

Recovery Opioid Overdose Team Plus (ROOT+)

A Peer-Led Program for Engaging with People impacted by opioid overdose



ROOT+ Implementation Challenges and Recommendations

Delays in ROOT+ Referrals

Majority of ROOT+ referrals are from EMS (n=383; 63%), but delays exist when received through other community agencies

Solutions:

- Direct activation line created through Home of New Vision (HNV) Engagement Center
- Daily automation of EMS referrals



Need for Greater Awareness of ROOT+

With higher rates of staff turnover in different hospitals and agencies, training and re-training is needed for new and existing staff

Solutions:

- Redistribute ROOT+ materials to Emergency Department (ED) staff
- Provide education about ROOT+ to new police officers
- Report ROOT+ outcomes to stakeholders
- Continue to engage Washtenaw County through community outreach and trainings



Barriers to Client Engagement

- Clients lack access to working phones and housing
- Clients experience personal guilt and negative stereotypes about drug use in healthcare and community settings

Solutions:

- Need additional resources for phones, housing, and transportation
- Meet clients in the ED to establish connection and collect detailed contact information
- Utilize family recovery coaching services to support families
- Continue to use peers with lived experience to conduct outreach and engage with clients using a nonjudgmental approach
- Increase racial/ethnic diversity of peer recovery coaches
- Meet clients where they are in their drug use and recovery journey



Treatment Access Barriers

- Accessing and getting approved for treatment is completed through a phone
- Long wait times for a bed in inpatient/residential facilities
- Repeated questions by different providers cause emotional strain on the clients who are experiencing withdrawal
- Few treatment services accommodate medications for opioid use disorder (MOUD)
- Confusing system to navigate for people who do not have working phones, or do not answer their phones at the time when accessing treatment

Solutions:

- HNV Engagement Center has a bed available to ROOT+ clients
- ROOT+ Peer Recovery Coaches can help clients navigate the treatment system but quicker and efficient authorization process is needed (ie 24 hour treatment access line)



Key Points

1. Providing care through **harm reduction approach** allows for peers to be **effective in engaging** with people who are using drugs
2. Improving systems of care for people with substance use disorders (SUDs) is needed, but **achievable**
3. **Greater social resources are needed** for better engagement

Stakeholder Interviews

- Aug-Oct 2022
- 15 ZOOM interviews
ROOT+ team, police, hospital ED staff, EMS, and family of people with SUDs

Voices From the Front Lines



“One of the things that has made our **team really successful** is, **beyond just working one-on-one with clients**, they do a really good job at **educating the community**. So every single month, they're out on the street distributing Narcan and telling people what the signs of an overdose look like... And **overdose doesn't just impact the individual that we're serving, it impacts the whole community.**” ROOT+ Team

Value of Peer Recovery Coaches

“I try to let them know...we are the same person. I'm not above you or better than you in any way. I just figured out how to stop through the help of other people. And that's the **big thing is that you're not gonna quit using drugs unless you have support**. Nobody gets sober by themselves. It **doesn't matter what pathway you choose, but you have to have supports. So I try to be that.**” - ROOT+ Team



“I think just that respect for a lived experience, they're like, “Oh, you've never lived this. You don't understand,” despite this being what I do every day and that's okay, **I don't have that lived experience, and so I think the peer and the clinical partner really work well together to better serve these patients.**” - Social Worker

Referrals Delays



“I think our biggest challenge is still delays in notification, especially for responding to the local EDs (emergency departments). It happens regularly that we will be notified as the person is being discharged, so that way we're not able to ... meet them in the hospital to see them. So, increasing or speeding up the time in which people contact us would definitely improve our chances of meeting them in the hospital.” - ROOT+ Team

Engagement and Treatment Barriers

“You have to call the Access line, hope that there's someone available for authorization. If not, the [patient] has to call back...And then even once [treatment] is authorized, [finding] a facility with an available bed, that's often like a three to five-day process... and **if patient doesn't need to be admitted medically, what are they supposed to do for three to five days?**” - Social Worker



“The biggest barrier is communication. **Having a phone that works**, that's in service all the time. That's something we run into a lot. Or the person might just not have a phone at all...So, I know I've had really good engagement with people in the community or in the hospital and then I try to call them to do the follow up, to confirm that we're meeting, and it's like radio silence.” - ROOT+ Team

“90% of the people who we deal with who are using are either homeless or like shacking on people's couches, like they don't actually have a place to call their own. And with that, one of the first things they lose out on is their cell phone, so I think they have a really difficult time staying in contact with ROOT because they have no way to reach you.” - Police



Impact of ROOT+



“I chopped out certain bits [of the ROOT+ evaluation report] and we put 'em through our organization channels to communicate with people, just to bring awareness to the impact that the partnership is having, and for me..., it was just inspiring... Just motivation, it's like, yeah, **we're [EMS] making a difference.**” -EMS

“We have all the resources that we could think of in the Washtenaw County area to help people because Home of New Vision believes in multiple pathways and in harm reduction. Here's needle exchange services, fentanyl testing strips...I called a client and **he wanted Narcan and fentanyl strips. Cool, I'm on my way; we just don't want people to die.**” -ROOT+ Team



“**Everybody's threshold for seeking help and being receptive to help is going to be different.** And what triggers one person to finally accept that help and move forward with recovery is totally different than what somebody else's is. And **even if by placing ten phone calls to ROOT, if it helps one person, then that's a positive thing. It's one person who might not have previously had that access to help or known that it existed**” - Police