

DAVID S. CASTLEMAN
CHIEF OF RESCUE
Office (904) 255-3302
E-Mail: DavidS@coj.net



515 N. Julia Street
Jacksonville Fire and Rescue
Jacksonville, FL 32202

CITY OF JACKSONVILLE • PROJECT SAVE LIVES STATUS REPORT

Through July 2021

PROJECT MANAGEMENT TEAM

NAME	ORGANIZATION	AREA OF RESPONSIBILITY
David Castleman, MPA, RPM	Jacksonville Fire and Rescue Department	Contract Administration
Dr. Raymond Pomm, MD	Gateway Community Services	Program Medical Director
Dr. F. Huson Gilberstadt, MD, FACEP	St. Vincent's / Ascension Health	Chief Clinical Officer
Courtney Robinson, LMHC	Gateway Community Services	Lead Care Coordinator
Rico Bodin, MS, LMHC, MCAP	Gateway Community Services	Peer Coordinator
Mark Rowley, BSN, RN, RPM	Jacksonville Fire and Rescue Department	Data & Reporting
Dr. Lori Bilello, PhD, MBA, MHS	UF College of Medicine – Jacksonville	Research and Analysis

PROJECT OBJECTIVE

The purpose of the Opioid Epidemic Project dubbed "Project Save Lives" is to establish a program within Duval County that provides specialized, coordinated, and seamless services for the treatment of drug addiction and substance misuse, thereby reducing dependence on drugs and alcohol and reducing drug-related deaths. The targeted services are provided by healthcare providers and include but are not limited to stabilization and treatment for withdrawal, connection to a Peer Specialist, medication assisted treatment and seamless transfer to detox/recovery services. Program services are currently provided through a partnership with the City of Jacksonville, Jacksonville Fire and Rescue Department, Gateway Community Services, St. Vincent's/Ascension Health, Memorial Hospital, Orange Park Medical Center, Baptist Health and UF Health.

PROJECT OPERATIONS

When overdose patients arrive at a participating hospital emergency department (ED), lifesaving stabilization is the priority. Once stabilized, patients are met by a Peer Specialist who is housed in the ED. The Peer Specialist establishes a rapport with the patient and works as part of the multidisciplinary healthcare team to aid in the early recognition and treatment of withdrawal symptoms. The Peer Specialist also offers recovery services as appropriate. Patients who elect to participate are provided transportation directly to Gateway Community Center or another local provider. Patients who refuse services are closely followed by a Peer and are offered Nasal NARCAN®. The continued follow up and connection encourages patients to enter treatment later. In addition to Peer Specialists being housed in the ED, the program also places Peers in the hospital and maternity units, functioning as Peer Navigators. This ensures that mothers and families of newborns with neonatal abstinence syndrome are provided a *Plan of Safe Care* to advance personal and family recovery and resiliency.

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PROJECT STATUS

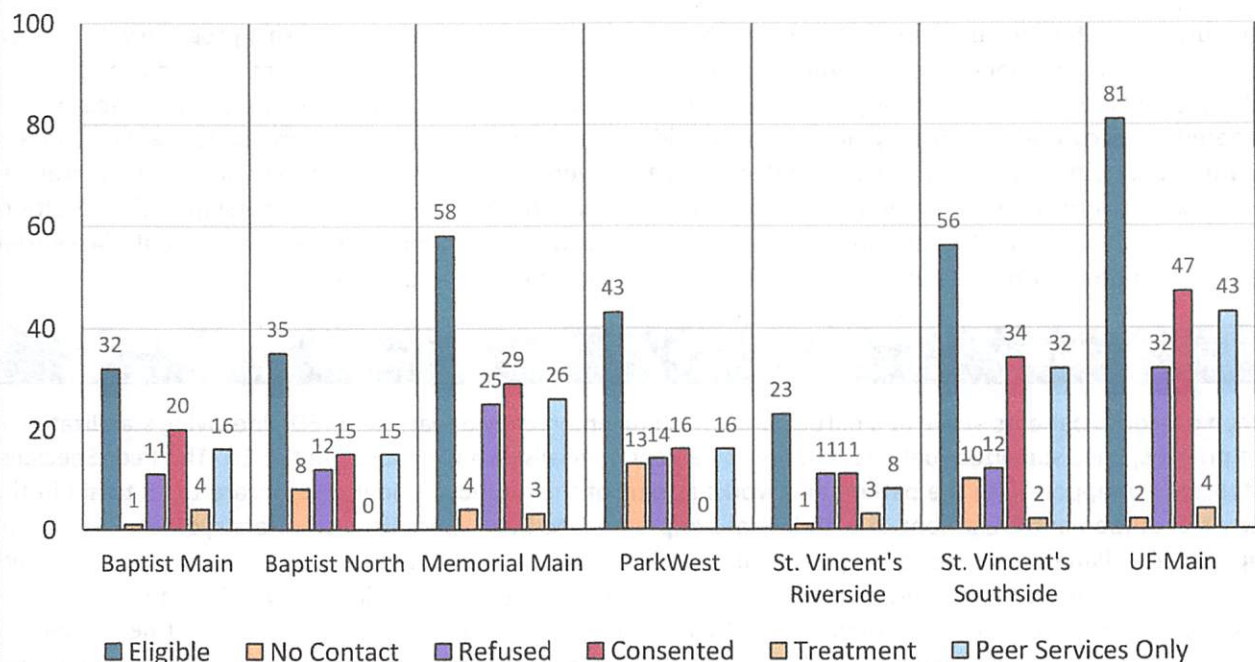
Project Save Lives began on November 16, 2017. Below is the activity for July 2021 and program totals.

DESCRIPTION	HOSPITAL							JULY 2021 TOTAL	PROGRAM TOTAL
	BM	BN	MM	PW	RS	SS	UF		
ELIGIBLE FOR SERVICES	32	35	58	43	23	56	81	328	7168
NO PROGRAM CONTACT	1	8	4	13	1	10	2	39	719
REFUSED ALL SERVICES	11	12	25	14	11	12	32	117	2978
CONSENTED TO SERVICES	20	15	29	16	11	34	47	172	3471
DRUG-RELATED DEATHS	0	0	0	0	0	0	0	0	9
TRADITIONAL TREATMENT	4	0	3	0	3	2	4	16	534
PEER SERVICES ONLY	16	15	26	16	8	32	43	156	2928

BM = Baptist Main, BN = Baptist North, MM = Memorial Main, PW = ParkWest, RS = St. Vincent's Riverside, SS = St. Vincent's Southside, UF = UF Main

PROJECT MONTHLY ACTIVITY

Project Save Lives - July 2021



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PROJECT OUTCOMES

Initial analysis revealed a 52% decrease in JFRD's overdose responses to program participants who accepted services in 2018. The analysis was performed by comparing the number of JFRD overdose responses to each participant for 12-months prior to accepting program services and 12-months post-services. The same analysis was conducted for participants who accepted services in 2019. The post analysis for the 2019 participant group ran through June 2020 (during the COVID-19 pandemic). While JFRD experienced a 27% spike in overdose calls to the general public, overdose responses to participants of Project Save Lives decreased by 28%. To better understand program outcomes, a comparative analysis was conducted in March 2020 between the program participant group and the non-participant group. The analysis was conducted by reviewing death records from the Florida Department of Health Vital Statistics Office, which demonstrated that persons who accept services from Project Save Lives had a lower death rate than persons who refused services. To date, there have been nine known drug-related deaths among program participants.

PROJECT FUNDING AND LEGISLATION

Project Save Lives is funded in part by the City of Jacksonville and by each participating hospital. The City's FY 2020/21 budget includes a line-item request for \$1,160, 999. The program also receives funding from the Florida Department of Health in Duval County's Overdose Data to Action grant (for Peer Navigators).

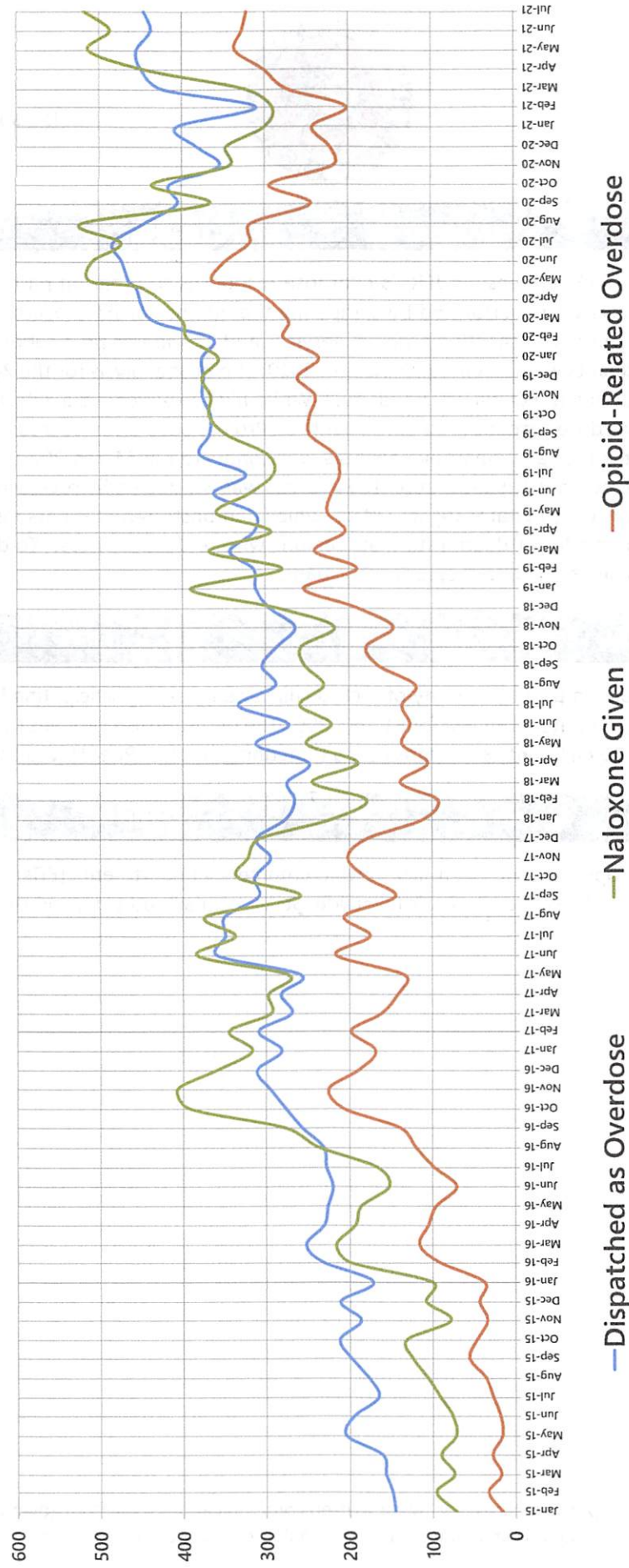
PROJECT EXPANSION

The program is currently operating in seven Jacksonville emergency departments (EDs): Baptist Main, Baptist North, Memorial Main, Park West, St. Vincent's Riverside, St. Vincent's Southside, and UF Main.

DSC/mr

Note: Florida has a very broad public records law. Most written communications to or from government officials regarding government business are public records and may be subject to public disclosure upon request.

Jacksonville Fire & Rescue Department Overdose Responses by Month



Source: Jacksonville, Florida Fire & Rescue Department, Asst. Chief Mark Rowley. A 9-1-1 Call Received as overdose and/or Narcan administration does not necessarily confirm an overdose, opioid use or opioid misuse. Definitions: **Dispatched as Overdose** = a 9-1-1 call in which the caller stated that the victim was suffering from a known or suspected overdose. **Naloxone Doses Given** = the count of naloxone administered, which may include repeat doses to same patient. **Opioid-Related Overdose** = the following type of incidents: naloxone administered and nature of call at scene is "ingestion/poisoning/OD", or naloxone administered and clinical impression is "opioid-related", or overdose reported with the following substances: "Fentanyl, Carfentanyl or Heroin", or overdose reported with naloxone administration. Each of these definitions and events are independent of the other and are not mutually exclusive.

Jacksonville Fire & Rescue Department - Overdose Responses

Series	Month	Dispatched as Overdose	Naloxone Doses Given	Opioioid-Related Overdose	Transported as Overdose
1	Jan-15	145	72	16	113
2	Feb-15	148	96	33	118
3	Mar-15	156	74	17	138
4	Apr-15	160	90	28	134
5	May-15	204	72	16	148
6	Jun-15	195	76	18	136
7	Jul-15	165	91	27	128
8	Aug-15	177	106	36	163
9	Sep-15	198	124	56	180
10	Oct-15	212	131	47	161
11	Nov-15	186	78	34	153
12	Dec-15	211	108	44	169
13	Jan-16	171	100	38	144
14	Feb-16	231	199	91	230
15	Mar-16	252	216	116	235
16	Apr-16	230	193	105	249
17	May-16	226	186	96	225
18	Jun-16	220	152	71	194
19	Jul-16	228	166	98	238
20	Aug-16	231	237	120	254
21	Sep-16	257	278	139	256
22	Oct-16	276	392	207	326
23	Nov-16	295	407	225	340
24	Dec-16	311	360	189	326
25	Jan-17	281	317	168	293
26	Feb-17	309	345	198	310
27	Mar-17	269	294	161	248
28	Apr-17	282	297	141	271
29	May-17	258	273	133	238
30	Jun-17	359	383	216	353
31	Jul-17	349	337	175	311
32	Aug-17	350	373	206	348
33	Sep-17	309	259	144	277
34	Oct-17	314	334	180	300
35	Nov-17	294	322	202	310
36	Dec-17	312	309	179	294
37	Jan-18	276	220	110	217
38	Feb-18	265	179	93	205
39	Mar-18	274	244	138	259
40	Apr-18	248	189	105	195
41	May-18	312	251	136	266
42	Jun-18	272	221	126	244
43	Jul-18	333	259	136	247
44	Aug-18	288	230	119	239
45	Sep-18	304	253	164	301
46	Oct-18	286	257	179	319
47	Nov-18	264	217	146	262
48	Dec-18	295	286	190	333
49	Jan-19	312	390	254	387
50	Feb-19	314	280	190	284
51	Mar-19	343	368	241	401
52	Apr-19	314	293	204	308
53	May-19	313	359	225	356
54	Jun-19	362	319	220	359
55	Jul-19	323	290	210	346
56	Aug-19	378	296	216	410
57	Sep-19	367	345	246	390
58	Oct-19	365	367	246	408
59	Nov-19	375	365	239	374
60	Dec-19	374	376	261	403
61	Jan-20	376	356	235	349
62	Feb-20	363	394	277	394
63	Mar-20	436	400	272	413
64	Apr-20	455	447	315	432
65	May-20	464	510	363	521
66	Jun-20	472	508	348	491
67	Jul-20	483	473	318	456
68	Aug-20	445	521	317	456
69	Sep-20	405	367	244	377
70	Oct-20	414	436	294	431
71	Nov-20	355	343	218	339
72	Dec-20	382	347	222	332
73	Jan-21	406	300	243	371
74	Feb-21	311	291	202	319
75	Mar-21	424	323	273	410
76	Apr-21	449	446	301	472
77	May-21	455	513	336	523
78	Jun-21	437	487	328	496
79	Jul-21	446	518	322	491

Source: Jacksonville Fire & Rescue Department, Asst. Chief Mark Rowley. A 9-1-1 Call Received as overdose and/or Narcotic administration does not necessarily confirm an overdose, opioioid use or opioioid misuse. Definitions: Dispatched as Overdose = a 9-1-1 call in which the caller stated that the victim was suffering from a known or suspected overdose. Naloxone Doses Given = the count of naloxone administered, which may include repeat doses to same patient. Opioioid-Related Overdose = incidents where naloxone was administered and nature of call at scene is "ingestion/poisoning/O", or naloxone administered and clinical impression is "opioioid-related", or overdose reported with Fentanyl, Cocaine or Heroin. Transported as Overdose = incidents in which a patient was transported with either an overdose reported, the nature of call at scene was "ingestion/poisoning/O" or the clinical impression included "substance abuse," which may include alcohol. Each of these events are independent of the other and are not mutually exclusive.