Overdose Deaths are Preventable: San Francisco's Overdose Prevention Plan

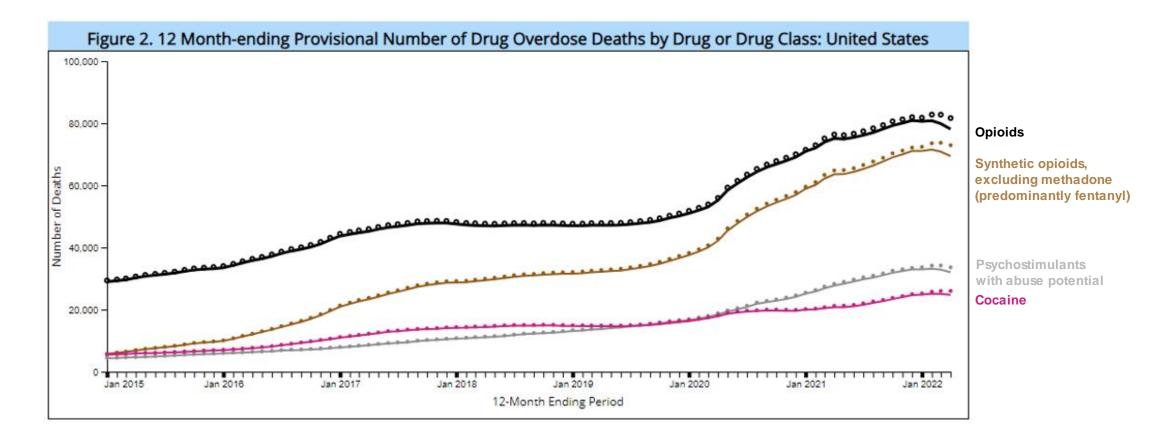
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City & County of San Francisco Department of Public Health

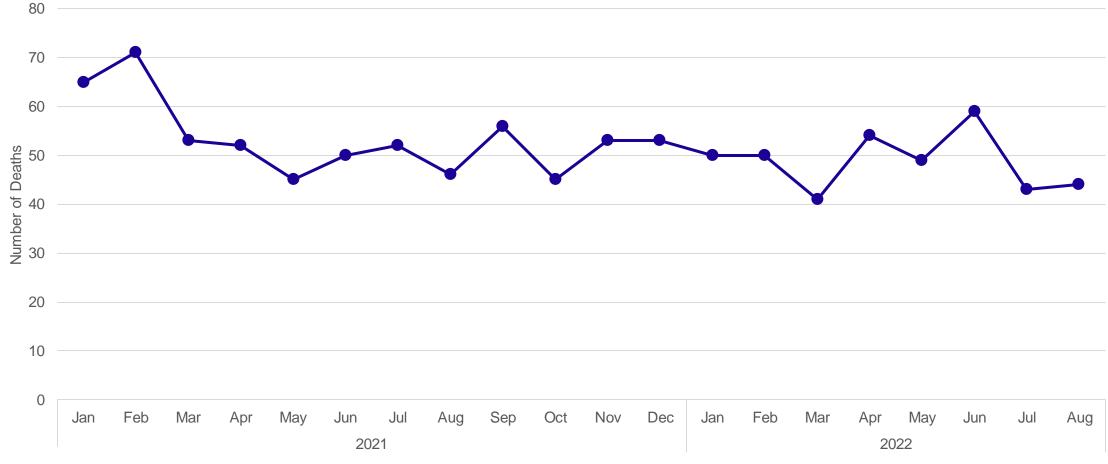
Over 100,000 people died from drug overdoses in the US in 2021, driven by fentanyl





NCHS, National Vital Statistics System.

Preliminary Overdose Deaths in San Francisco, January 21 – August 22, by month





City & County of San Francisco Department of Public Health

OCME Accidental Overdose Report, Jan 2021 – August 2022

Recognizing lives lost

These deaths are not just statistics.

Thousands of San Franciscans have died from drug overdoses and every one of these deaths is a tragedy. The City mourns the loss of these members of our community and remains committed to aggressively approaching drug overdoses as a public health crisis.

Addiction is not a moral failing. Lives can be saved by increasing access to the continuum of services.



San Francisco City Hall lit purple in recognition of Overdose Awareness Day, 8/31/22



Citywide progress under Mental Health SF

- Opening more than 250 new behavioral health residential care and treatment beds
 - Includes a drug sobering center (SoMa RISE), now open 24/7
- Expanded hours at the Behavioral Health Access Center (BHAC), the Office-based Buprenorphine Induction Clinic (OBIC) and BAART Market Street Clinic
- Established the Street Crisis Response Teams and the Street Overdose Response Team (SORT)
 - 1,840 calls handled by SORT between 8/2/21 and 7/31/22, 966 of which involved an overdose
- Launched an Office of Coordinated Care within Behavioral Health Services
- Medications for addiction treatment and links to contingency management are offered to patients at Zuckerberg San Francisco General Hospital
- Behavioral Health Services Pharmacy delivers buprenorphine to many high-risk housing locations and areas without retail pharmacy access



Overdose Prevention Planning

Goals: Reduce overall overdose deaths in San Francisco, while also reducing disparities in overdose deaths among people experiencing homelessness and among Black/African American San Franciscans.

Guiding principles:

- Build upon successes by advocates, people who use drugs, and community organizations
- Expand the continuum of services available to people who use drugs, including treatment and harm reduction
- Improve the health and wellness of people who use drugs and communities impacted by drug use and overdose
- Driven by evidence-based interventions, yet recognizes that flexibility and innovation are needed as conditions change

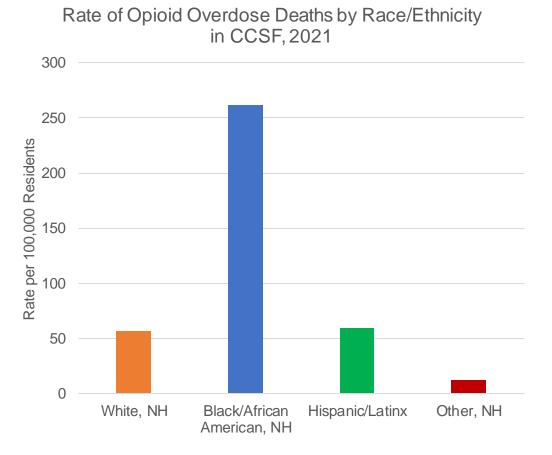
Input sought from: Community members, providers, advocates, DPH staff, interviews in the Tenderloin and guests at the TLC, experts in drug policy, research and social services



Reducing the profound racial disparities in San Francisco's overdose decedents

In addition to these principles, **the plan is centered around equity**, acknowledging the disparities that exist in drug-related outcomes and the unequal and often unjust ways that different populations experience drug-related harms.

San Francisco's profoundly high opioid overdose death rates among Black/African American residents illustrates the urgency of a tailored and focused approach, one that is **informed by the community and supported with sufficient resources to make meaningful change**.





Strengthening the continuum of evidencebased services will save lives





Center for Substance Abuse Treatment. Brief Interventions and Brief Therapies for Substance Abuse. Rock ville (MD): SubstanceAbuse and Mental Health Services Administration (US); 1999. (Treatment Improvement Protocol (TIP) Series, No. 34.)

San Francisco's Overdose Prevention Plan

point

point comprehensive plan

Increase availability and	Strengthen community
accessibility of the	engagement and social
continuum of substance	support for people at
use services	high risk for overdose
Implement a "whole City" approach to overdose prevention	Track overdose trends and related drug use metrics to measure success and inform program development and change



City & County of San Francisco Department of Public Health

Strategic Area #1: Increase availability and accessibility of the continuum of substance use services

Treatment and harm reduction services – historically viewed as separate, mutually exclusive approaches – exist on a continuum. The City aims to make services readily available to improve the wellbeing of people who use drugs and the communities in which drug use occurs. To achieve this, the City will:

- establish Wellness Hubs as a cornerstone of the City's efforts, which will provide overdose prevention services and resources, services to improve health, and linkages to treatment
- expand access and remove barriers to treatment for opioid use disorder, including fentanyl addiction,
- prevent overdoses from being fatal by supporting and broadening overdose prevention services (naloxone, fentanyl test strips, drug checking, and safe consumption), and
- improve post-overdose outcomes by enhancing overdose response teams and connecting people to care.



Strategic Area #2: Strengthen community engagement and social support for people at high risk for overdose

Without increasing the social supports provided to people who use drugs, outreach and engagement will have limited success and the risk of an overdose will remain high. To address these challenges, the City will establish or expand:

- communication to the public about drug use and the continuum of services available to people who use drugs, including through public messaging campaigns,
- public overdose response trainings and naloxone distribution using a citywide, data-driven approach, and
- collaboration with community organizations and developing partnerships to support populations most affected by overdose.



Strategic Area #3: Implement a "whole City" approach to overdose prevention

The magnitude of this crisis necessitates a "whole City" approach, in which overdose prevention initiatives exist in all departments, cover the city geographically, are tailored to meet the needs of diverse communities, and reduce disparities. The City will:

- establish protocols for first responders to refer and rapidly connect people who use drugs to health resources, overdose prevention services and drug treatment,
- make overdose prevention training and naloxone available in all city-run housing facilities,
- embed overdose prevention resources in a range of settings that meet the needs of people who use drugs, such as in social services, higher education, and entertainment venues, and
- promote low-barrier, street-based services and sufficient drop-in spaces that are available throughout the city.



Strategic Area #4: Track overdose trends and related drug use metrics to measure success and inform program development and change

Between 2015 and 2020, deaths involving fentanyl in San Francisco increased 4600%, illustrating the rapidity with which the drug supply and drug use can change. Data must be used to inform and evaluate service delivery, policies and resource allocation, as well as to advance racial equity. To achieve this, the City will:

- centralize data collection on drug-related metrics, including fatal and non-fatal overdose,
- using data to improve programs,
- develop materials for communicating data, including a publicly available dashboard for tracking important citywide metrics, and
- regularly meet with community members and frontline staff of service organizations to review data, discuss findings, and guide future planning.



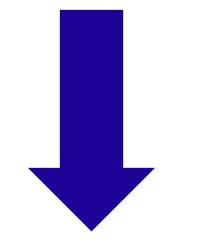
Imperative of addressing the social determinants of health

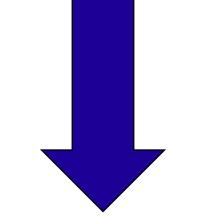
A great amount of overdose prevention work is already underway in San Francisco and implementing the strategies in this plan will save more lives. At the same time, it is essential that efforts also continue to be made to improve the overall health and wellbeing of people who use drugs, which means addressing systemic issues and the social determinants of health.

By making a concerted effort to engage people who use drugs, agencies focusing on these determinants – particularly housing – will not only improve health outcomes, but also be supporting overdose prevention.



Overdose Prevention - What our goals are





Reduce fatal overdoses by 15% citywide by 2025



City & County of San Francisco Department of Public Health Reduce racial disparities in fatal overdoses among Black/African Americans by 30% by 2025 Increase number of people receiving medications for addiction treatment (MAT) by 30% by 2025

Overdose Prevention – How we get there

• In 1-2 years:

- Establish at least 2 Wellness Hubs that co-locate needed services and improve the health of people who use drugs
- Open 70 additional residential step-down beds
- Open 40 new beds for dual diagnosis transitional care for women in the Bayview
- Increase the number of people receiving MAT by 20%
- Increase the number of programs offering contingency management from three to five
- Establish drop-in space with low-barrier therapy for people experiencing homelessness
- Increase citywide naloxone distribution from 47,000 kits to 75,000 kits annually
- Have naloxone available in 50% of supportive housing facilities



Overdose Prevention – How we get there

• In 3-4 years:

- Establish additional Wellness Hubs across San Francisco in priority neighborhoods
- Increase number of people receiving MAT by 30%
- Increase the number of people participating in contingency management by 25%
- Increase citywide naloxone distribution to 100,000 kits annually
- Have naloxone available in 100% of supportive housing facilities
- Train 250 people in overdose recognition and naloxone use in educational settings and entertainment venues annually



Looking forward

The plan builds upon successful work underway in San Francisco and incorporates the best available evidence to save lives and reduce drug-related morbidity as of September 2022. Implementation of the plan will be led by a newly established Office of Overdose Prevention in the Department of Public Health.

Yet the City recognizes the ever-changing nature of drug use and drug overdoses, and how our collective response will also need to evolve. This plan will be revised annually as new strategies are identified and lessons are learned, with ongoing input from stakeholders and community members across the city.

