



OVERDOSE PREVENTION IN TENNESSEE

2023/2024 ANNUAL REPORT

OVERDOSE RESPONSE COORDINATION OFFICE

Released May 2025



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The development of this report and the continued success of the Overdose Response Coordination Office (ORCO) at the Tennessee Department of Health (TDH) would not have been possible without the invaluable support and contributions of our dedicated partners and stakeholders. We sincerely thank the High Impact Area (HIA) Program staff and the leadership across the Regional and Local Health Departments for your unwavering commitment. We also thank TDH's Office of Informatics and Analytics (OIA), the Tennessee Department of Mental Health & Substance Abuse Services (TDMHSAS), and the Centers for Disease Control and Prevention (CDC) for their ongoing support and guidance.

We would also like to acknowledge and honor those living with substance use disorder and those with lived experience. Your resilience and strength are at the heart of our efforts, and we remain committed to supporting you in every step of the recovery journey.

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EXECUTIVE SUMMARY

This report summarizes the key overdose mortality statistics for TN and the programmatic accomplishment of TDH's ORCO for the first year of the Overdose Data to Action-States (OD2A-S) grant (September 2023 to August 2024) funded by the CDC.

Key Program Highlights

Multi-Sector Partnerships

- All five HIAs have a task force that includes various community partners.
- The HIA task forces had an average of **29 members** and **met at least 90 times**.

Overdose Monitoring and Response Plans (OMAR)

- All five HIAs have developed a detailed plan to monitor and respond to overdoses in the community.
- The HIA coordinators conducted **49 response activities and five tabletop exercises** during this reporting period.

Community Outreach, Prevention Education, and Naloxone Distribution

- The HIAs conducted **11 community outreach and prevention education (COPE) events** and participated in **105 non-COPE events**.
- Number of overdose prevention materials distributed by the HIAs: **16,913**
- Number of naloxone distributed: **21,680**
- Number of fentanyl test strips distributed: **23,259**

Linkage to Care

- Navigators in health departments across HIAs **contacted 212 clients** and **linked 174 clients** to treatment, harm reduction, or social services.
- In addition, the navigators distributed **174 naloxone boxes** and **80 fentanyl test strips** to their clients during this reporting period.
- Findhelpnowtn.org **onboarded 225 of 566 eligible treatment facilities** and received **3,225 visits** during the reporting period.

EXECUTIVE SUMMARY

Overdose Response in Emergency Departments

- Provided **technical guidance to 19 EDs or primary care providers to initiate treatment for substance use disorders**, and **22 EDs or primary care providers to initiate navigation services** at their facilities.
- **1,392 clients were successfully linked to care** by the navigators.

Care for Justice-Involved

- **101 clients enrolled** in the pretrial diversion program in Sullivan County.
- **100 clients enrolled in long-term navigation**, and **307 clients received their community re-entry plans** in the correctional setting navigation program in Washington County.
- **76 inmates enrolled** in medications for opioid use disorders (MOUD) in the Jefferson County Jail program.

Harm Reduction

- The SSPs **served 8,144** clients, including **808 new clients**.
- **380,088 used syringes** were collected, and **447,565 new syringes** were distributed.
- **901 clients** were referred to treatment and other services.
- Syringe testing program collected **393 syringes** and provided **lab results to 237 clients**.

Provider Education

- **11 quizzes** related to opioid prescribing, pain management, and overdose prevention were available through QuizTime.
- **2,201 providers** completed **opioid-related quizzes** during this reporting period.

Post-Overdose Response

- The Nashville-Davidson and Chattanooga-Hamilton post-overdose response programs have been concluded due to various barriers.

Learning Collaborative

- **Three learning collaboratives** were conducted – each had an **average of 42 attendees**.

INTRODUCTION

The Overdose Response Coordination Office (ORCO) at the Tennessee Department of Health (TDH) is dedicated to reducing overdoses and improving outcomes for individuals affected by substance use disorder (SUD) in Tennessee (TN). ORCO partners with individuals and community partners across TN, such as local/regional health departments, community organizations, prevention coalitions, and state agencies, to devise a locally tailored response to the growing burden of the overdose epidemic in TN. ORCO also monitors overdose trends around the state to inform and enhance program effectiveness. ORCO's mission is to implement and support actions across the public health continuum of care, including prevention, early diagnosis, treatment, and harm reduction in highly impacted areas (HIA) of TN. As such, ORCO oversees diverse programs in HIAs, including linkage to care, community and provider education, local data-to-action task forces, services for the justice-involved, naloxone distribution, learning collaboratives, and online and in-person resources to find help.



The Overdose Response Coordination Office strives to prevent overdoses and support communities impacted by overdose by overseeing grant-funded activities and working with local partners and collaborators across Tennessee.

We are pleased to present the annual report on the accomplishments of ORCO for the grant year of 2023/24. The program activities reported here were supported by the Overdose Data to Action-States (OD2A-S) grant of the Centers for Disease Control and Prevention (CDC). OD2A-S is a five-year grant for the period of 2023 to 2028 and is a continuation of CDC's first OD2A grant that was successfully implemented from 2019 to 2023.



This report presents ORCO's accomplishments for the first year of the Overdose Data to Action-States grant by the CDC. This includes activities conducted from September 2023 to August 2024.

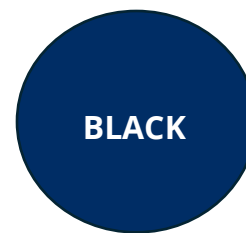
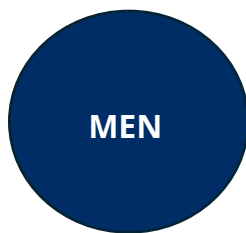
DRUG OVERDOSE IN TENNESSEE

The data presented in this section on the overview of drug overdose in TN was collected and maintained by our partners at the **Office of Informatics and Analytics (OIA) at TDH**. **OIA collaborates with ORCO under the CDC-funded OD2A-S grant and fulfills the overdose surveillance responsibilities for the grant.** For more detailed data, please refer to the 2023 *Tennessee Drug Overdose Deaths Report*¹ produced by the OIA.

Drug Overdose Deaths in 2023

In 2023, **3,616** Tennesseans died due to drug overdose.

In 2023, the **rate of drug overdoses** per 100,000 Tennesseans was **higher** among the Tennesseans who were:



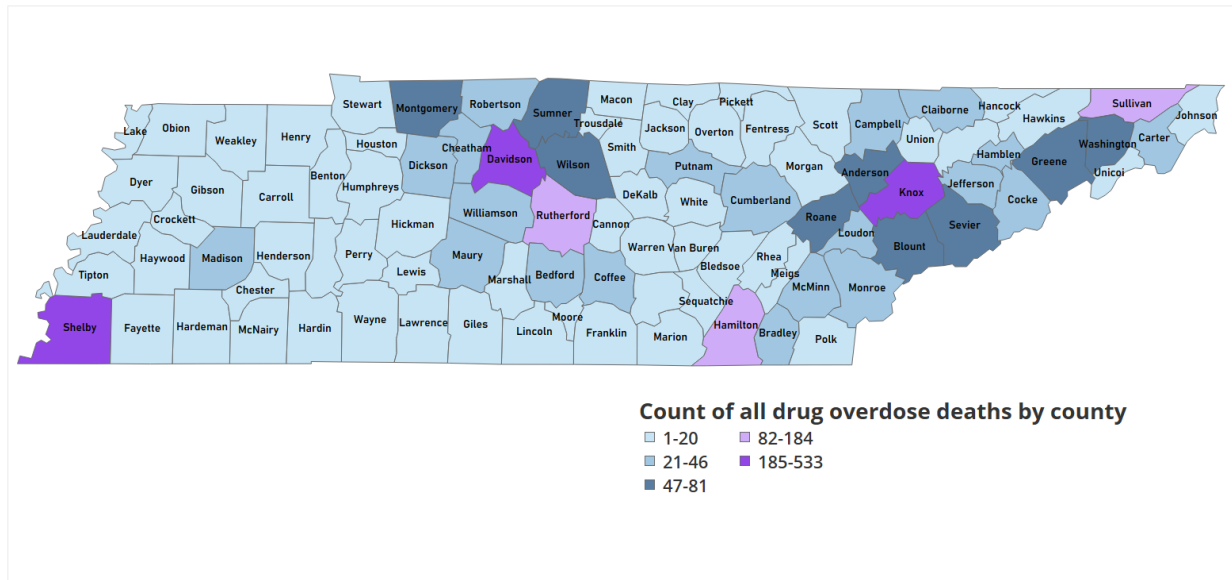
Age-Adjusted Rates of Overdose Deaths in the United States (US) vs TN in 2023



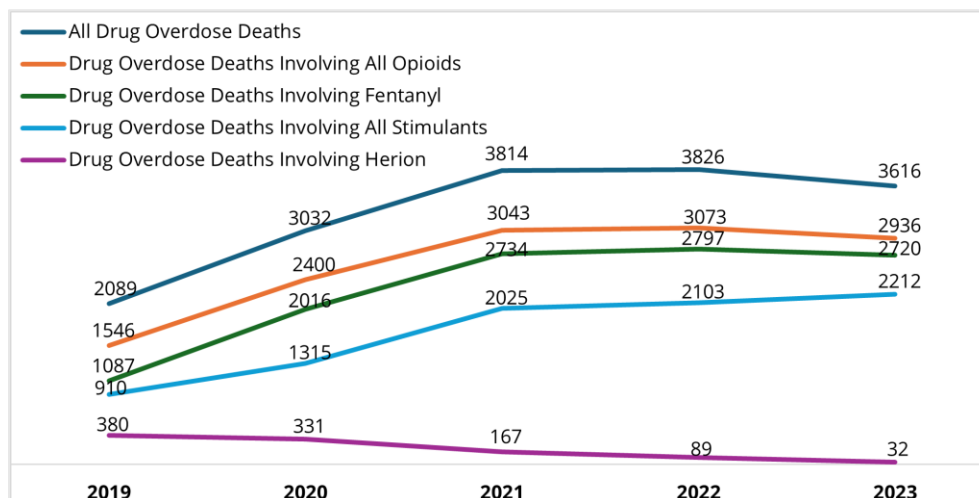
According to the CDC, in 2023, the rate of overdose deaths in TN was **57% higher** than the national rate. TN had the **fourth highest rate** in the US, right after the District of Columbia, West Virginia, and Delaware.²

DRUG OVERDOSE IN TENNESSEE

The Number of Drug Overdose Deaths in TN by Counties, 2023



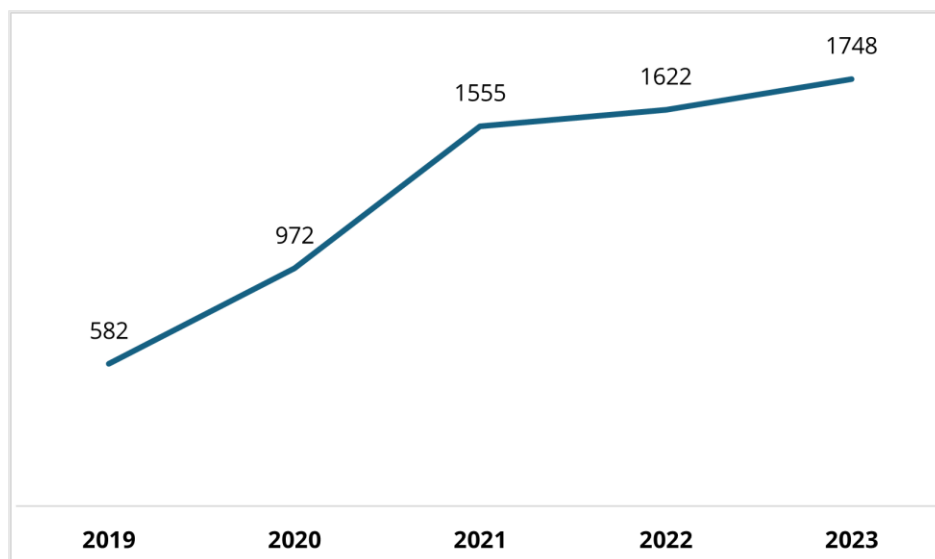
The Number of Drug Overdose Deaths by Substances Involved, 2019-2023



Opioids,
particularly
Fentanyl,
are the
primary
contributors
to drug
overdose
deaths.

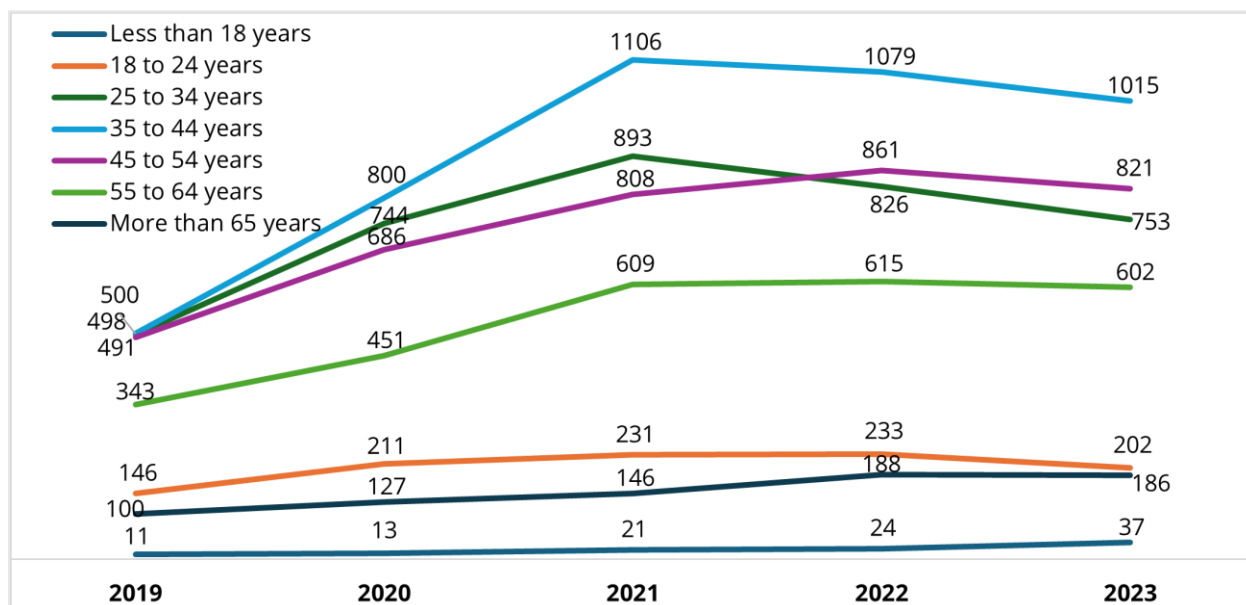
DRUG OVERDOSE IN TENNESSEE

The Number of Drug Overdose Deaths Involving Both Opioids and Stimulants, 2019-2023



From 2019 to 2023, the number of drug **overdose deaths involving both opioids and stimulants** increased by **200%**.

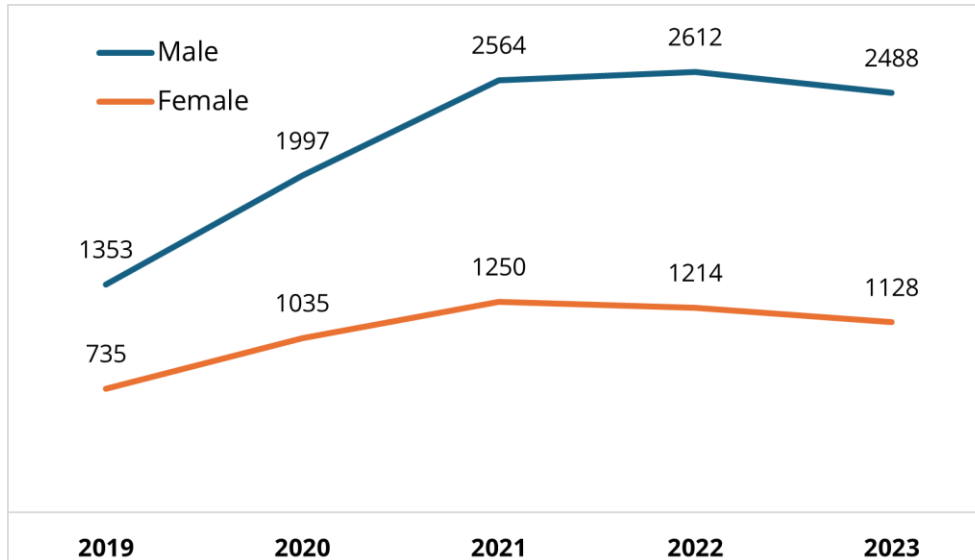
The Number of Drug Overdose Deaths by Age, 2019-2023



Middle-aged Tennesseans have the highest number of overdose deaths.

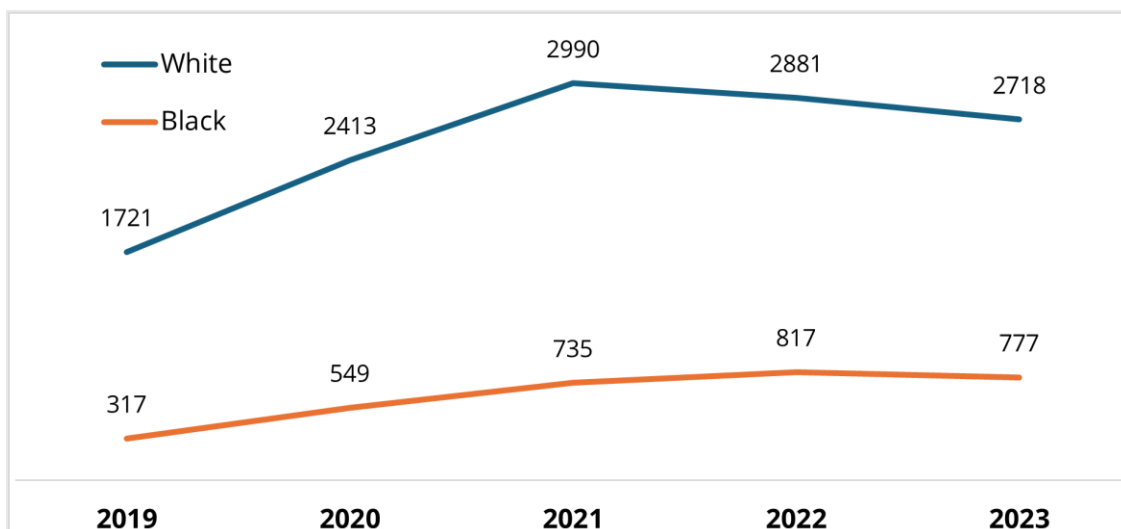
DRUG OVERDOSE IN TENNESSEE

The Number of Drug Overdose Deaths by Sex, 2019-2023



More men
die of
overdose in
TN
compared to
women.

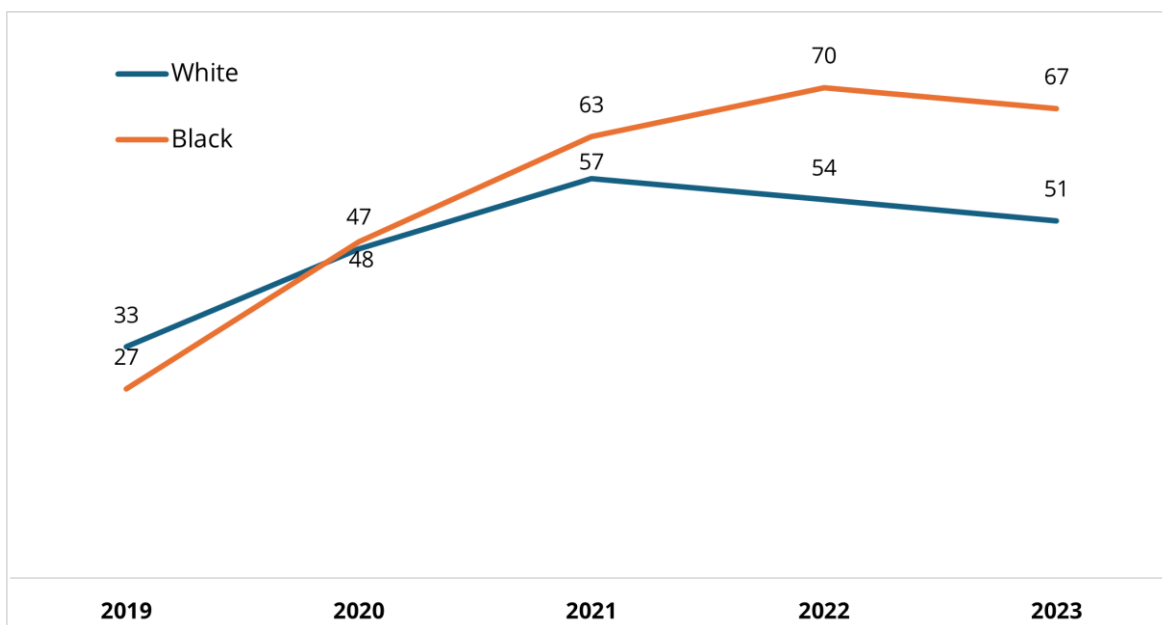
The Number of Drug Overdose Deaths by Race, 2019-2023



DRUG OVERDOSE IN TENNESSEE

While a higher number of White Tennesseans die of overdoses, **the rate of overdose deaths** per 100,000 population is **higher** for **Black Tennesseans compared to White Tennesseans**.

The Age Adjusted Rate of Drug Overdose Deaths (per 100,000) by Race, 2019-2023

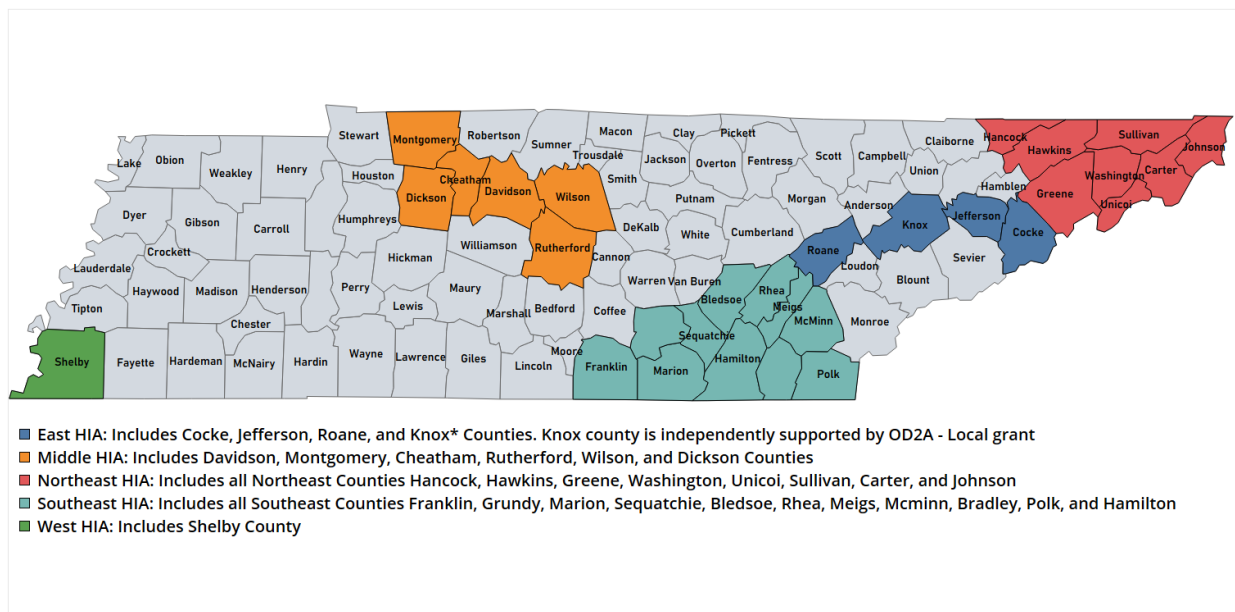


OVERVIEW OF HIGH IMPACT AREAS (HIA)

During the first OD2A grant cycle, ORCO identified geographic areas in TN that had a disproportionately higher burden of overdoses and designated them as the HIAs. Since then, ORCO has implemented various programs in these areas called the **high-impact area programs** that are led by the Substance Misuse Response Coordinators embedded in the regional or metro health departments. The HIA programs are **locally tailored overdose response programs** that aim to address the burden of substance use disorder holistically. The HIA programs work with communities to prevent and reduce overdoses. Currently, **five HIAs cover nine of the 13 public health jurisdictions** in TN.

Currently, the **HIA program implements more than 25 projects** covering many public health interventions across the continuum of care, such as screening for substance use disorder, linkage to care in various settings, overdose monitoring, community responses to overdose anomalies, and harm reduction services.

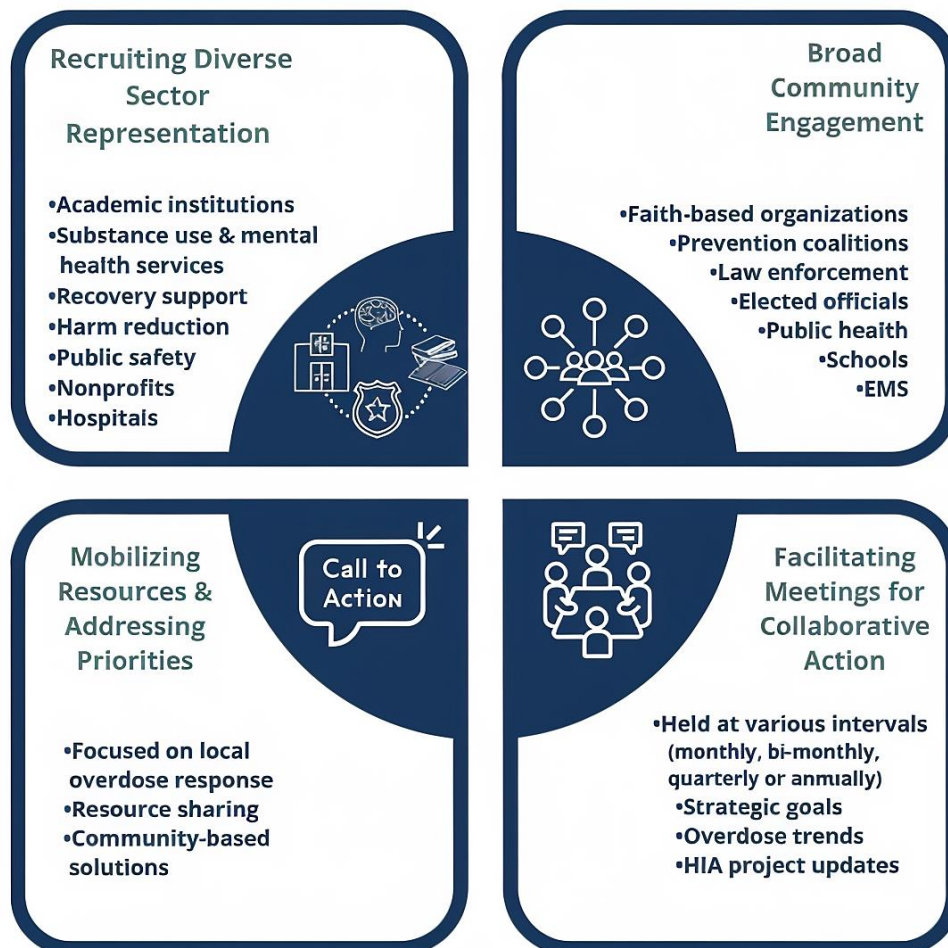
ORCO's High Impact Areas by Counties in 2023



PROGRAM ACCOMPLISHMENTS

1. Multi-sector partnerships

Each HIA has at least one multi-sector partnership/task force created to share data and identify locally tailored overdose responses. The West HIA had five task force committees to focus on different pillars of overdose response: data usage and integration, prevention education, treatment and recovery, first responders and law enforcement, and harm reduction. Similarly, the Middle HIA had three county-level data-to-action groups, each in the Wilson, Montgomery, and Cheatham counties. At the end of August 2024, the task forces across HIAs had an **average of 29 members**. The task forces across the HIAs **met at least 90 times** during the OD2A-S grant year (September 2023 to August 2024).



PROGRAM ACCOMPLISHMENTS

2. Overdose Monitoring and Response Plan (OMAR)

An OMAR plan has been implemented in all five high-impact areas. Under the OMAR plan, the high-impact area substance use coordinator, with support from an epidemiologist, monitors the overdose trends in their jurisdiction using data sets such as the Syndromic Surveillance and the Overdose Detection Mapping Application Program (ODMAP). When an abnormally high number of overdoses are reported for a jurisdiction, the coordinator and epidemiologist investigates further to identify geographic locations, trends, or clusters. The coordinators collaborate with their internal health department team and external partners when necessary, such as law enforcement and EMS, to verify the high counts of overdoses. Once this overdose event is confirmed, the coordinator mobilizes their task force or community partners to send an alert to the community and/or implement an acute response that could include community outreaches, public education, distribution of naloxone, and other harm reduction measures. The following diagram shows the general steps taken by the coordinators for OMAR.



During this reporting period, the HIAs conducted **49 response activities** to overdoses in their communities.

They also conducted **five tabletop exercises** to update their OMAR plans.

The tabletop exercises were conducted in Cheatham, Johnson, Washington, Franklin, and Shelby counties and **involved 126 stakeholders and 54 community organizations**. During the tabletop exercises, community stakeholders, including public safety, public health entities, treatment providers, and prevention coalitions, came together to discuss their roles and responses during an acute response to overdoses. The coordinators used the feedback from these tabletop exercises to update the OMAR plans.

PROGRAM ACCOMPLISHMENTS

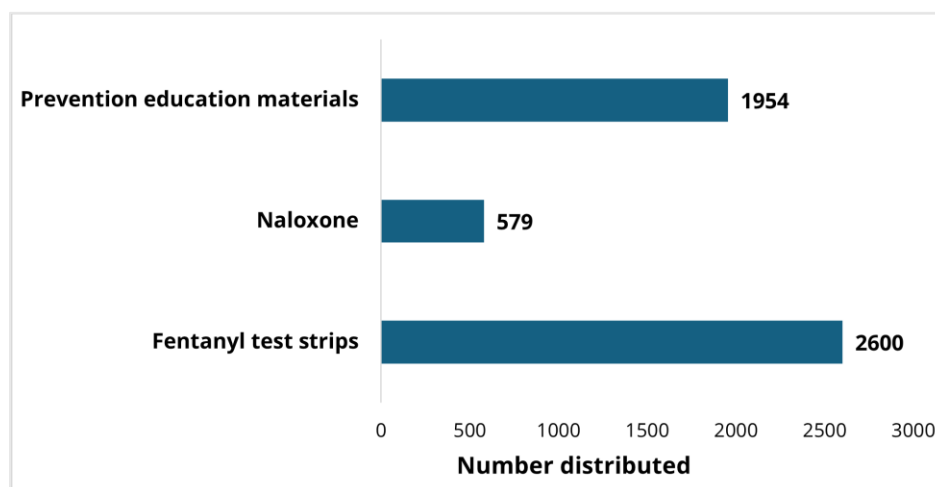
3. Community outreach, prevention education, and naloxone distribution

The following 4 broad categories of activities were conducted for community outreach, prevention education, and naloxone distribution.

A. Community Outreach and Prevention Education events (COPE)

The HIAs planned and implemented COPE events in the areas that were highly burdened by overdoses. The concept of the COPE event was inspired by the Street Team for Overdose Prevention (STOP) program, aimed at connecting those most at risk of overdose with treatment and harm reduction services, and the Strategic Team Accessing Recovery and Treatment (START) program, aimed at raising awareness about opioids and resources for treatment and recovery, conducted by the West HIA during the original OD2A grant (2019-2023). After noticing that the STOP and START events had high engagement, ORCO decided to adapt the program for all other HIAs. As such, the HIA coordinators used overdose data to identify hotspots for overdoses in their local communities and conducted an outreach event in the hotspot in collaboration with community partners such as the prevention coalitions, local health departments, safe syringe programs, regional overdose prevention specialists (ROPS), and treatment facilities. The outreach events provided prevention education, distributed naloxone and fentanyl test strips, and referred interested individuals to the navigators.

During this reporting period, **11 COPE events** were conducted by the HIAs.

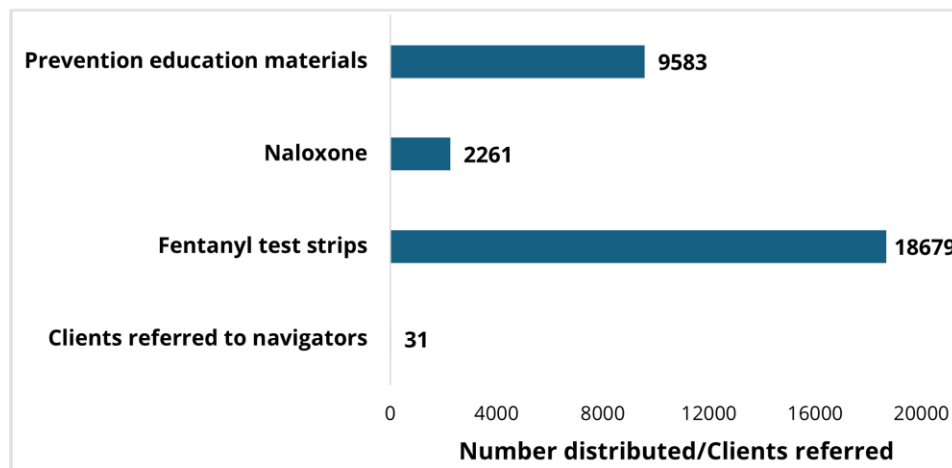


PROGRAM ACCOMPLISHMENTS

B. Non-COPE outreach

The HIA coordinators and navigators also actively participated in other community events organized by their partners. These events included, but were not limited to, vaccine clinics, visits to homeless encampments, recovery festivals, community meetings, health fairs, and school events.

During this reporting period, the HIA coordinators and navigators attended **105 non-COPE events**.



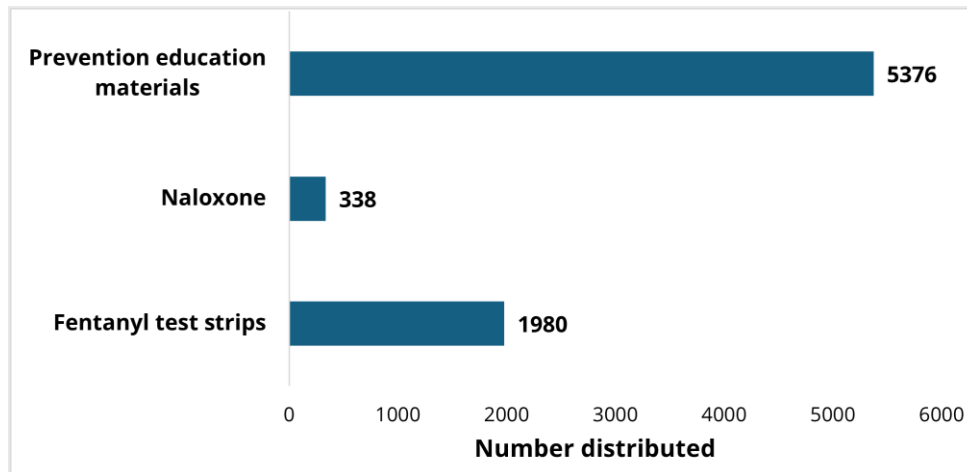
C. Partner outreach

The HIA coordinators also conducted outreach to their community partners/stakeholders to build new relationships or strengthen existing ones. The HIAs were particularly focused on partners that work with hard-to-reach populations, such as the homeless individuals, teenagers, pregnant women, and individuals involved with the justice system.

The HIAs supported their partners by providing overdose education, and sharing educational materials, naloxone, and fentanyl test strips.

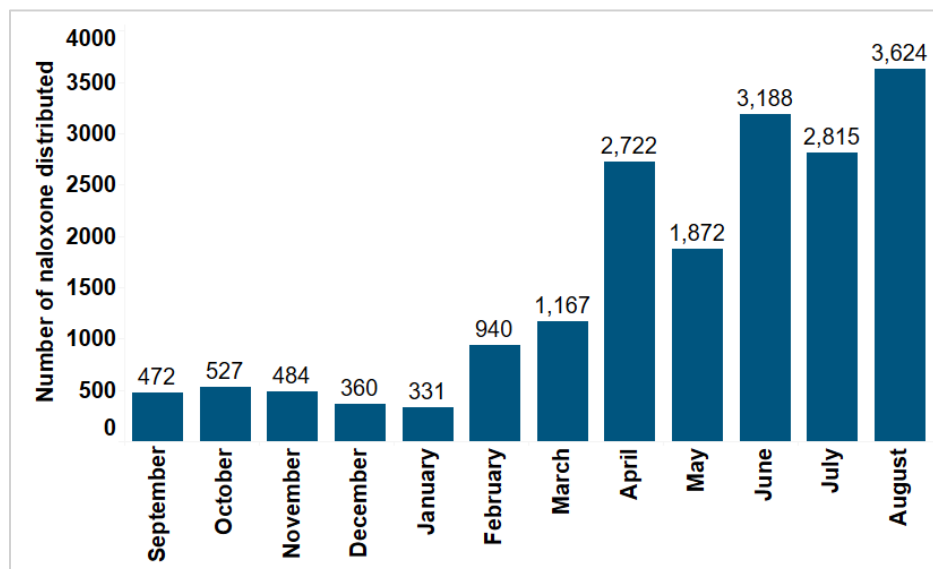
PROGRAM ACCOMPLISHMENTS

During this reporting period, the HIA coordinators **provided 29 educational presentations**. A total of **1,166 individuals attended** these presentations.



D. Naloxone distribution by the health departments

Naloxone is available for those in need in **92 out of 95 health departments** across TN. From September 2023 to August 2024, **18,502 naloxone boxes were distributed** by the health departments. The chart below shows the monthly distribution of naloxone from the health departments during this reporting period.



PROGRAM ACCOMPLISHMENTS

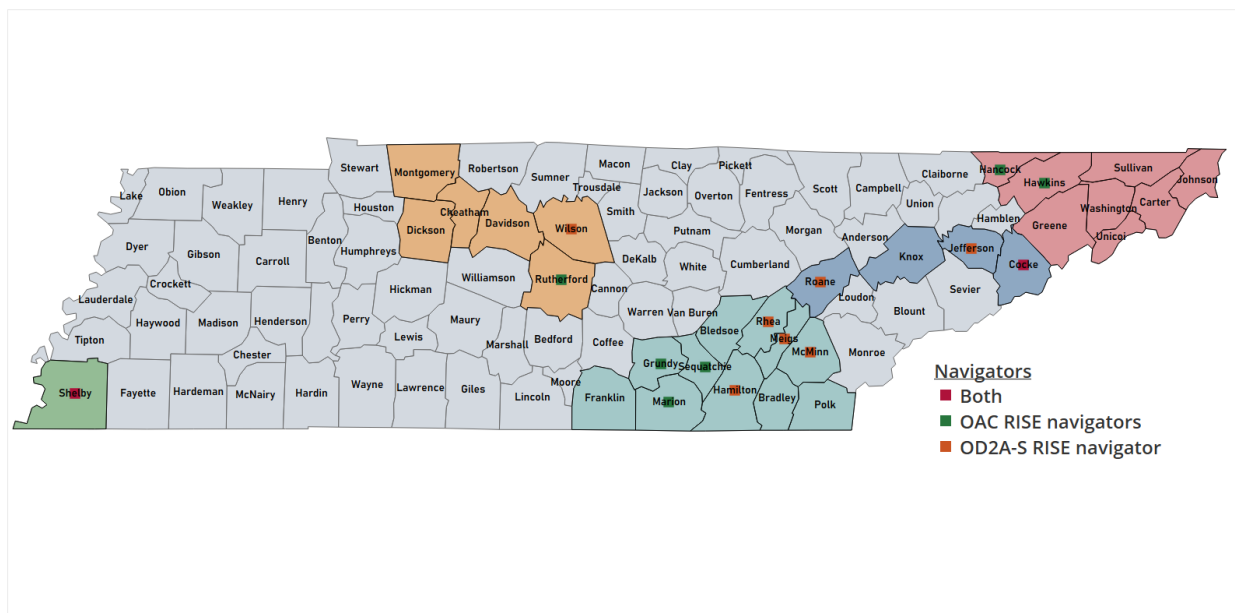
4. Linkage to care

Under linkage to care, ORCO supported navigators in various settings, including health departments, emergency departments, and correctional settings. In this section, we elaborate on the activities conducted by the navigators placed in the health departments across the HIAs. The activities conducted by the navigators in emergency departments and correctional settings are elaborated in the sections that follow.

In addition, under linkage to care services, ORCO also supported Find Help Now, an online treatment locator.

A. Navigation in health departments

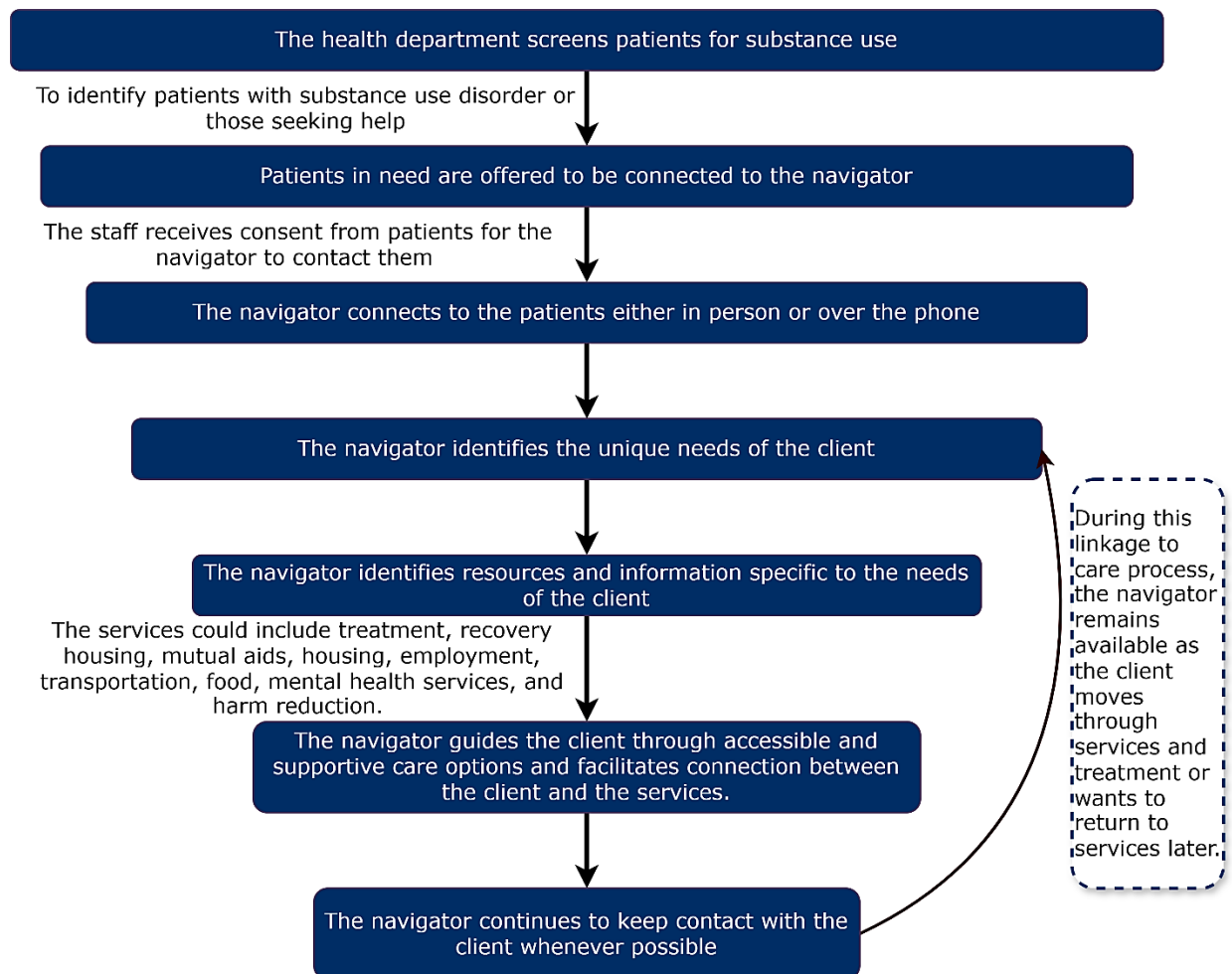
ORCO **supported 5 RISE (Recovery, Information, Support, and Engagement) navigators** in health departments across the HIAs through the OD2A-S grant during this reporting period. The goal of the RISE navigators is to fill gaps in access to treatment, harm reduction, and social services by facilitating substance use disorder screenings and connecting individuals to essential services, a process known as linkage to care. In 2025, ORCO plans to **add five RISE navigators** to provide services in eight counties across the HIAs with the support of an Opioid Abatement Council (OAC) community grant. The map below shows the location of the existing OD2A-S-supported RISE navigators and the ones that will be added in 2025 (OAC-supported).



PROGRAM ACCOMPLISHMENTS

Once a navigator is placed in a local health department, the participating health departments help to identify clients in need of navigation by screening patients using a validated screening tool (generally CAGE-Aid or similar tool).³

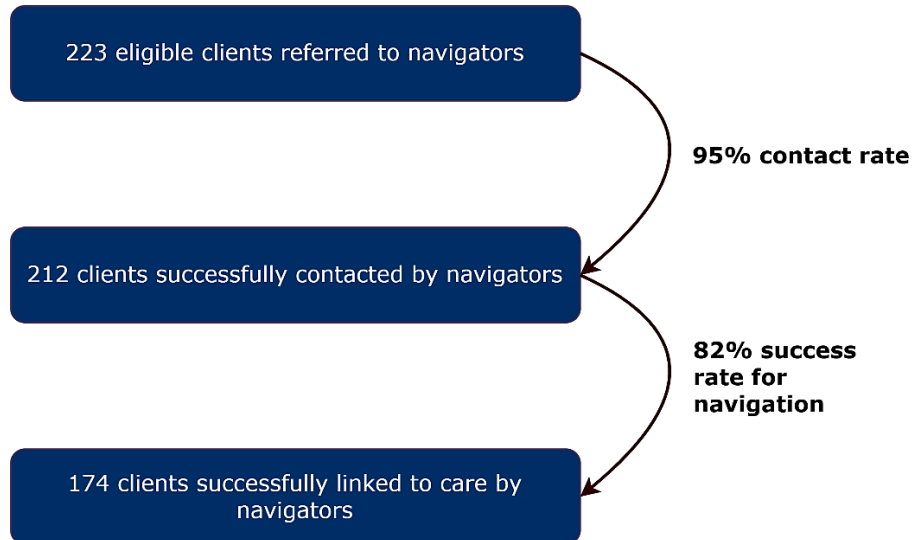
Generally, the following steps are undertaken for a successful navigation of clients in the health department:



In addition to the clients identified in the health department, the RISE navigators also work diligently to establish strong relationships with community organizations that could identify individuals in need and refer them to the navigators. Such community organizations could include churches, 12-step programs, correctional facilities, homeless shelters, and mutual aid.

PROGRAM ACCOMPLISHMENTS

The following chart shows the impact made by the RISE navigators, including both health department and community navigation, across the HIAs during this reporting period.



In addition, the navigators distributed **174 naloxone boxes** and **80 fentanyl test strips** to their clients during this reporting period.

“

I find it very helpful to let the client lead the interview while assessing them for supports and highlighting their strengths, even if the only strength they may have been that they are with you today, asking for help. I think it is important to make our navigation feel empowering and desirable for the client and without this type of client-centered interaction, navigation will be ineffectual.

”

- Caitlyn Tate, RISE Navigator, Southeast HIA






PROGRAM ACCOMPLISHMENTS

B. Find Help Now

FindHelpNowTN.org is a near real-time substance use disorder treatment locator that allows individuals to find treatment availability based on specific factors such as the type of treatment they need, the type of payment and insurance options, and their current location.⁴ The treatment facilities onboarded on FindHelpNow update the status of their residential, inpatient, and outpatient services regularly, ensuring that the visitors of the site receive the most up-to-date information on the availability of services.

FindHelpNowTN.org is a website created by the Kentucky Injury Prevention and Research Center (KIPRC) and customized for use in TN with the support of ORCO.

The following partners are responsible for making FindHelpNowTN.org possible:

Partners	Description
	The Kentucky Injury Prevention and Research Center (KIPRC) is a unique, state-university partnership between the Kentucky Department for Public Health and the University of Kentucky College of Public Health that provides KIPRC access to expertise and support in injury and violence-related research, data, services, outreach, communications, interventions, evaluation techniques, and policy development, at both the state government and academic levels.
	Tennessee Department of Health's Overdose Response Coordination Office's mission is to guide statewide overdose response efforts through improved coordination, collaboration, analysis, and advocacy to reduce the impact of the overdose epidemic in Tennessee.
	Tennessee Tech's iCube is a place where students and faculty imagine, inspire, and innovate, providing creative solutions to traditional problems through marketing, training, website and app development, public policy campaigns, and the application of emerging technologies, such as virtual reality.
	The Tennessee Department of Mental Health and Substance Use Services has a mission to create collaborative pathways to resiliency, recovery, and independence for Tennesseans living with mental illness and substance use disorders.
	The Tennessee REDLINE is the 24/7/365 resource for substance misuse treatment referrals. Anyone can call or text 800-889-9789 for confidential referrals.

PROGRAM ACCOMPLISHMENTS

During this reporting period:



225 eligible treatment facilities were **onboarded** to FindHelpNowTN.org.



There were **3,225 visits** to the site.

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PROGRAM ACCOMPLISHMENTS

5. Overdose response in emergency departments

ORCO supports overdose response programs in emergency departments (EDs) in the Middle HIA and the Southeast HIA. The overdose response programs are mainly focused on clinician education and linkage to care. In the Southeast HIA, this program is implemented as the Southeast Tennessee Emergency Departments Protocol for Substance Use Disorder (STEPS) project and **engages all 17 EDs in Southeast TN**. This project promotes the following 5 avenues among the collaborating EDs:

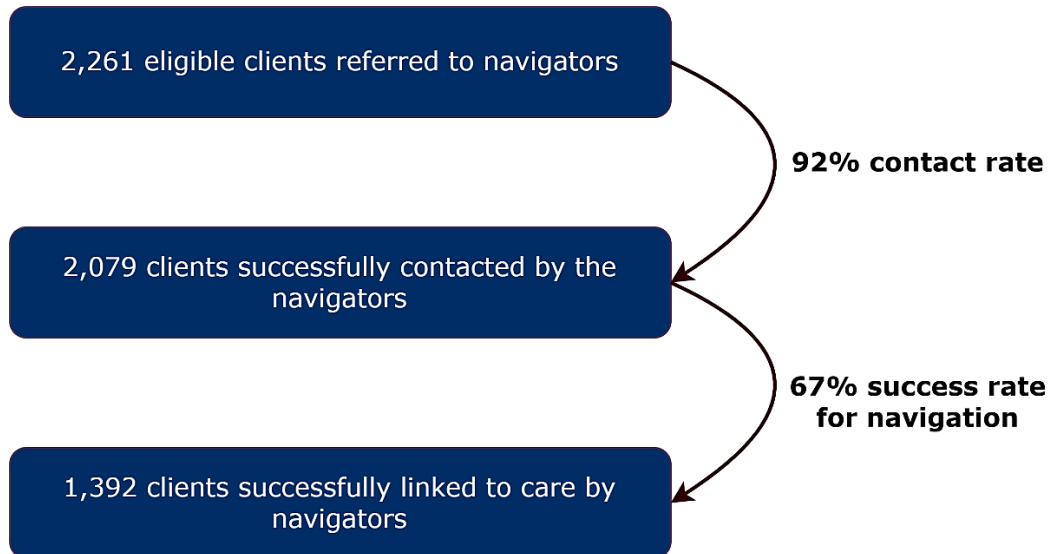
- 1) targeted screening for substance use disorder (SUD)/opioid use disorder (OUD),
- 2) provider-facilitated referrals,
- 3) peer navigation/linkage to care services,
- 4) access to naloxone (i.e., recovery kits at discharge from the ED), and
- 5) induction of medication for opioid use disorder (MOUD) for SUD/OUD when appropriate.

During this reporting period, the physician consultant associated with the STEPS project and the nurse practitioner in the Middle HIA provided **technical guidance to 19 EDs or primary care providers to initiate treatment for SUD/OUD**, and **22 EDs or primary care providers to initiate navigation services** at their facilities. The physician consultant and the nurse practitioner also provided **more than 30 educational training sessions and presentations to clinicians**.

For **linkage to care at the EDs**, at least **15 EDs in Southeast HIA** referred their patients who needed help with substance use to the STEPS navigators. The navigators associated with the STEPS project successfully **referred 894 patients** to treatment, harm reduction, or social services during the reporting period. The ORCO-supported navigator at the **St. Thomas Ascension Rutherford Hospital** ED in the middle HIA successfully **referred 498 patients** to treatment, harm reduction, or social services.

PROGRAM ACCOMPLISHMENTS

The following chart shows the impact made by the navigators at the EDs in both Southeast and Middle HIAs during this reporting period.



In addition, the navigators and staff of the overdose response at the ED programs supported by ORCO provided the following services during this reporting period.

Distributed **27 naloxone boxes and 20 fentanyl test strips** to their clients.

Distributed **320** prevention education materials.

Attended **226** community outreach events.

PROGRAM ACCOMPLISHMENTS

6. Care for justice-involved

ORCO supports three programs across HIAs that focus on the individuals involved with the justice system. These programs are currently implemented in the Northeast HIA and East HIA.

A. Pretrial diversion program in Sullivan County, Northeast TN

The pretrial diversion program is implemented by the **Sullivan County Anti-Drug (SCAD) Coalition**, a crucial partner of the Northeast HIA. At the end of this reporting period, the pretrial diversion program was implemented in **7 courts** across Northeast TN, **including 1 juvenile, 2 criminal, and 3 general sessions**.



The pretrial diversion program team coordinates alternative **treatment services for individuals engaged with the participating courts in place of jail time**. The success of this program relies on the collaboration with the following partners.

Mental Health Professionals

Judicial Staff

Certified Peer Recovery Specialists

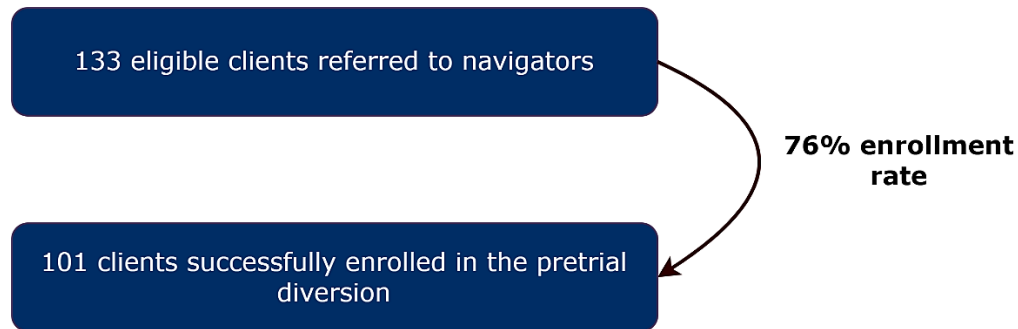
Faith-based Organizations

Jail Staff

Prevention Coalitions

PROGRAM ACCOMPLISHMENTS

The following chart shows the impact of the pretrial diversion program during this reporting period.



In addition, **28 clients completed** the pretrial diversion program during this reporting period, while **128 total clients were enrolled** in the program at the end of the reporting period.

“

One of our sessions court Judges recently expressed his gratitude for the pretrial program. He stated that prior to SCAD pretrial services, there was nothing available for individuals in sessions court who had substance use issues and wanted help. He appreciates having something in the way of help to offer folks, and he noted that the program is working.

- **Barbara Hale, Coordinator, Pretrial Diversion Program**

”

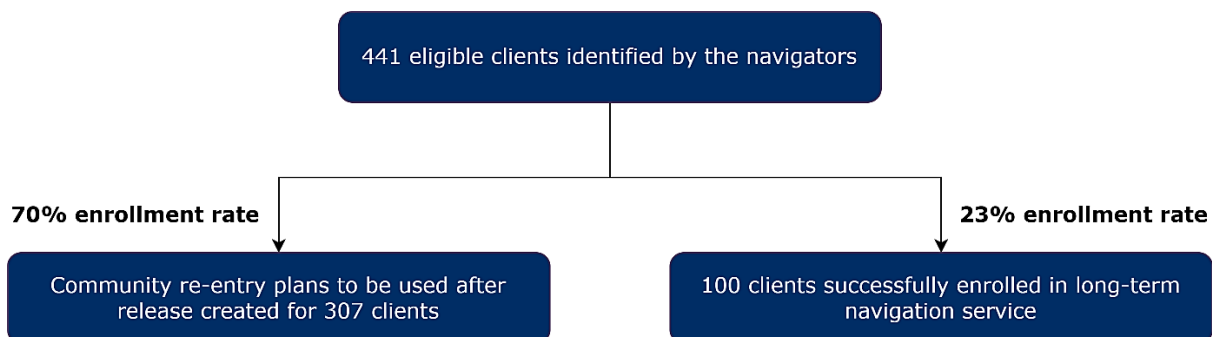
PROGRAM ACCOMPLISHMENTS

B. Correctional setting navigation in Washington County, Northeast TN

The corrections navigation program in Washington County is implemented by the **Insight Alliance**, another crucial partner of the Northeast HIA. During this reporting period, the program was implemented **in the Washington County Detention Center and the Women's Day Reporting Center**.

The program uses a screening tool, called the GAINS checklist⁵, to identify individuals in the correctional setting who need help with their substance use. If the identified clients consent, the navigators enroll them in the RESET program. Participants enrolled in the RESET program who are approaching release from jail receive community re-entry plans that include connection to treatment and recovery support services to assist in their return to the community.

The following chart shows the impact of the correctional setting navigation program during this reporting period.



“ We continue to receive an abundance of referrals, suggesting the need is only continuing to grow. We have seen a growth and expansion of consideration within the Washington County Detention Center. After years of service, we are evolving into a staple within our corrections institutions. These observations give both our participants and staff sincere hope that what we are doing is saving lives and expanding to accommodate better services for our participants, institutions, and community. ”

- **Jennifer Bervens, Director, Insight Alliance**

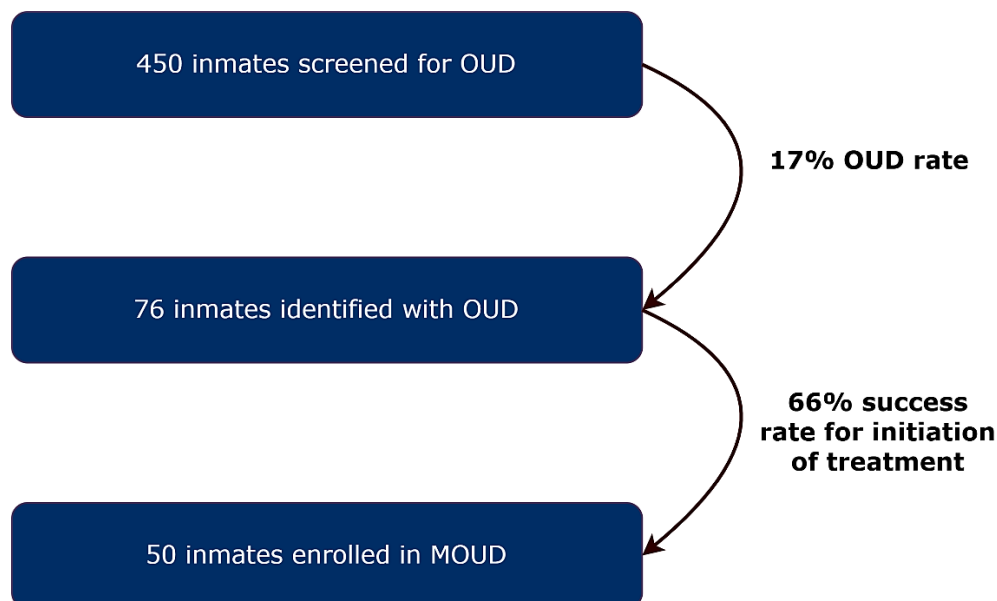
PROGRAM ACCOMPLISHMENTS

C. Medication for Opioid Use Disorder (MOUD) in Jefferson County Jail, East TN

The MOUD in the Jefferson County Jail program is implemented by **the McNabb Center**, a crucial partner of the East HIA. Under this program, the inmates at the Jefferson County Jail are **screened for OUD**, and those who are identified to have OUD and are willing to receive treatment are **initiated into MOUD**.

In addition to MOUD initiation in jail, the program strives to **decrease opioid-related overdoses post-release** by connecting the inmates to community resources before release to ensure continuity of care. This program also assists inmates in securing resources that support recovery after release, including housing and other social services.

The following chart shows the impact of the MOUD in the Jefferson County Jail program during this reporting period.



PROGRAM ACCOMPLISHMENTS

7. Harm reduction

Under harm reduction, ORCO supports the following two broad categories of activities.

A. Syringe Services Programs (SSPs)

Under the OD2A-S grant, ORCO supports the following SSPs in West and East HIAs.

- **A Betor Way (ABW), Shelby County, West HIA**
- **Memphis Area Prevention Coalition (MAPC), Shelby County, West HIA**
- **Choice Health Network (CHN), Cocke County, East HIA**

Services provided by SSPs aim to reduce harm, increase access to health services, and contribute to public health improvements. The SSPs provide harm reduction services **to reduce the negative effects of substance use disorders**, including:

- Free sterile needles, syringes, and injection supplies
- Safe disposal of used syringes
- Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV) testing
- Overdose prevention education and naloxone distribution
- Referrals to treatment, medical care, and social services
- Education on the prevention of HIV, Sexually Transmitted Infections (STIs), and HCV

The following table shows the impact of the SSPs during this reporting period.

SSPs	Total clients served	New clients served	Used syringes collected	New syringes distributed	Clients referred to treatment or other services
ABW	4,653	450	164,214	212,089	288
MAPC	2,578	229	121,762	132,235	578
CHN	913	129	94,112	103,241	35
Totals	8,144	808	380,088	447,565	901

PROGRAM ACCOMPLISHMENTS

In addition, the SSPs supported by ORCO provided the following services during this reporting period.

Distributed **11,089 naloxone boxes** to their clients.

Provided **drug-testing services to 551** clients.

B. Syringe Testing Program

The syringe testing program is designed to empower people who use drugs through the provision of drug-checking services. During this reporting period, ORCO piloted the syringe testing program in A Betor Way – one of the SSPs partnering with the West HIA. This program involves the collection and analysis of syringe samples, with results communicated back to participants to support informed decision-making regarding substance use. The success of this initiative relies on a collaborative partnership among the following agencies:

- A Betor Way, a Memphis based Syringe Service Program (SSP)
- TDH's Communicable and Environmental Diseases and Emergency Preparedness (CEDEP) End the Syndemic (ETS) team
- TDH's Office of Informatics and Analytics
- National Institute of Standards and Technology (NIST)
- Memphis Shelby Health Department (West HIA staff)

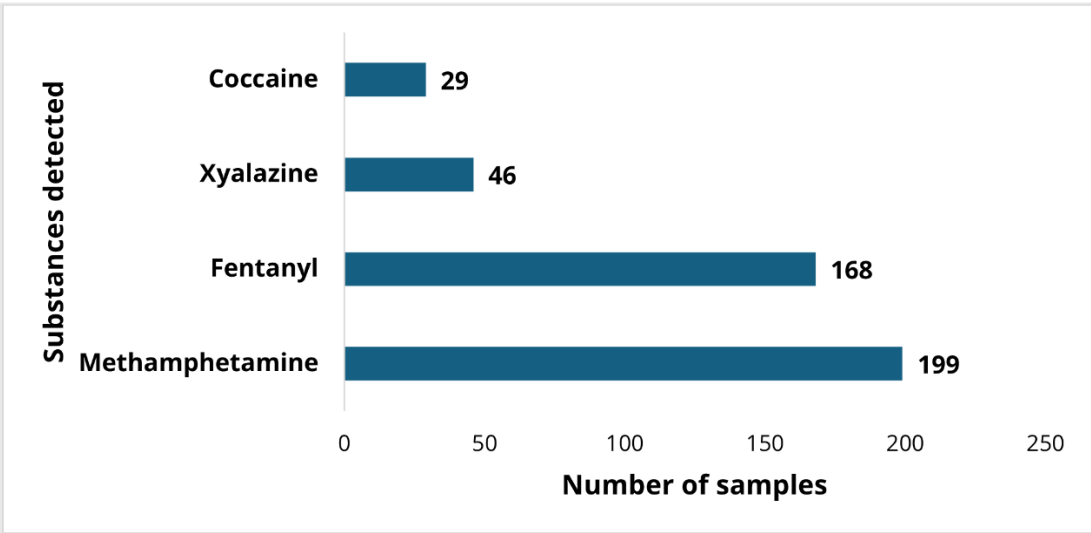
During this reporting period, **2 A Betor Way staff were trained** on the collection of syringes and shipping to the lab, and **1,054 A Betor Way Clients were offered** the syringe testing services. As such, a total of **393 syringes were collected** for testing, and **237 clients received their lab tests**.

PROGRAM ACCOMPLISHMENTS

Collected **393 syringes** from clients.

Provided **drug-testing lab results to 237** clients.

Some of the major substances detected by the drug testing program during the reporting period are shown below.



Note: Some samples detected multiple substances. Thus, the total number of samples for the substances detected is greater than the total samples collected.

PROGRAM ACCOMPLISHMENTS

8. Provider education

With continued support from ORCO, through OD2A-S, Vanderbilt University created **QUIZTIME**, a web-based learning application consisting of highly relevant content delivered one question per day.⁶ The QUIZTIME approach is a highly effective learning method, based on repetition and retrieval of core concepts spaced out over time. Studies using this spaced, retrieval-based approach to learning have shown superior knowledge retention and sustained performance improvement. This method is an effective way to deliver continuing medical education.

At the end of this reporting period, Vanderbilt was offering **11 quizzes** related to **opioid use, pain management, and management of substance use disorder in various populations.**

The following quizzes were offered through QUIZTIME during the first year of the OD2S-S grant. The current list of quizzes can be accessed here: [Tennessee Proper Prescribing Courses - CAMHL](#)

- Emergency Department Management of Patients with Opioid Use Disorder
- Preparing Educators to Help Save Lives: What you Should Know about Opioid Use and Adolescents, Parts 1 and 2
- Opioid Aberrancy: How to Detect and Respond to Opioid Misuse
- Opioid Issues in Behavioral Health
- Opioid Issues in Perinatal and Neonatal Care
- Opioid Issues: Preventing Opioid Deaths and Overdoses
- Opioid Misuse in Adolescent Populations
- Opioid Misuse in Geriatric Populations
- Opioid Fundamentals: General Knowledge
- Tennessee Opioid Prescribing Laws-Essentials for Providers and Dispensers

PROGRAM ACCOMPLISHMENTS

During this reporting period:



2,201 clinicians completed **opioid-related quizzes** in QUIZTIME.



1,838 clinicians claimed continuing education credits for the **opioid-related quizzes** in QUIZTIME.

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PROGRAM ACCOMPLISHMENTS

9. Post-overdose response

During this reporting period, ORCO supported the establishment of post-overdose response teams in:

- Nashville-Davidson (within Middle HIA) and
- Chattanooga-Hamilton (within the Southeast HIA)

The goal for the post-overdose response teams was to identify and engage with the patients treated for overdose by the emergency medical services (EMS) but refused hospital transport. Under these projects, the patients were to be identified in the EMS and law enforcement datasets and contacted by the navigators within 24-72 hours. The navigators would then offer to connect the clients to treatment, recovery, and harm reduction services. The initiative leveraged best practices from North Carolina and New York.

The key program partners for the Nashville post-overdose response project were the Nashville Fire Department (NFD-EMS) and the behavioral health provider, Mental Health Cooperative (MHC). The EMS Fire Captain identified and contacted patients treated by NFD-EMS for overdose within 72 hours and referred them to the navigators at MHC.

From September 2023 to August 2024, 2,103 patients were referred to EMS for potential navigation, and 1,355 attempts were made to contact those patients. Out of the 2,103 potential clients, 358 were reached by the EMS, and 24 were successfully referred to treatment, harm reduction, or social services. MHC also accepted referrals through sources other than the EMS, including the Nashville Police Department. An additional 176 patients were successfully contacted by MHC navigators, connecting 146 of those with in-house treatment services.

For the Chattanooga-Hamilton post-overdose response project, many barriers were experienced in establishing successful partnerships, which resulted in a significant delay of project initiation.

Despite strategic pivots, a successful implementation of these projects was not possible. As such, ORCO decided to **conclude both projects**.

PROGRAM ACCOMPLISHMENTS

Some of the barriers experienced during the implementation of the projects are listed below:

- Difficulties in establishing data sharing agreements between entities
- Lack of valid contact information for the clients encountered
- Low motivation among the clients successfully contacted to seek additional services
- Lack of trust among the clients
- Interruption in service delivery due to high staff turnover
- Lack of treatment beds available for under or uninsured clients
- Challenges related to transportation faced by the clients

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PROGRAM ACCOMPLISHMENTS

10. Learning collaborative

ORCO organizes a quarterly learning collaborative. In the learning collaborative, a subject matter expert presents on a topic relevant to the drug epidemic in TN. All HIA stakeholders and partners are invited to participate.



During this reporting period, ORCO conducted three learning collaboratives. The titles of the main presentations in those learning collaboratives are listed below:

- A Community Needs Assessment of Drug Use and Overdose Prevention, Treatment, Recovery, and Harm Reduction Services in Tennessee
 - Presented by the East Tennessee Addiction Science Center
- Vape Shop Products: An Evolving Threat to Public Health
 - Presented by the Center for Forensic Science Research and Education
- Language Matters: Shifting Words and Shrinking Stigma (a review of End the Syndemic Language Guidance⁷)
 - Presented by the TDH Communicable and Environmental Diseases and Emergency Preparedness (CEDEP) End the Syndemic Program

On average, **42 individuals** attended the learning collaboratives.

Those in ORCO-funded positions may also attend sessions hosted by the CDC's Division of Overdose Prevention Technical Assistance Center (DOP TAC).⁸ The sessions are open to collaborators of OD2A-S-funded projects.

RESOURCES

For individuals seeking help:

- To connect with ORCO's RISE (Recovery, Information, Support, and Engagement) Navigator in your area, visit [Linkage to Care](#).
- Visit your [Local Health Department](#) to access naloxone and other services.
- Visit [FindHelpNowTN.org](#) to access the substance use disorder treatment locator.
- [Tennessee REDLINE](#) is the 24/7/365 resource for substance misuse treatment referrals; call or text 800-889-9789 for confidential referrals.
- Click [Regional Overdose Prevention Specialists](#) for training on naloxone administration.
- Click to find information on Tennessee [Syringe Services Programs](#).

Help is available if you or someone you know is struggling with drug use.

To identify available resources, please visit:

www.tn.gov/health/orco

and select the "Looking for Help?" tab

Resources at TDH:

- Visit the [Overdose Response Coordination Office \(ORCO\)](#) to learn about projects and resources to reduce overdose burden in TN.
- Visit the [Data Dashboard](#) for statistics related to overdose in TN.
- Click on the link for [Fentanyl Information and Resources](#).
- Click on the link for [Buprenorphine Eligibility and Induction](#) Protocol for Clinicians in an Emergency setting.

National Resources:

- The [Center for Disease Control and Prevention](#) (CDC) Overdose Prevention website contains holistic information on overdose prevention.
- Visit [SAMHSA](#) website for availability of treatment and rehabilitative services.
- The [Overdose Response Strategy](#) (ORS), a unique public health-public safety partnership between the [High Intensity Drug Trafficking Area](#) (HIDTA) program and the CDC aims to reduce rates of fatal and non-fatal overdose by sharing data, intelligence, and innovative strategies.

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