



APPLICATION FORM

All applications must include the following information. Separate applications must be submitted for each eligible program. **Deadline: June 1, 2018.** Please include this application form with electronic entry. If you do not receive an email confirming receipt of your entry within 3 days of submission, please contact [Gage Harter](#).

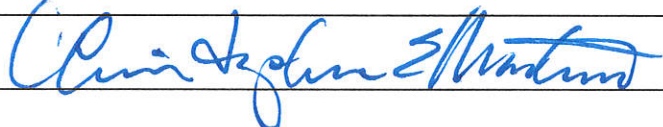
PROGRAM INFORMATION

County: Prince William County
Program Title: Enhanced Naloxone Administration: A Public Safety Response to the Opioid Crisis
Program Category: Criminal Justice & Public Safety

CONTACT INFORMATION

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SIGNATURE OF COUNTY ADMINISTRATOR OR DEPUTY/ASSISTANT COUNTY ADMINISTRATOR

Name: Christopher E. Martino
Title: County Executive
Signature: 

Prince William County – Enhanced Naloxone Administration Program

Program Summary:

The Commonwealth of Virginia, like many U.S. states, is under a public health emergency because of the opioid addiction crisis. By 2013 – the most recent year for which complete data is available – some 386 individuals died from the abuse of fentanyl, hydrocodone, methadone and oxycodone, an increase of 1,578 percent from 1999 when the first data became available. In response to this public-health emergency, the Fire and Rescue Department’s Operations Division initiated a partnership with the Police Department’s Special Operations Division to develop a plan that would provide for enhanced capabilities to administer naloxone - a medication that rapidly reverses the effects of Fentanyl and other opioids.

First responders (law enforcement, fire & rescue, and emergency medical services personnel) face unique challenges in their work, as they are likely to face exposure to opioids when they respond to overdose calls or conduct traffic stops, arrests and searches. Fentanyl’s toxic presence in overdose situations can place the health, and even the lives, of first responders in jeopardy as they strive to assist citizens in distress while also preventing potential exposure to its lethal properties.

In order to assist first responders in doing their jobs safely, staff from the Prince William County Police Department and the Department of Fire & Rescue collaborated to develop training for personnel from their respective operations divisions, as well as a means to track administration of naloxone across the two agencies. This was accomplished between September and December 2017. The program accomplishes several goals - educating public safety responders about fentanyl, training personnel to administer naloxone, and tracking the use of naloxone to meet regulatory requirements as well as recording use patterns to potentially recognize opportunities for opioid use intervention.

State Problem:

Opioid use and overdose-related incidents and deaths have risen dramatically in Virginia and in the United States overall. Prince William County's Department of Fire & Rescue in conjunction with the Police Department cooperatively developed the necessary processes to deploy law enforcement officers to treat overdose victims. The Enhanced Naloxone Administration Program: A Public Safety Response to the Opioid Crisis arms specially trained patrol officers with doses of Narcan® to provide a coordinated response. Three Fire & Rescue personnel attended the REVIVE! Training of Trainers program to obtain the necessary certification to train the police officer participants. The Board of Pharmacy requires that the administration of Narcan and similar medications by local government responders be tracked. In order to initiate this program a database that could be shared between departments was created.

The program accomplishes several goals:

- Protect from exposure (changing protocols for conducting searches of persons and property as well as for treating and transporting individuals where opioid exposure is suspected or known, issuing protective gear, and expanding existing safety practices);
- Respond to exposure (expanding protocols for safely containing and decontaminating personnel and equipment);
- Recognize exposure (training personnel and their supervisors how to recognizing signs of exposure);
- Develop response to exposure (training personnel how to administer naloxone immediately to counteract the deadly effects of fentanyl and other opioids).

How did the program fulfill the awards criteria:

This innovative program addresses the needs of first responders to do their work safely while they provide public-safety services to residents. It can afford a second chance those who overdose on opioids or are exposed to their deadly effects. The program also exhibits best

practices in terms of interagency collaboration, cooperation among local and state officials responsible for the health and welfare of Virginia's residents, fiscal responsibility, and a sustainable model for other jurisdictions.

- **Offer an innovative solution to a problem, situation or delivery of services.**

Staff from both Fire & Rescue and Police recognized a problem facing their agencies as a result of the opioid addiction crisis. They collaborated on a training and a secure recordkeeping solution, so that each agency's personnel could focus on the safe and legal administration of naloxone within their specific job requirements.

- **Promote intergovernmental cooperation and/or cooperation with local, state and federal entities and/or a private enterprise in addressing a problem or situation.**

Addressing this problem required the two agencies to work together quickly. Fire & Rescue personnel trained police officers in how to administer naloxone until the Police Department's personnel could attend the "training the trainers" programming offered by Virginia's REVIVE! Program. From the initial 36 police officers identified as trainers for this program, they in turn trained all 600+ sworn personnel – from the Chief and Deputy Chief through police recruits in the Academy – in how to administer naloxone and then track its use by members. Because the tracking component had to be available in the field, and because each agency necessarily has separate intranet pages for its personnel, the tracking databases had to be coordinated by each agency so that the data was gathered and maintained in exactly the same way. Implementing the program quickly, legally and safely ultimately involved input from the two public-safety agencies, the Department of Information Technology, the County Attorney's Office, and the Finance Office, as well as coordination with the Virginia Department of Behavioral Health & Developmental Services (DBHDS).

- **Provide a model that other local governments may learn from or implement in their own localities.**

Every aspect of this program was designed using existing resources available to local governments and is, therefore, a model that other localities can learn from or implement.

In fact, the Police Department is currently working with a neighboring jurisdiction's police department that reached out for guidance and assistance with starting their program.

How was the program carried out:

- Identified need for greater understanding of response to opioid overdose victims from all public safety personnel, not just medical responders
- Legalities: Before this program could be implemented by the Police Department, whose members do not administer medications to anyone in their care or custody, a General Order (GO) had to be drafted, reviewed and approved. A preliminary GO was issued in early November 2017, and a final GO was issued effective Jan. 30, 2018.
- Database: The tracking component had to be available in the field, and because each agency necessarily has separate intranet pages for its personnel, the tracking databases had to be coordinated by each agency so that the data was gathered and maintained in exactly the same way. In the Police Department, the staffer had roughly six weeks to create a database and design a Sharepoint Workflow so that the database was fully operational by late November 2017 in time for training. This staffer coordinated with the Fire & Rescue staffer who had created that agency's database. The two worked closely together so that data was gathered and recorded in identical fashion and could be merged into a single report for any subsequent reporting necessary to County Government, or any state or federal agency as required by law in connection with the use of naloxone.
- Product Availability: There are several formulations of the drug naloxone, but patrol officers carry one formulation - the Narcan® nasal spray. Fire & Rescue provided a price

comparison and recommended this specific Naloxone due to ease of use and price point. Also, identified a contract for police to use since law enforcement does not typically purchase medication products to administer.

- Training and Continuity Training: Each agency identified an individual to serve as the Naloxone Coordinator. This individual is responsible for collecting, reviewing and tracking all reports of naloxone administration in addition to the responsibility for any subsequent reporting necessary to any state or federal agency as required by law in connection with the use of naloxone. In the Police Department, all sworn members must receive training required by DBHDS, pursuant to the REVIVE! Program. The Criminal Justice Academy maintains the record of training.
- Communications – Department of Fire & Rescue issued a bulletin advising fire and EMS responders for the combined system of career and volunteer firefighters that police officers who had received the training would be carrying and possibly administering Narcan[®] with the protocols for administering and restocking this medication.

Financial Information/Staffing:

- In-house training using REVIVE's "Training the Trainers" program kept training costs and scheduling challenges to as minimum.

Program Results:

- Following the initial program proposal in September 2017, this program was rapidly deployed for field use beginning in December 2017.

Program Overview:

As the result of the combined efforts of both public safety agencies, a database was created to track locations where fentanyl and other opioid uses were reported, agency use of naloxone to rapidly reverse the effects of fentanyl. Armed with life-saving medicine and the necessary training, law enforcement personnel join the ranks of medical responders who can administer the treatment to reverse the effects of the opioids.

To overcome challenges of sharing a database across two separate agencies with closed systems, staff members from the Department of Information Technology created identical entry ports. This not only facilitated rapid access for staff from both departments but also reduced incidences of reporting error as well as reduced the time the program administrator has to devote to programming and database maintenance and enhancements.

Fire and Rescue implemented the database first setting the parameters on how to collect information. Police wanted to ensure that their parameters matched Fire and Rescue so data was consistent and could be easily shared with their respective agencies, with County government and elected officials and other entities needing these valuable statistics. One example of how information is utilized by the cross-departmental database is to track trends on the locations that EMS providers administered naloxone and increase police monitoring the activities in those locations. In the absence of the database, the Police would not necessarily be immediately aware of these response incidents.

Developed a training program for public safety personnel most likely to encounter opioid overdose in the course of their duties that included how to use the database to ensure information is keep accurate and up-to-date.