

Use of Peer Support Specialists in Local Health Departments

HEALTHY COMMUNITIES STRATEGY:

Partner with at least one organization to implement a safe syringe initiative in the county.

Public Health Problem/Issue

North Carolina, like many other states, is in the midst of an overdose epidemic, primarily driven by prescription opioids and increasingly, heroin. Unintentional opioid-related drug overdose deaths have increased astronomically in the past two decades, moving from 109 opioid-related deaths in 1999 to 1,718 in 2018¹. Moreover, there were 6,769 emergency department visits resulting from opioid overdoses among North Carolina residents in 2018².

The increasing trend of opioid-related deaths has been felt hard in the three-county Appalachian district. From 2014-2018, the annual rate of unintentional opioid overdose deaths per 100,000 residents was 14.6 in Allegheny County, 11.1 in Ashe County, and 7.8 in Watauga County³. The estimated total lifetime costs to counties in the Appalachian district (Allegheny, Ashe and Watauga), including medical expenses and work loss associated with overdose deaths exceeds \$16 million.

Taking Action/Intervention

AppHealthCare's Healthy Communities team used Preventive Health and Health Services (PHHS) Block Grant funding to reduce the burden of opioids through the development of peer support programs in their three-county district. With partner support from the local sheriffs' departments in Watauga and Allegheny counties, Olive Branch Ministries, and hospital partners, AppHealthCare was successfully awarded funding from the NC Division of Public Health (Opioid Action Plan grant and Emergency Overdose grant) to hire a peer support specialist (PSS) and implement the peer-support program in all three counties in the district. PHHS funds support staff in coordinating the planning, implementation and evaluation of the peer support program and supervise the peer support staff.

The purpose of the PSS program is to connect individuals to social, healthcare, treatment, and recovery resources, and help them access items that will meet their basic living needs (e.g. housing, shelter, food, clothing). Additionally, a PSS provides trainings in each county for community members and justice-involved individuals to learn about administering Naloxone.

AppHealthCare PSS Model

PSS meets with individual using substances or in recovery from substance use disorder and assesses needs for additional support services.

PSS generates referrals to community, social, and healthcare resources to provide access to basic living needs in addition to resources necessary to enter and sustain recovery.

PSS remains in frequent contact whenever possible with individual regardless of recovery status to monitor needs and ensure that supportive services are still available and being utilized.

¹ Cohen, Mandy K, MD, MPH; Kansagra, Susan M., MD, MBA. North Carolina Medical Journal. May-June 2018 vol. 79 no.3, pg. 157-162. The Opioid Epidemic in NC: Progress, Challenges, and Opportunities.

<http://www.ncmedicaljournal.com/content/79/3/157.full#F1>

² N.C. DPH: IVP Branch: Poisoning Data. Retrieved from <https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Poisoning.htm>

³ N.C. DPH: IVP Branch: Poisoning Data. Retrieved from <https://www.injuryfreenc.ncdhhs.gov/DataSurveillance/Poisoning.htm>

Impact

“D’s” Story

Ashley Wurth, a PSS at AppHealthCare recently shared one of the direct successes she’s seen on the ground:

“I met D in jail after he had been arrested for possession of a syringe and suboxone. In our discussion, D said that he had been on legal and illegal medication assisted treatment (MAT) for eight years off and on. He stated that he was unable to utilize legal MAT services due to lack of insurance and transportation, so he was on a “do it yourself” program. When D was released, I found him a grant funded MAT program along with shelter. D had been homeless in Alleghany County for 18 months since his last release from state prison with very little stable employment. He was able to get through court with no probation and only a civil judgment if he entered some type of treatment.

D is now living in a homeless shelter, has been stable with the MAT provider and is employed with a local painting contractor. He attends local recovery services and has stated to me that he is doing the best he’s done in a decade. I delivered a letter to his attorney explaining his progress to be presented to the court.”

“M’s” Story

John Simmons, another PSS at AppHealthCare, has also seen success locally:

I have known M for a while. I had worked to get M connected to the Syringe Exchange Program (SEP) in Watauga County. As a result of our regular contact through the SEP, M requested help other than needing clean syringes. He wanted detox and treatment. I was able to link him to a seven-day detox, as well as immediate access to a half-way house where food, housing, recovery services, employment and transportation are available. M has had a stable recovery for 2 months, including employment, and was recently put in a position as weekend house manager at the half-way house. I recently received this text from him”:

“Hey John, Stay safe and warm over the holidays. I hope to see you soon. Take care and once again, thank you, John, for all your help in me walking a different path as we enter the New Year. I was able to send my kids Christmas this year. I’ve never been happier in my life. I do look forward to catching up with you sometime.”

Stories like “D’s” and “M’s” exemplify what AppHealthCare’s Healthy Communities team, with additional support from the NC Opioid Action Plan Grant and the Emergency Overdose Grant, has been able to accomplish through the PSS program. Currently these accomplishments include:

- * AppHealthCare’s Board of Health approved a resolution to support comprehensive strategies to address the opioid epidemic by adopting the NC Opioid Action Plan 2.0 (https://files.nc.gov/ncdhs/OAP-2.0-8.7.2019_final.pdf)
- * PSS have trained over **150** community members in the use/administration of naloxone.

AppHealthCare’s PSS program has served approximately 170 individuals across Alleghany, Ashe and Watauga Counties and has been in contact with these individuals over 500 times in the last six months (January-June 2019). Of these 170 individuals:

66
were justice-involved persons

38
Have been referred to some type of evidence-based treatment

39
Are now-registered Syringe Exchange Program participants, of whom 23 received additional services and **100%** were given information regarding treatment and services

Through a mixture of district-wide public education efforts and on-the-ground interventions, AppHealthCare has begun a multi-faceted approach to reversing the unfortunate trend of rising opioid overdose deaths in recent years. Thus far, the results are encouraging.



AppHealthCare staff collaborate to assemble Naloxone Kits that will be distributed in Watauga, Ashe and Alleghany Counties.

AppHealthCare Peer Support Specialists, John Simmons and Ashley Wurth, spend time with a client building a relationship, learning about her current situation and needs, and connecting her to local resources.

