

Pursuant to Local Law 225 of 2017 to amend the administrative code of the city of New York, in relation to requiring the department of social services and the department of homeless services to offer training to certain individuals in administering opioid antagonists, the Department of Social Services respectfully submits the attached reports.

### **Opioid Overdose Prevention Reporting for the Department of Homeless Services (DHS)**

Since September 2016, DHS established an agency policy requiring staff from all shelters to be trained on overdose prevention and naloxone administration. The training focuses on the epidemiology of overdoses, types of opioids, identification of overdoses, and the use of naloxone to reverse opioid overdoses. The training includes distribution of naloxone kits to shelters (as communal kits) and to each trained individual.

In November 2016, the DHS Office of the Medical Director (OMD) became a state-certified Opioid Overdose Prevention Program (OOPP) and as such OMD started training shelter staff routinely as Opioid Overdose Prevention trainers and responders, using a train the trainer model. In addition, OMD created the position of Opioid Overdose Prevention Champion at DHS sites, responsible for training staff and clients at their facility and ensuring that the DHS naloxone administration training and procedures are conducted and followed.

**Table 1. Number of staff and residents trained in opioid antagonist (naloxone) administration, FY 21**

Total number of individuals trained	<b>5,259</b>
Number of staff trained for the first time	3,118
Number of staff who have completed refresher training	185
Number of shelter residents trained <sup>1</sup>	1,956

Since the implementation of this policy and up to the end FY 2021, DHS trained 29,536 staff and DHS clients.<sup>2</sup> In FY 21, DHS trained 5,259 staff and clients<sup>1</sup> (Table 1).

An opioid antagonist (naloxone) was administered 800 times to a shelter resident in FY 21, with the vast majority of naloxone administration reported among single adult shelter residents (n=726, 91%) (Table 2).

<sup>1</sup> Due to the COVID-19 Pandemic, social distancing guidelines and since training for clients is voluntary, there was a reduction in the number of clients who participated in this training for this report timeframe.

<sup>2</sup> Including staff and clients trained by OMD, independent OOPPs and shelter staff.

**Table 2. Number of times naloxone was administered to a shelter resident by facility, FY 21**

Total number of times naloxone was administered	<b>800</b>
Single adults	726
Adult Families	24
Families with Children	5
Safe Haven	35
Drop-in Centers	10

In addition, since 2014, DHS has partnered with the NYU School of Medicine to train clients at the 30<sup>th</sup> Street shelter, but no trainings occurred in FY 21 due to the pandemic. In FY21, DHS also placed AmeriCorp Peer Members in selected shelters to provide substance use services, including naloxone administration training. These AmeriCorp peers trained 10 staff and 120 clients.

#### **DHS COVID Pandemic Period OD/SUD-Related Response**

DHS collaborated with DOHMH and OASAS to establish a methadone delivery program for clients receiving methadone replacement therapy who were isolated in a DHS hotel due to COVID. The process is streamlined and begins with client consent. After client consent is received, OASAS and the drug treatment program are notified. After this takes place, couriers from the DOHMH Methadone Delivery Service pick up the methadone from a locked box and deliver it to the client at the hotel.

Clients who are on Buprenorphine are linked to the H+H virtual clinic or their provider can call a local pharmacy for medication delivery.

To date, this system has been activated 152 times for methadone (with some clients receiving deliveries 2 times or more) and 18 times for Buprenorphine.

Further, DHS has adapted to working virtually by conducting trainings online via video conferencing.

In accordance with § 21-320.3, the department developed and implemented an opioid overdose plan to offer opioid overdose training to shelter residents who may encounter persons experiencing or who are at a high risk of experiencing an opioid overdose. No later than March 1, 2018, the commissioner of the department of social services shall submit to the mayor and the speaker of the council, and post online,

a comprehensive opioid overdose training plan informed, to the extent practicable, by the reporting pursuant to section 17-190, for such residents. Such plan shall include, but need not be limited to:

- a) Strategies for the agency to offer opioid antagonist administration training to such shelter residents;
- b) Information on how such shelter residents will be informed about the availability of such training;
- c) Information specific to the availability of such training;
- d) Information specific to the availability of opioid antagonist at shelter facilities; and
- e) The date by which the implementation of such plan will commence.

This DHS opioid antagonist administration training plan can be found [here](#).

## **Opioid Overdose Prevention Reporting for the Human Resources Administration (HRA) HIV AIDS Services Administration (HASA)**

Recognizing the toll that the opioid epidemic is having on New Yorkers across the city, and with the passage of Local Law 225 in December of 2017, the Human Resource Administration's HIV AIDS Services Administration began to implement a naloxone training program for staff and clients.

Pursuant to § 21-129.3, the department developed and implemented an opioid overdose training plan to offer opioid overdose training to residents of HASA facilities who may encounter persons experiencing or who are at a high risk of experiencing an opioid overdose. No later than March 1, 2018, the commissioner of the department of social services shall submit to the mayor and the speaker of the council, and post online, a comprehensive opioid overdose training plan for such residents. Such plan shall include, but need not be limited to:

- a) Strategies for the agency to offer opioid antagonist administration training to such residents of HASA facilities;
- b) Information on how such residents will be informed about the availability of such training;
- c) Information specific to the availability of such training;
- d) Information specific to the availability of opioid antagonist at HASA facilities; and
- e) The date by which the implementation of such plan will commence.

This HRA HASA opioid antagonist administration training plan can be found [here](#).

The core components of these trainings include epidemiology of overdoses, type of opioids, how to identify an overdose and the use of naloxone to reverse opioid overdose. Individuals who successfully complete the training are State Certified Opioid Overdose Responders

To reduce the number of overdose deaths, beginning in December 2017, HASA started training facility staff routinely as trainers and responders. In April, 2018, HRA HASA implemented an opioid overdose training plan and overdose response policy, in accordance with LL225 of 2017. Since the beginning of FY 19 HRA HASA has trained 3,514 staff and facility residents. In Fiscal Year (FY) 2021 alone, HRA HASA trained 543 staff (Table 3). Due to the COVID pandemic and in accordance with NYSDOH guidance, in-person trainings were discontinued in March 2020. Web-based trainings were developed and implemented in FY 2021. HRA intends to return to in-person trainings as soon as the NYSDOH agrees it is safe. An opioid antagonist (naloxone) was administered 5 times to a facility resident in FY 2021 (Table 3)<sup>3</sup>.

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<sup>3</sup> Unlike many shelters for single adults, SRO emergency housing provides single adults enrolled in HASA a temporary private room to reside in. This privacy limits housing staff's ability to monitor and respond to overdose. Also, due to the stigma of substance use and perceived consequences, many HASA clients are reluctant to report use of Naloxone to DSS or housing staff.

<b>Table 3: Number of staff and residents trained in opioid antagonist (naloxone) administration and number of times naloxone was administered to a resident (FY21)</b>	
<b>Total individuals trained</b>	543
Number of <b>staff</b> who have completed an initial opioid antagonist administration training	229
Number of <b>staff</b> who have completed <b>refresher training</b>	314
Number of <b>facility residents</b> who have completed opioid antagonist administration training <sup>4</sup>	0
<b>Number of times opioid antagonist was administered to a facility resident</b>	5

#### **HRA COVID-19 Pandemic Virtual Training for HRA/HASA**

Virtual Narcan trainings are being offered and provided via Zoom platform to HASA and contracted staff so that they can respond to Opioid Overdose Reversals. These responder trainings include education on overdose risks, assessment, response, and administration of intra-nasal naloxone.

- Virtual Narcan trainings are also offered and provided to the following:
  - All Serviceline staff, Directors, Supervisor Level II staff, Credentialed Alcohol and Substance Abuse Counselors (CASAC's) and other HASA volunteer staff in the Centers.
  - HASA emergency transitional housing staff and clients.
  - HASA emergency SRO housing staff and clients.
  - HASA congregate housing staff and clients.
- Participants that successfully complete training are shipped a Narcan kit and Certificate of Completion card.

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<sup>4</sup> Due to the COVID-19 Pandemic, social distancing guidelines and since training for clients is voluntary, no clients participated in this training for this report timeframe.