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

CITY OF JACKSONVILLE • PROJECT SAVE LIVES STATUS REPORT

Through April 2022

PROJECT MANAGEMENT TEAM

NAME	ORGANIZATION	AREA OF RESPONSIBILITY
David Castleman, MPA, RPM	Jacksonville Fire & Rescue Department	Contract Administration
Raymond Pomm, MD, FAPA	Gateway Community Services	Program Medical Director
Huson Gilberstadt, MD, FACEP	Ascension Health	Vice President SUD & Addiction Services
Rico Bodin, MS, LMHC, MCAP	Gateway Community Services	Peer Coordinator
Mark Rowley, BSN, RN, RPM	Jacksonville Fire & Rescue Department	Data & Reporting
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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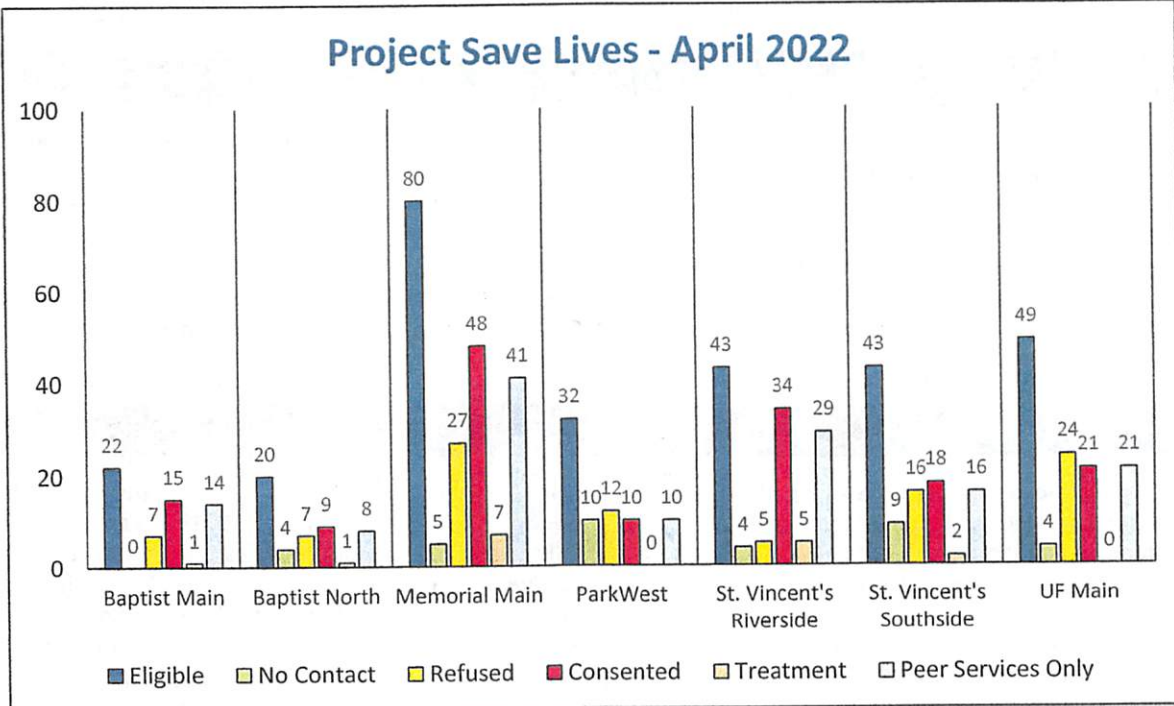
PROJECT STATUS

Project Save Lives began on November 16, 2017. Below is the activity for April 2022 and program totals.

DESCRIPTION	HOSPITAL							APR 2022 TOTAL	PROGRAM TOTAL
	BM	BN	MM	PW	RS	SS	UF		
ELIGIBLE FOR SERVICES	22	20	80	32	43	43	49	289	10052
NO PROGRAM CONTACT	0	4	5	10	4	9	4	36	1057
REFUSED ALL SERVICES	7	7	27	12	5	16	24	98	4020
CONSENTED TO SERVICES	15	9	48	10	34	18	21	155	4975
DRUG-RELATED DEATHS	0	0	0	0	0	0	0	0	9
TRADITIONAL TREATMENT	1	1	7	0	5	2	0	16	712
PEER SERVICES ONLY	14	8	41	10	29	16	21	139	4254

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



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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 2021/22 budget includes an appropriation of \$1,128,348 to Gateway Community Services. Each of the seven participating hospitals also contributes funding toward their Peer Specialist positions. The program also receives funds from the Florida Department of Health in Duval County's Overdose Data to Action grant (for Peer Navigators).

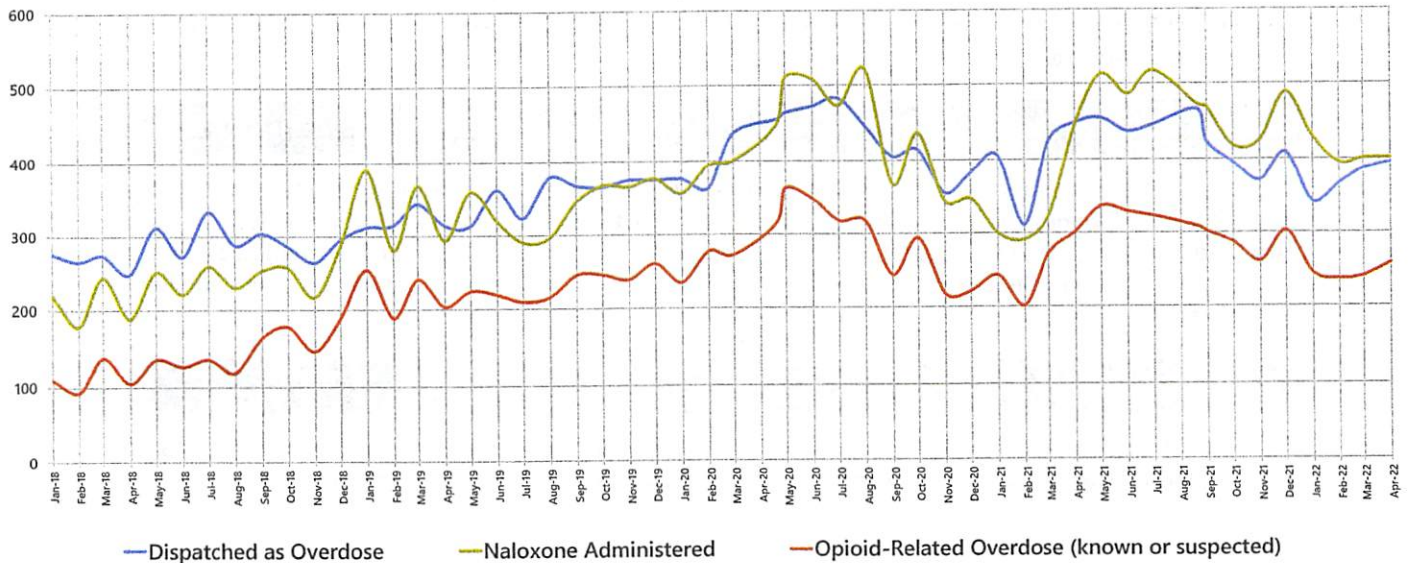
PROJECT EXPANSION

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 dispatched as overdose and/or naloxone 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 Administered** = 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". 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 Administered	Opioid-Related Overdose	Transported as Overdose
1	Jan-18	276	220	110	217
2	Feb-18	265	179	93	205
3	Mar-18	274	244	138	259
4	Apr-18	248	189	105	195
5	May-18	312	251	136	266
6	Jun-18	272	221	126	244
7	Jul-18	333	259	136	247
8	Aug-18	288	230	119	239
9	Sep-18	304	253	164	301
10	Oct-18	286	257	179	319
11	Nov-18	264	217	146	262
12	Dec-18	295	286	190	333
13	Jan-19	312	390	254	387
14	Feb-19	314	280	190	284
15	Mar-19	343	368	241	401
16	Apr-19	314	293	204	308
17	May-19	313	359	225	356
18	Jun-19	362	319	220	359
19	Jul-19	323	290	210	346
20	Aug-19	378	296	216	410
21	Sep-19	367	345	246	390
22	Oct-19	365	367	246	408
23	Nov-19	375	365	239	374
24	Dec-19	374	376	261	403
25	Jan-20	376	356	235	349
26	Feb-20	363	394	277	394
27	Mar-20	436	400	272	413
28	Apr-20	455	447	315	432
29	May-20	464	510	363	521
30	Jun-20	472	508	348	491
31	Jul-20	483	473	318	456
32	Aug-20	445	521	317	456
33	Sep-20	405	367	244	377
34	Oct-20	414	436	294	431
35	Nov-20	355	343	218	339
36	Dec-20	382	347	222	332
37	Jan-21	406	300	243	371
38	Feb-21	311	291	202	319
39	Mar-21	424	323	273	410
40	Apr-21	449	446	301	472
41	May-21	455	513	336	523
42	Jun-21	437	487	328	496
43	Jul-21	446	518	322	491
44	Aug-21	466	473	308	468
45	Sep-21	423	469	301	452
46	Oct-21	396	418	287	430
47	Nov-21	371	425	261	381
48	Dec-21	409	489	302	472
49	Jan-22	342	429	244	363
50	Feb-22	366	395	236	358
51	Mar-22	386	401	240	363
52	Apr-22	395	401	258	400

Source: Jacksonville, Florida Fire & Rescue Department., Asst. Chief Mark Rowley. A 9-1-1 call dispatched as overdose and/or naloxone 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 Administered** = 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". **Transported as Overdose** = incidents in which a patient was transported one of the following conditions existed: the nature of call was "ingestion/poisoning/OD, an overdose was reported, or the clinical impression included "substance abuse", which may include alcohol. Each of these definitions and events are independent of the other and are not mutually exclusive.