



## Recommendations for Overdose Prevention and Outreach Efforts during COVID-19

The Coronavirus Disease 2019 (COVID-19) poses challenges to engaging with overdose survivors and their social networks, while maintaining the physical distance necessary to reduce the spread of the disease. This document provides recommendations and resources for Post Overdose Support Team (POST) programs continuing their outreach during COVID-19.

This document compiles approaches that many POST programs have implemented, and covers:

1. Preparation and planning for outreach visits with team members
  - Staff testing protocols for POST members
2. Pre-visit work with survivors and their social networks
3. Transportation to the site
4. Engaging with clients, while protecting yourself and others
5. Transporting clients
6. Following up with clients
7. Training on how to respond to an overdose during COVID-19
8. Additional safety protocols and recommendations
  - Team member emotional health
  - Community emotional health
  - Other
9. Core COVID-19 resources for POST members

The primary audience for this document is POST team members, including public health partners, public safety partners, and other members of these outreach teams.

If you have any questions about any of the resources or live links included, or require any technical assistance, please reach out to the following POST Technical Assistance Center staff at EDC.

Meghan Hynes, Training and Technical Assistance Provider, [meghanhynes@edc.org](mailto:meghanhynes@edc.org)

Kate Lena, Training and Technical Assistance Provider, [klena@edc.org](mailto:klena@edc.org)

Noreen Burke, POST TA Center facilitator [nburke@edc.org](mailto:nburke@edc.org)



## 1. Preparation and planning for outreach visits with team members:

- Be prepared by staying current with COVID-19 updates and resources. COVID-19 updates and information are available [at Mass.gov Department of Public Health](#), and the [Centers for Disease Control and Prevention \(CDC\)](#).
- Conduct pre-outreach planning and post-outreach debriefing meetings with your POST team members by telephone or video conference.
- Review and revise existing Qualified Service Organization Agreements (QSOAs) between partner public safety departments and community-based programs, if needed.
- Ensure all partners understand communication and staffing plans. Outreach policies will need to be adjusted as new information and policies are developed.
- Anticipate team member absence and create staff contingency plans and testing protocols ([see detailed information below on staff testing protocols for POST members](#)).
- In accordance with [OSHA Guidance on Preparing Workplaces for COVID-19](#), the Department of Public Health recommends having these supplies on hand for all team members:
  - Alcohol-based hand sanitizers that contain at least 60% alcohol
  - Tissues
  - Trash baskets or bags
  - Cloth face coverings to cover nose and mouth
  - Disinfectant wipes or sprays
  - Biomedical waste containers
  - Naloxone rescue kits and related harm reduction supplies
  - If possible, it is advisable to wear an identification tag with a photo of your face to increase recognizability and comfort of the person you are visiting
- Communicate and cooperate with your local public health department in the case of suspected exposure. Find your local public health department listed [here](#).
- Refresh your knowledge of [42CFR](#) and other applicable policies.



### Staff testing protocols for POST members:

- Any POST member with COVID-19 symptoms should immediately self-isolate and arrange for testing. COVID-19 symptoms can include:
  - Fever, cough, shortness of breath, fatigue, body aches, headache, loss of taste or smell, sore throat, congestion, nausea or vomiting, and/or diarrhea
- If any POST member or program participant TESTS POSITIVE for COVID-19:
  - All team members who have had close contact with that individual should self-quarantine for 14 days and self-monitor and get tested
  - Close contact means 15 minutes of being within 6 feet of the person who tested positive *without proper Personal Protective Equipment (PPE)*
  - Testing can be arranged through healthcare providers and state/municipal testing sites.
  - [CDC recommends](#) that individuals who test positive should self-isolate for at least 10 days after receiving positive tests results (or 10 days after the onset of symptoms if no test was performed), and at least 1 day after symptoms have improved.
  - Comprehensive information about what you need to know about testing for COVID-19 in Massachusetts is available [here](#).
- Team members who have any symptoms of COVID-19 should stay home.
  - The Department of Public Health, in accordance with the Department of Labor Occupational Safety and Health Administration (OSHA) [Guidance on Preparing Workplaces for COVID-19](#), recommends that managers encourage their employees to monitor their health. Agencies are encouraged to ensure that their sick leave policies are flexible and consistent with this public health guidance, and that employees are aware of these policies.

### 2. Pre-visit work with survivors and their social networks:

- As much as possible, use telephone, text, video, and web to connect with the person who overdosed before going to their home.
- Stay up to date about what resources exist in your area, any changes in hours or services from local referral partners, and availability of telehealth services. Consider that people may not have access to technology and need to work with you to connect with their doctors or other providers.



- Stay up to date on where people can get tested for COVID-19 and know the guidelines for testing. Carry resources about COVID-19 testing and know where the nearest testing centers are located.

#### *Cultural Humility:*

- It has been [widely reported](#) that racial and ethnic health disparities have been exacerbated by the COVID-19 crisis. Employ extra cultural sensitivity and focus on person-centered approaches and strategies for outreach to our neighbors who are impacted by racial and ethnic health disparities. Ensure that community members are aware that your team is available to support them during this time. Explore areas to improve culturally and linguistically appropriate services ([CLAS](#)).

#### *You will likely be exchanging resources on visits and want to reduce the risk of infection.*

- Depending on staff capacity and ability to connect with individuals prior to outreach visits, provide a menu of resources. If you have already communicated with the person over the phone, text them the menu in advance with options for hygiene products, first aid materials, and harm reduction supplies. Assemble the custom orders pre-visit.

#### *Create standardized resource bags (hand sanitizer, Narcan, treatment resources, business cards, etc.) that you can bring to all outreach visits.*

- Prior to going out on outreach, you and your teammates will determine how many visits will be done on the outreach shift, and how many outreach kits you will need to bring.

### **3. Transportation to the site:**

- Use separate vehicles or means of transportation when traveling to and from an outreach visit.
- When taking separate vehicles is not possible:
  - Do not stay in the vehicle longer than necessary
  - Have the driver and all passengers wear face-coverings when in the vehicle
  - Ventilate the vehicle by opening the windows, if possible
  - Wipe down the vehicle surfaces, and perform hand hygiene, before and after the trip (More information on how to clean and disinfect a vehicle can be found [here](#).)
- Be mindful of bringing too much attention to any home or area where you are visiting.
- Make a parking plan with your teammates prior to the visit.



#### 4. Engaging with clients while protecting yourself and others during outreach visits:

*Always wear a cloth face covering that covers your mouth and nose while on outreach, and avoid close contact between yourself and others by keeping a minimum distance of 6 feet between you, the people you visit, and other team members.*

- When you meet people on outreach, explain that you are wearing cloth face-coverings and gloves for their protection, and to slow the spread of COVID-19. It is also recommended that you bring additional masks and hygiene products to the people you visit, in case they do not have them available.

*Minimize the number of staff members who have face-to-face interactions with clients.*

- In accordance with OSHA Guidance on Preparing Workplaces for COVID-19, you are recommended to minimize the number of staff members who have face-to-face interactions with clients. Do not bring more people to the door of a home than necessary.
- If possible, the harm reduction specialist(s) should conduct the outreach session, while the remainder of the team waits in/outside of their vehicles.

*Conduct the visit outside in the open air, such as on a porch, sidewalk, or a neutral neighborhood location. It is not recommended that you enter anyone's home at this time.*

- Ask if the person feels comfortable stepping outside of the house, or if they have a backyard or outdoor space that they can meet in.
- If the person is interested in following up or scheduling another time to talk, arrange a visit for a later date. This could include a zoom/facetime meeting, phone call or a meet-up outside the home, depending on what is most comfortable for people involved.

*Clean and disinfect:*

- [The CDC recommends](#) procuring wipeable covers for any electronics that may be shared and following manufacturer's instructions for disinfecting mobile devices before and after sharing them. You can find EPA recommendations for safe and effective disinfectant use [here](#). If no guidance is readily available, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.
- [The CDC recommends](#) that outreach staff launder uniforms, clothes, and cloth facemasks after use using the warmest appropriate water setting for the items and dry items completely.
- [The CDC recommends](#) that outreach staff avoid handling client belongings. If staff are handling client belongings, they should use disposable gloves, if available. Staff using gloves should be trained to [ensure proper use](#) and perform hand hygiene before and after use. If gloves are unavailable, staff should perform hand hygiene immediately after handling client belongings.



#### *Wash your hands often:*

- Wash your hands often with soap and water for at least 20 seconds, especially after you have been in a public place, blowing your nose, coughing, or sneezing.
- If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.
- Avoid touching your eyes, nose, and mouth with unwashed hands.

#### *Cover coughs and sneezes:*

- If you are around other people, and do not have your cloth face covering on, always cover your mouth and nose with a tissue or use the inside of your elbow when you cough or sneeze.

### **5. Transporting Clients:**

- Avoid transporting program participants when possible.
- If it is necessary to transport someone, [the CDC recommends](#) that you:
  - Do not remain in your vehicle or in any enclosed place with a participant longer than necessary.
  - Provide anyone you are transporting with a face covering. Everyone should be wearing face-coverings when in the vehicle.
  - Ventilate the vehicle by opening the windows, if possible.
  - Wipe down the vehicle surfaces before and after transporting the individual and perform hand hygiene. More information on how to clean and disinfect a vehicle can be found [here](#).

### **6. Following up with clients:**

- Delegate follow-ups to harm-reduction workers if they feel comfortable completing these follow-ups without the presence of public safety team members.
- Access to prescription medications could be limited for the people you are visiting:
  - Check-in with participants to ensure that they have regular access to any other medications they might need.
  - People may need more assistance with health navigation at this time.

### **7. Training people on how to respond to an overdose during COVID-19:**

- Review the DPH Bureau of Substance Addiction Services (BSAS) [guidance](#) on overdose response and COVID-19 transmission risk. This guidance is intended to supplement, not supplant, provisions from regulatory agencies that oversee programs licensed/contracted by BSAS.



- Rescue breathing is a highly effective overdose response strategy. However, there are risks of COVID-19 exposure that come with performing rescue breathing on someone who is overdosing. Please modify your training on overdose response to reflect these concerns.
  - For people who are either quarantining together, or frequently exposed to one another, such as family members, rescue breathing remains a recommended strategy for overdose response.
  - Include pocket CPR-masks or face-shields in the overdose prevention materials you drop off during the visit. Be sure to train people in their proper use and disposal. If people are uncomfortable doing rescue breathing during COVID-19, they should still administer the Narcan, and provide chest compressions if they are trained in how to do so.
- If possible, include vinyl gloves in overdose prevention kits. Instruct people to put on gloves before responding to an overdose and dispose them immediately afterwards. Ensure that the person knows proper glove removal techniques.
- Remind people to practice hand-hygiene after responding to an overdose. If you have access to individually packaged hand sanitizer, include them in your Narcan kits and instruct people to use them before and after responding to an overdose.
- All DPH-funded POST programs are also [Overdose Education and Naloxone Distribution \(OEND\) programs](#) and have the capacity to provide virtual overdose prevention and response trainings. Determine if there are POST team member staff, public safety staff, or other relevant community stakeholder groups that would benefit from an overdose prevention training refresher.

## 8. Additional Safety Protocols and Recommendations:

### Team Member Emotional Health:

- The Department of Public Health recommends that teams pay close attention to emotional health. Living and working through a pandemic can trigger a trauma response. Emotional reactions to stressful situations such as new viruses are expected. Remind staff that feeling sad, anxious, overwhelmed, or having trouble sleeping or other symptoms of distress is normal.
- Utilize clinical supervision where available. Encourage team members to be open and honest about their own limits and needs. Team members should also practice patience and kindness with their own teams.
- Practice regular debriefings with your team, checking in about the work, as well as general staff well-being.



- If symptoms of depression worsen, last longer than a month, or if a team member struggles to participate in their usual daily activities, have them reach out to supervisors and team members for support and help.
- If one is available, encourage employees to call their Employee Assistance Program. The National Disaster Distress Helpline is available with 24/7 emotional support and crisis counseling for anyone experiencing distress or other mental health concerns. Calls

(1-800-985-5990) and texts (text TalkWithUs to 66746) are answered by trained counselors who listen to your concerns and offer support and referrals to community resources for follow-up care and support. Further guidance on monitoring team members emotional health can be found [here](#).

### Community Emotional Health:

- Surviving an overdose can be emotionally overwhelming, for both for the person who overdosed, as well as their friends and family. Reactions may be even stronger due to the underlying stress of the COVID-19 pandemic.
- Work with outreach contacts to assess emotional support systems. Create safety plans together when appropriate.
- Check-in with your outreach contacts to see how they are doing. Let them know that it is normal to feel sad, anxious, overwhelmed, have trouble sleeping, or experience other symptoms of distress.
- Utilize clinical supervision for case-conferencing, and ongoing training for how to best support people, and their social networks, after an overdose.
- Compile a list of local behavioral health resources and services. Have lists ready to distribute on outreach.

### Other:

Prepare to help people access mobile phones and the internet. Connecting with people over the phone or internet is more important than ever. Several programs and organizations are offering mobile phone access including:

- [MassHealth Provider Resource: Telephone and Internet Connectivity for Telehealth](#) This document includes information on:
  - Lifeline Program - Subsidized Phone and Internet Service
  - COVID-19 Response from Broadband and Telephone Service Providers
- [Internet essentials from Comcast](#): Affordable Internet at Home for Eligible Households (**60 Day** access). After 60-days, families can cancel or will begin getting charged the monthly rate. Application for approval may take 7-10 days. For information in English call: 1-855-846-8376. For information in Spanish please call: 1-855-765-6995. You may qualify for internet essentials if:
  - You are eligible for public assistance programs such as the National School Lunch Program, Housing Assistance, Medicaid, SNAP, SSI, and others.





- You do not have outstanding debt to Comcast that is less than a year old. Families with outstanding debt more than one year old may still be eligible.
- You live in an area where Comcast Internet service is available but have not subscribed to it within the last 90 days.
- Free access to Spectrum Broadband and Wi-Fi For 60 Days For New K-12 and College Student Households (For more information, click [here](#)).

## CORE COVID-19 RESOURCES FOR POST MEMBERS:

### Centers for Disease Control and Prevention (CDC)

Centers for Disease Control and Prevention (CDC): Coronavirus (COVID-19)  
<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

Centers for Disease Control and Prevention (CDC): *What to Do If you are Sick*  
<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>

Centers for Disease Control and Prevention: *Interim Guidance on Unsheltered Homelessness* and Coronavirus Disease 2019 (COVID-19) for Homeless Service Providers and Local Officials. <https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html>

Centers for Disease Control and Prevention. *Infection Control. Standard Precautions* for All Patient Care. <https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html>

Centers for Disease Control and Prevention (CDC): *Use of a Cloth Face Coverings to Help Slow the Spread of COVID-19*.  
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Centers for Disease Control and Prevention (CDC): *Hand Hygiene in Healthcare Settings: Provider Infographic. Gloves are Not Enough. Wearing Gloves is NOT a substitute for cleaning your hands*. <https://www.cdc.gov/handhygiene/campaign/provider-infographic-6.html>

Centers for Disease Control and Prevention (CDC): *Cleaning and Disinfection for Non-emergency Transport Vehicles*. <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/disinfecting-transport-vehicles.html>



Centers for Disease Control (CDC): Coronavirus Disease 2019 (COVID-19). *Cleaning and Disinfecting Your Facility. Everyday Steps, Steps When Someone is Sick, and Considerations for Employers*  
<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

Centers for Disease Control and Prevention. *Infection Control. Standard Precautions for All Patient Care.* <https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html>

*How to Safely wear and remove cloth face coverings.* <https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-face-covering.pdf>

*How to safely remove gloves:* <https://www.cdc.gov/vhf/ebola/pdf/poster-how-to-remove-gloves.pdf>

#### **Charter Communications:**

Charter to Offer *Free Access to Spectrum Broadband and Wi-Fi for 60 Days* for New K-12 and College Student Households and More  
<https://corporate.charter.com/newsroom/charter-to-offer-free-access-to-spectrum-broadband-and-wifi-for-60-days-for-new-K12-and-college-student-households-and-more>

#### **Harm Reduction Coalition:**

*COVID-19 Resources:*  
<https://harmreduction.org/blog/covid-19-resources-for-people-who-use-drugs-and-people-vulnerable-to-structural-violence/>

**Internet Essentials from Comcast:** Affordable Internet at Home for Eligible Households  
<https://www.internetessentials.com/covid19>

#### **Legal Action Center:**

Toolkit. 42CFR Part 2 Fundamentals Training, (Deborah A. Reid and colleagues).  
<https://www.lac.org/resource/the-fundamentals-of-42-cfr-part-2>

#### **Massachusetts Department of Public Health (DPH):**

Mass.gov, Department of Public Health, *COVID-19 Updates and Information*,  
<https://www.mass.gov/info-details/covid-19-updates-and-information>

Mass.gov, Department of Public Health, *About COVID-19 Testing*,  
<https://www.mass.gov/info-details/about-covid-19-testing#contact>



Mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19.  
<https://www.mass.gov/resource/information-on-the-outbreak-of-coronavirus-disease-2019-covid-19>.

*Agency Based In-Home Caregivers & Workers* (e.g. Home Health Agencies, Personal Care Management Agencies, Home Care Agencies, Adult Foster Care, etc.) 2019 Novel Coronavirus (COVID-19) Guidance March 12, 2020  
<https://archives.lib.state.ma.us/bitstream/handle/2452/824665/on1145987856.pdf?sequence=1&isAllowed=y>

Massachusetts Department of Public Health (DPH) Bureau of Substance Addiction Services (BSAS). *Overdose response and COVID-19 Transmission Risk*. Deirdre Calvert, LICSW, Director of BSAS, June 4, 2020.  
[www.mass.gov/doc/overdose-response-and-covid-19-transmission-risk/download](http://www.mass.gov/doc/overdose-response-and-covid-19-transmission-risk/download)

Mass.gov, Department of Public Health (DPH), Bureau of Substance Addiction Services. How to get naloxone  
<https://www.mass.gov/service-details/how-to-get-naloxone>

Mass.gov, Department of Public Health (DPH), Office of Health Equity.  
<https://www.mass.gov/culturally-and-linguistically-appropriate-services-class-initiative>

#### **MassHealth:**

Mass Health Provider Resource Telephone and Internet Connectivity for Telehealth.  
Updated as of May 27, 2020

<https://www.mass.gov/doc/masshealth-provider-resource-telephone-and-internet-connectivity-for-telehealth/download>

#### **Police Assisted Addiction and Recovery Initiative (PAARI):**

<https://paariusa.org/>

#### **Guidance to optimize the Commonwealth's PPE supplies:**

<https://www.mass.gov/doc/ma-covid-19-ppe-guidelines-and-priorities-32220/download>

#### **Sani Singles:**

Single use hand sanitizing packets:

[http://sanisingles.com/?utm\\_source=google&utm\\_medium=cpc&utm\\_campaign=b2c&gclid=CjwKCAjwwMn1BRAUEiwAZ\\_inEmqGba67SCFsGjzblkMioQIsT\\_ZUZxawiTpoPvQXLwtzO1VydAMcqxoC-0AQAvd\\_BwE](http://sanisingles.com/?utm_source=google&utm_medium=cpc&utm_campaign=b2c&gclid=CjwKCAjwwMn1BRAUEiwAZ_inEmqGba67SCFsGjzblkMioQIsT_ZUZxawiTpoPvQXLwtzO1VydAMcqxoC-0AQAvd_BwE)



**Substance Abuse and Mental Health Services Administration (SAMHSA):**

SAMHSA Overdose Response *Guidance for First Responders*.

<https://www.samhsa.gov/sites/default/files/guidance-law-enforcement-first-responders-administering-naloxone.pdf>

**United States Environmental Protection Agency (EPA):**

United States Environmental Protection Agency (EPA) *6 Steps for Safe and Effective Disinfectant Use*. <https://www.epa.gov/sites/production/files/2020-04/documents/disinfectants-onepager.pdf>

United States Environmental Protection Agency (EPA) *approved disinfecting products*. <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

**United States Department of Labor, Occupational Safety and Health Administration:**

*Guidance on Preparing Workplaces for COVID-19*, U.S. Department of Labor, Occupational Safety and Health Administration, OSHA 3990-03-2020  
<https://www.osha.gov/Publications/OSHA3990.pdf>

OSHA *Guidelines for Emergency Response Workers and Employers*,  
<https://www.osha.gov/SLTC/COVID-19-19/emergency-response.html>

**WBUR News:**

Racial Disparities Continue Among Boston's Reported COVID-19 Cases. Shannon Dooling. Updated April 25, 2020.  
<https://www.wbur.org/news/2020/04/25/racial-disparities-among-bostons-reported-covid-19-cases>