

Naloxone + Opioid Response App (NORA)

The Naloxone + Opioid Response App (NORA) is a free interactive educational tool that will expand the understanding of what naloxone is and reinforce initial training given when a person fills their prescription for it.

The app:

- Provides resources for those interested in learning more about opioids
- Describes signs of an opioid overdose and how to respond
- Explains the protections offered by the Good Samaritan Law
- Provides information on proper storage and disposal
- Connects people to other resources to prevent overdose; and
- Helps find treatment and recovery supports

You can access the app at www.norasaves.com.

Contact our program for more information. www.norasaves.com

Good Samaritan Law

DPH is assessing the effectiveness and impact of CT's Opioid Good Samaritan Laws that:

- Provide immunity from criminal prosecution to the bystander seeking medical assistance or administering naloxone even if law enforcement finds scene evidence of drug use or controlled substances
- Allow pharmacists and health care professionals to prescribe and dispense naloxone, without fear of liability for damages or criminal prosecution or violating standards of care
- Improve access to naloxone for any person
- Improve the ability, opportunity, or willingness of a bystander to seek medical assistance or administer naloxone if they believe that someone is overdosing



Safe Use

- Tell your healthcare provider about all your meds
- Never share your prescriptions with anyone
- Never take medication not prescribed to you
- Never take your meds more often or in higher doses than prescribed
- Never drink alcohol while taking pain meds
- Taking prescription pain meds with sleep aids, anti-anxiety meds, or cold meds can be dangerous
- Properly dispose of all unused and expired meds

Safe Storage

- Keep prescriptions out of reach (kids, family, guests)
- Always know where your prescriptions are
- Keep prescriptions in original bottle with label attached, and child-resistant cap secured
- Keep track of how many pills are in your bottle so you are immediately aware if any are missing
- Dispose of all unused and expired meds properly

Safe Disposal at Home

- Do not flush or pour
- Take prescriptions out of original containers
- Crush/mix all unused drugs with substance such as wet coffee grounds, moist cat litter or spoiled food Put into new container and secure the lid with tape
- Throw container in trash on garbage collection day
- Conceal, remove and destroy ALL identifying information (prescription label) from containers before disposing

Medication Drop Boxes

In CT, there are designated areas (drop boxes) for safe disposal of medications. Community members looking to dispose of their unused medication are only required to leave their medication in its original bottle and cross out their names with a black permanent marker.

CDC Grant Award:
#6NU17CE925011

Last revised 2/23/2022

Overdose to Action (OD2A) Grant

CT INJURY AND VIOLENCE PREVENTION STRATEGIES



Our goal is to help the general public understand, prevent, and recover from substance use disorders.

Visit www.drugfreect.org for information about substance use disorders, links to resources, toolkit to personalize fliers and more.



IN PARTNERSHIP WITH

CT Department of Mental Health & Addiction Services (DMHAS)

CT Department of Correction (DOC)

CT Department of Consumer Protection



KEEPING CT HEALTHY

Focus of OD2A Grant – Prevention

- Increase effective prevention interventions that use surveillance data for designing, targeting, and monitoring; including prevention marketing campaigns and naloxone use training
- Implement health system interventions to:
 - Improve opioid prescribing; and,
 - Reduce opioid overdose mortality in the general population and in the criminal justice population
- Building state/local capacity to ensure linkages to care
- Currently fund projects through:

DCP	DOC	OCME	LHDs
DPH OEMS (SWORD)		UConn Health	
CT Poison Control Center		Yale School of Medicine	
Planned Parenthood		DPH State Public Health Lab	

- Funding 10 Local Health Depts. (LHDs) to integrate activities and build infrastructure
- Bi-monthly meetings with DPH and DMHAS local health grantees and an expanding pool of stakeholders to review initiatives, network, and provide support and education

Drug-related overdoses and deaths have worsened over the last decade even as opioid prescribing has declined by more than 44%, according to the AMA's "[2021 Overdose Epidemic Report](#)".

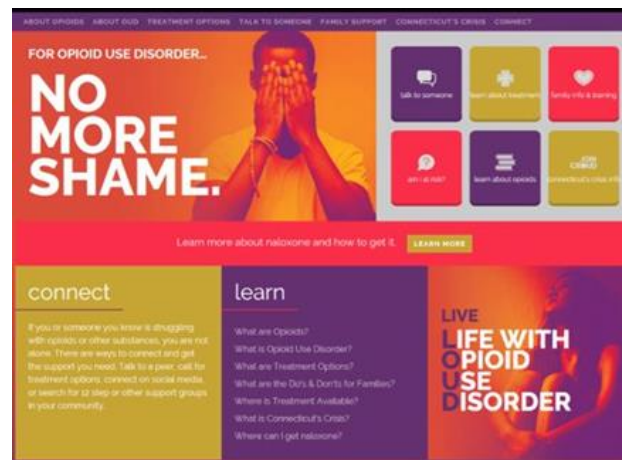
Illicit fentanyl, fentanyl analogs, methamphetamine and cocaine are driving drug-related overdose.

Any substance-use disorder is too often regarded as a moral failing or a sign of weakness," said Dr. Taylor, an addiction medicine physician. "Stigma doesn't just apply to having the illness—it's also tied to seeking and accessing treatment."

Certain stereotypes are often associated with opioids. This is another stigma, noted Dr. Taylor. The reality is that opioid-use disorder affects people from all walks of life, including the rich and famous.

WORDS NOT TO USE		WORDS TO USE
Addict User	Abuser Junkie	Person with opioid use disorder Person who uses drugs
Drug Habit Problem		Opioid or substance use disorder Regular, risky, heavy use
Clean Former Addict	Reformed	Person in recovery Abstinent Not actively using
Dirty		Actively using
Clean Drug Screen		Testing negative for substances
Dirty drug screen		Testing positive for substances
Substitution or Replacement Therapy		Treatment or medication for addiction
Relapse		Symptom Recurrence

Substance Use Disorder:
Defined as a primary, chronic brain disease characterized by compulsive substance seeking and use despite harmful circumstances, involving cycles of reoccurrence of symptoms and remission.



For more information, please call
The Office of Injury & Violence Prevention
(860) 509-8251

Overdose Prevention Strategies

Enhancing Prescription Monitoring Program:

- Ensure PDMPs are easy to use and accessible by providers
- Integrate PDMP with other health systems data; Integrate across state lines for interstate interoperability

Coordinating State & Local Health Prevention:

The OD2A in CT Communities project seeks to formally integrate state and local prevention and response efforts

Empowering Individuals to Make Safer Choices:

- Empower CT citizens to make safer choices by driving behavior change on naloxone use
- Address stigma surrounding opioid misuse, opioid use disorder, and help seeking/treatment
- Develop messages about fentanyl for those who use illicit drugs; encourage harm reduction strategies

Expanded & Planned Activities

- ❖ Automatic dispensing of MOUD to inmates through DOC facilities and linkage to care upon release
- ❖ Training in pain management
 - Primary care and dental providers
 - Through UConn Health; CT Comprehensive Pain Center; and UConn School of Dental Medicine
- ❖ Screening, Brief Intervention, and Treatment (SBIRT)
 - Through CT Planned Parenthood of Southern New England
 - Expand linkages to care
- ❖ Expansion of academic detailing visits to more LHD sites (Funded by DMHAS for sites/DPH for materials)
- ❖ Staff at OCME to manage family navigator program
- ❖ Planning emergency and public health preparedness exercise for local surge in ODs. Test OD response plans
- ❖ Enhancing Opioid and Substance Use Disorder Toolkit on the CT Association of Directors of Health website, for info on prevention activities and training for LHDs
- ❖ Overdose Fatality Review Panel