Being a first responder can be tough, especially when faced with an overdose. That's why the Post-Overdose Outreach Program was created — built to help you help the ones who need it most.

People who have experienced a non-fatal drug overdose are at high risk for another — and that next one could be fatal. This is where the outreach program comes in. Designed to prevent future overdoses, Post-Overdose Outreach offers support by providing:

- Education on overdose prevention
- Overdose reversing naloxone
- Resources to help obtain life-saving medications

With all of these resources combined, it’s proven that we can stop repeat overdoses and preventable, overdose-related deaths.

You Are The Answer

As first responders, you’re the perfect people to lead the post-overdose outreach program:

- You have first-hand access to essential 911 data. This makes it easier to identify those who have had a non-fatal drug overdose, including those who refuse transportation to the hospital.
- The people you help often remember you, and you remember them. With that initial connection made, you’re in a unique position to build a relationship and trust by checking up on them.
- Firefighters and EMS personnel are trusted members of the community, known for helping others.

Let’s Build A Successful Team

Building a strong team is the first key to success. Finding the right members for your team can depend on several factors, but a good indicator is that they care about those who are struggling with drug addiction and are either already educated in how to handle situations and conversations with these individuals, or are willing to learn.

Members of your team can include:

- Healthcare workers
- Behavioral health professionals
- Peer Recovery Specialists
- Trusted law enforcement
- Case managers
- Other trusted members of the community who care

With everyone on the same page about the end goal, it’s easier to figure out data-sharing agreements and the roles of each team member, making the program that much more fluid and effective.
Every Member Matters

Each member on the post-overdose outreach team plays an important role.

- A healthcare worker (such as a recovery coach or harm reduction provider) generally leads the response team during a visit.
- First responders administer and/or leave life-saving naloxone behind.
- Peer recovery specialists can help provide a successful process through help, guidance, and resources.
- Trusted law enforcement can ensure safety and provide information. No law enforcement actions should be carried out. This isn't the time or place for punishment. This is a time to provide help.
- Case managers can follow up with individuals, making sure that they've gotten everything they need.

When choosing your team, they should each be able to provide judgment-free care that prolongs and sustains life.

It’s Time For Visits

Once you’ve built your team, it’s time to take action by making visits.

People who’ve experienced a non-fatal overdose and were not transported to the emergency department should be the priority. These are the ones who often fall through the cracks. Finding them isn’t too difficult, either. Through your access to 911 data, public health or public safety agencies, and formal agreements with any entity that shares patient information, you can access their contacts.

Don’t be afraid to reach out. The first outreach should happen no more than three days after the overdose. If the person you’re trying to help isn’t home, try again, up to three more times.

Your efforts will let them know you care about their life.

Conducting A Visit

During the outreach visit:

1. **You and your team will provide counseling plus information about treatment and other support and services.**

2. **Help the individual find the right option by setting up appointments and providing referrals to:**
   - Substance use and mental health treatment
   - Primary care
   - Harm reduction
   - Any other critical social services

3. **No matter what service the person is ready for, now is the perfect time to educate with unbiased, evidence-based facts. This can also be the time to leave behind life-saving medications, such as naloxone kits.**

It’s important to note that the available services for any given visit will depend on what is available to you and your team, as well as the professional makeup of your team.
**Post-Visit Success**

Following the visit, the case manager or peer recovery specialist should follow up, making sure the individual received all the help they needed. With each visit, it’s important to document what happens. This makes it easier to see what's working and what's not so your team can make any needed adjustments.

**At minimum, each program should track:**
- The number of people reached, referred, and successfully linked to treatment and other services
- Naloxone kits that were left behind

If you want to go the extra step, keep a tab on those who have refused services, why they refused, what actions were taken during and after, as well as any other data that your team finds valuable. With all the collected data, it’s easier to see the progress made and define your team’s success.

**Why It’s Worth Your Time**

Post-Overdose Outreach visits can lead to many positive outcomes, including:

- **Decreased repeat overdoses**
- **Decreased number of overdose deaths**
- **Increased use of life-saving services like:**
  - Treatment, Social Services, and harm reduction services

And there’s also a plus side for you. Successful visits are rewarding when you and your team see the massive difference in people’s lives you’re making.

**Let’s Get Moving**

Now that you understand the need and the plan, it’s time to start building your response team and program. Here’s an action list:

1. Build the right team. Take the first step and reach out to individuals and agencies that you know would be a perfect fit.
2. Next, pinpoint the members in your community who would be ideal for providing support, navigating hurdles, and sharing opportunities with the team.
3. Once the team is built, it's time to build your program. When selecting goals, it’s important they’re clear, measurable, and understood by all members of your team.
4. Train your team to ensure that everyone understands their role in visits and follow-ups.
5. Ensure there is sufficient capacity within the treatment plans, programs, and social service agencies to handle the potential increased flow of referrals.

**Additional Resources**

- A framework for EMS outreach for drug overdose survivors: A case report of the Houston emergency opioid engagement system
- Finding from the recovery initiation and management after overdose (RIMO) pilot study experiment
- Moving beyond narcan: A police, social service, and research collaborative response to the opioid crisis
- Post opioid overdose outreach by public health and public safety agencies: Exploration of emerging programs in Massachusetts
- Public safety-led linkage to care programs in 23 states: The 2018 Overdose Response Strategy Cornerstone Project