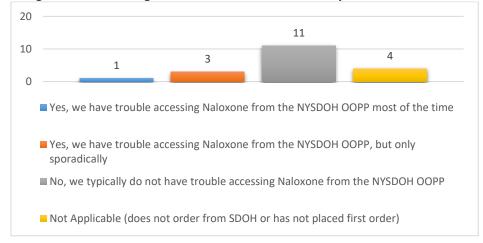


## Naloxone Availability for Local Opioid Overdose Prevention Programs (OOPP)

Total LHDs Participating in OOPP: 27 with 2 others serving as program sites under community partner.

## Q1: Are you having trouble accessing Naloxone from the NYSDOH Opioid Overdose Prevention Program? (19)



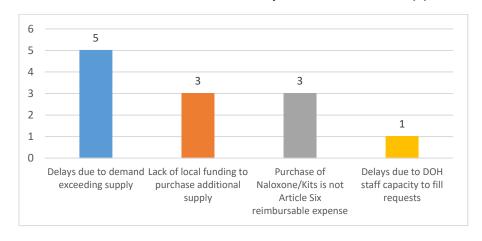
"I've received pushback from DOH on a few occasions for the quantity I have requested, and have been able to clarify need and so I've ultimately gotten what I've requested, but I have been somewhat conservative in my requests in an attempt to be a good steward of the public resource. That said, our needs are growing and I am concerned about the risk of declining availability."

"I can get naloxone if I call ahead of time with a very specific event/request. For general supply orders we have problems.

Many residents health insurance locally has huge spend downs so even with N-CAP the cost at the store is prohibitive."

"I do not have any problems accessing Naloxone, but I am having trouble getting supplies for the blue bags which have been unavailable for weeks.

"Q2: Please indicate what barriers you have encountered (6)



"I try to maintain an adequate supply since we are capped at 200 kits per order. We want to do a large community event but are reluctant because of the barriers we have encountered."

## Q3: Please share suggested solutions to increasing access to Naloxone (6):

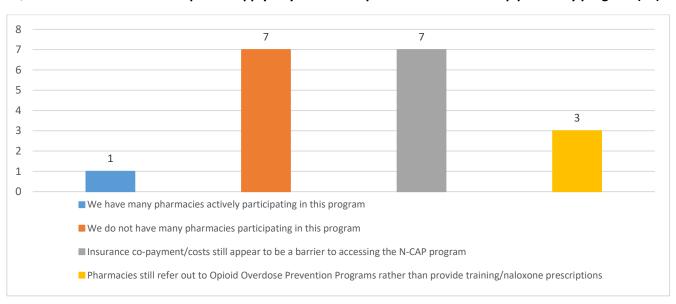
"Dedicated funding and increase to Article 6 State Aide so that LHDs can increase capacity to provide the training" (3 responses)

"More training for Pharmacy staff on the N-CAP program and standing order procedures."

"Promotion message regarding Naloxone saves lives" "Everyone who wants to, should be able to carry naloxone. It should be viewed the same way as CPR/AED. Citizens if they choose, should be equipped to help if there is an overdose" (2 responses)

- Require the State Health Department to reclassify purchase of naloxone as an eligible expense for Article Six State
   Aid for General Public Health Work reimbursement and increase funding for Article Six accordingly.
- Provide additional funding to both the NYSDOH and localities for the purchase of Naloxone and kits to expand
  access to no-cost naloxone for community and family members and persons using drugs.
- Provide the necessary resources to expand availability of opioid overdose prevention training, including recruitment of more independent pharmacists.
- Enact and encourage policies that assure pharmacists both receive and provide appropriate training regarding naloxone administration.

## Q4: Please indicate which responses apply to your local experience with the N-Cap pharmacy program (19):



"Emergency departments cannot dispense Naloxone (they should). We cannot rely on pharmacies alone, especially since many non-fatal OD's present to the ED when pharmacies are closed (often including the hospital's pharmacy) and we really don't need barriers to Naloxone for those at highest risk."

"We recently presented to the regional pharmacy association to increase the use of the N-CAP program. We surveyed them about their thoughts on the program and on becoming more involved. Currently, there are a few pharmacists who use the program regularly, but many expressed an interest in doing more. We have an ongoing collaborative relationship with the local pharmacists now and they participate in our Opioid Task Force."

"Rensselaer County surveyed all participating pharmacies listed on the state's web site and found varying results. Some didn't participate at all, some did not carry naloxone until someone came in to order and it would take a couple of days to get it, some are charging the people \$147.00 if their insurance didn't accept it. We are in the process of doing public health detailing to all of our pharmacies to explain our program and N-CAP, leaving them with a flyer for referrals to our program if insurance does not work."

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