



Naloxone Kits Distributed

Van staff distributed **1,257** overdose reversing naloxone kits. Kits are distributed to those coping with opioid addiction as well as family and friends of those with addiction.



Buprenorphine Prescriptions

Van clinicians provided **131** buprenorphine prescriptions. **69%** of these prescriptions represent patients returning for refills.



*Note: AHOPE, the mobile health program's harm reduction team from the Boston Public Health Commission, on average takes **112 syringes** off the street for every **100 syringes** distributed, meaning their syringe exchange program results in **fewer** needles in circulation

Optimizing the Model: Fentanyl Testing

- Funding from RIZE MA will enhance harm reduction services on the van
 - Fentanyl Testing with MX908
 - Traditional Fentanyl Test Strips
 - Peer-to-Peer Network
- **MX908 Device**
 - Portable high-pressure mass spectrometer
 - Uses swabs to test drug paraphernalia for fentanyl
 - Device contains one of the largest libraries of synthetic opioids
 - Predictive feature can identify fentanyl structures, even when analogs are currently unknown to the library
 - First time used in a mobile harm reduction setting



Optimizing the Model: Fentanyl Testing

- **Cost**
 - MX908 – \$65,000
 - Swabs – \$1-1.50 each
- **Next steps**
 - Engage with essential stakeholders including law enforcement to ensure safe and effective rollout
 - Train staff and pilot device use at 1-2 clinical sites
 - Expand device-use to all clinical sessions
- **Anticipated Outcomes**
 - Will empower clients to make informed decisions to reduce risk of overdose
 - Reach new clientele (i.e. people with OUD who do not inject) who would benefit from all of van services
 - Unique analysis opportunities with MX908 data to inform surveillance



Future Directions

2019

1. Increase number of sessions of the current van
2. Expand recovery support services
3. Evaluate effectiveness of program in facilitating access to treatment
4. Develop statewide coalition of mobile addiction programs to share best practices and advocate for support

Long Term

5. Establish a training organization and help launch national affiliates



QUESTIONS?



Additional Slides

Optimizing the Model: Fentanyl Testing

- **Evidence behind fentanyl testing**
 - 85% of people who inject drugs desired to know about the presence of fentanyl before using drugs.¹
 - Receiving a positive fentanyl result is associated with reporting a positive change in overdose risk behavior.²
 - Subjects reported using smaller amounts, going slower when using, using with someone else, and doing a tester; Few got rid of their product
 - Fentanyl testing can help initiate harm reduction conversations, even in fentanyl endemic areas.³
 - Conversations may build relationships/rapport and lay groundwork for future harm reduction behavior.



1. [Sherman, S.G., Park, J.N., Glick, J., McKenzie, M., Morales, K., Christensen, T., Green, T.C. \(2018\) FORECAST Study Summary Report. Johns Hopkins Bloomberg School of Public Health.](#)
2. [Krieger MS et al. Use of rapid fentanyl test strips among young adults who use drugs. *Int J Drug Policy*. 2018 Nov;61:52-58](#)
3. [Glick JL et al. Stakeholder perspectives on implementing fentanyl drug checking: Results from a multi-site study. *Drug Alcohol Depend*. 2019 Jan 1;194:527-532.](#)