Update for FICEMS on the Opioid Overdose Epidemic

August 4, 2016
Keys to an Effective EMS Response

- Public Health Surveillance
- Prevention
- Measurement & Evaluation
- Public Safety, EMS and Community Coordination
- Rehabilitation
- Effective & Evidence-based Patient-Care
  - Includes Naloxone
On March 10, 2016 sent a letter to the Director of the Office of National Drug Control Policy.

The letter outlined several FICEMS planned actions to respond to the nation’s opioid overdose epidemic.
“It is the intent of FICEMS that EMS systems be fully integrated and coordinated with community-wide efforts to plan and respond to opioid overdoses. In order to support positive medical outcomes the administration of narcotic antagonists, such as naloxone, by emergency responders should be coordinated with EMS system physician medical directors.”
“FICEMS will assess the viability of developing an evidence based guideline for the prehospital management of patients suffering from opioid overdose”

- In **September 2014** NASEMSO, with NHTSA and HRSA funding support, published a national model clinical guideline for managing opioid poisoning/overdose patients

- In **April 2016** CMS, NIDA, CDC, and NHTSA, with SAMHSA, coordination, funded an AHRQ systematic review

- In **July 2016**, the systematic review was awarded to Oregon Health Sciences University

- NHTSA is planning to complete the evidence based guideline in **2017**
“CDC, NHTSA, and other agencies will continue to examine opportunities for **collaborative research** related to the **EMS response** to the opioid overdose epidemic.”

With the support of CDC and the FDA, the NHTSA/OEMS has designed a retrospective study to **examine the effect of state policy changes** that authorized additional levels of EMS practitioners to administer naloxone.

Began analysis in **July 2017** with final results expected this fall.
NHTSA and the National Center for Disaster Medicine and Public Health (NCDMPH) will host a workshop on the use of electronic learning management systems (eLMS) by EMS systems. One focus of the workshop will be the use of eLMS to efficiently deliver training to EMS personnel on naloxone administration and other lifesaving interventions.”

- On April 4, 2016 NHTSA and NCDMPH met with NASEMSO’s Education and Professional Standards Council

- Follow up workshop in Albuquerque in September 2016
NHTSA Planned Actions & Updates

- NHTSA requested advice from the statutory National EMS Advisory Council (NEMSAC) on whether NHTSA should publish an interim addendum to the National EMS Scope of Practice Model recommending administration of narcotic antagonists be included in the EMR and EMT scopes of practice.

  - In April 2016, NHTSA submitted a request for advice to the NEMSAC
  - A NEMSAC subcommittee is reviewing the question, gathering information and will provide recommendations to the full NEMSAC
  - Beginning May 2016, the NEMSAC subcommittee has been holding biweekly meetings to draft a report in response
  - On September 7 and 8 2016, the NEMSAC will deliberate the subcommittee’s draft recommendation
Additional Efforts

- In August 2016, EMS Focus Webinar on the role of EMS and syndromic surveillance in combatting the opioid overdose epidemic.
Additional Efforts (cont.)

- **Comprehensive Addiction and Recovery Act (CARA) of 2016**
  - Signed into law on **July 22, 2016**
  - CARA includes *authorization* for:
    - HHS led Inter-Agency Task Force on **best practices for pain management**, in coordination with VA, DoD, and DEA
    - DOJ led Opioid Abuse Grant Programs for States, local governments, and Indian tribes which can be used to provide **training and resources for first responders**
    - HHS led Opioid Overdose Reversal Medication Access and Education Grant Program for States
    - Examining Opioid Treatment Infrastructure Act
    - **Veteran Emergency Medical Technician Support Act**
Additional Efforts (cont.)

- CDC Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality State Grants
  - Closing Date **June 27, 2016**
  - Eleven States expected to be awarded
  - $11,550,000 in estimated total program funding

Three Strategies for Applicants:

- Increase the timeliness of aggregate nonfatal opioid overdose reporting (focus on ED and EMS data)
- Increase the timeliness of fatal opioid overdose and associated risk factor reporting
- Disseminate surveillance findings to key stakeholders working to prevent or respond to opioid overdoses
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