Community Navigation

Presented By:
Thomas Cospito
Hello!

Thomas Cospito
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tcospito@wnicap.org
Thank you, your program has saved many lives god bless all your staff. Thank you so much for caring about us.

– Community Navigation Client
Connections by Location

2 Fixed site locations each operating 40+ hours/week.
5 Mobile Hotspots on consistent rotation.
7 Full time Harm Reduction Teammates.
4 Community Navigators with lived experience. Community Navigators always on site.
Bi-Level Program Enrollment

Participant
- Overdose Reversal Training & Supplies
- Safer Injection Supplies & Education
- Safer Smoking Supplies & Education
- HIV/ HCV Testing
- Referrals to Services

Client
- One-on-one Care
- Client Developed Action Plan
- Appointment/ Resource Management
- Transportation
## Program Data (3/1/2020 – 8/31/2020)

<table>
<thead>
<tr>
<th>How Many Served</th>
<th>Overdose Reversals</th>
<th>Action Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Over 9,000 participant interactions.</td>
<td>- 17,728 Doses of Naloxone Distributed</td>
<td>- 118 Client defined action points.</td>
</tr>
<tr>
<td>- 1,100+ Unique participants.</td>
<td>- 1,086 Reversals Reported</td>
<td>- 64 Successfully completed action points.</td>
</tr>
<tr>
<td>- 45 Clients Enrolled</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Program Data

<table>
<thead>
<tr>
<th>Age</th>
<th>Average Client Age</th>
<th>Median Client Age</th>
<th>Oldest Client</th>
<th>Youngest Client</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>39.5</td>
<td>35</td>
<td>73</td>
<td>18</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender Identity</th>
<th>Male</th>
<th>Female</th>
<th>Non-Binary</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>55.50%</td>
<td>43.80%</td>
<td>0.70%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Racial Identity</th>
<th>White/Caucasian</th>
<th>Black/African American</th>
<th>Native American/ Indigenous</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>91.70%</td>
<td>3.80%</td>
<td>2.60%</td>
<td>1.90%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Insurance coverage</th>
<th>Uninsured</th>
<th>&quot;Private Insurance&quot;</th>
<th>Enrolled in Medicaid</th>
<th>Other form of health insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>77.20%</td>
<td>9.20%</td>
<td>10.20%</td>
<td>3.40%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Means of Consumption</th>
<th>Smoking</th>
<th>Oral/nasal</th>
<th>1/2&quot; syringes</th>
<th>5/16&quot; syringes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>13.80%</td>
<td>1.90%</td>
<td>34.80%</td>
<td>65.20%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Drugs of choice</th>
<th>Heroin/Fentanyl</th>
<th>Methamphetamine</th>
<th>Crack/Cocaine</th>
<th>Benzos or other pills</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>52.70%</td>
<td>47.80%</td>
<td>2.90%</td>
<td>5.60%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Overdose prevention and reports</th>
<th>Request Fentanyl Test Kits</th>
<th>Request Overdose Reversal Kits</th>
<th>Report being present at or experiencing at least 1 overdose in the last 30 days.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>48.60%</td>
<td>50.90%</td>
<td>9%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Geographic Reach</th>
<th>Counties</th>
<th>States</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>19</td>
<td>6</td>
</tr>
</tbody>
</table>
Action Points

1. Client defines needs upon enrollment.
2. Each need is developed into an “Action Point”.
3. Clients and Community Navigators work together to rank points.
4. Together a plan for accomplishing each point is developed.
5. Weekly checks-ins are organized to discuss progress.
Action Points Breakdown

- 3 Clients Received Temporary Housing
- 4 Clients Entered Sober Living facilities
- 9 Clients began MAT
- 4 Clients entered detox
- 27 Clients were tested for HCV and HIV
- 17 Other client needs met
Client Case Study

- White Cis Male
- Approx. 30 years old
- US Military Veteran; Injured in Combat
- Monthly pension
- VA Benefits
- Houseless
- Injecting methamphetamine and fentanyl
**Client Case Study**

Client enrolls in Community Navigation. Create Action Plan for housing, upcoming court date, mental health needs, stolen car, and MAT.

Community Navigation team works into the night trying to secure housing, finally purchasing a tent for client to stay in parking lot until the next day when the client is housed in local hotel by partner organization.

Client checks himself out two days later, returns to use and goes dark for about a week. The following week he contacts his CN to discuss further options. Car is located and returned; new sober living facility is found.

Client attends first MAT appointment via telehealth in WNCAP HRed offices. Client requests long term sober living facility. Using our connections to community organizations the team secures a spot at a 6-month program. Client checks in following day.

Client attends medical appointments at VA and court with CN assistance.

Client checks out of facility after 1 week. Immediately returns to WNCAP. Client decides he does not wish to continue abstinence-based options and would like to try MAT again. New appointment is made. Client attends medical appointments at VA and court with CN assistance.

En route to new living facility clients expresses suicidal thoughts. CN pulls over and discusses with client. Decision is made to go immediately to hospital. Client is admitted for observation, CN follows up daily and client requests CN picks him up upon release. Client is picked up and checked into new living facility.
Creating a Network

Clients
Medical Providers
Local Resources
Community Members
What Works

Community Support
WNCAP operates in a community that acknowledges and actively works to address issues related to drug use. Community Partners willing to work with us has made a huge difference.

Client Led Services
Clients know what they need and want to address those issues. It’s important to let the client set priorities and avoid trying to “help” by projecting your own opinions.

Timing
Moving to address client goals immediately has shown to be a great way to build momentum. Starting with an action point that can be accomplished quickly builds relationships and confidence.

Peer to Peer Connections
WNCAP’s CN Team is Peer based because clients connect to those with lived experience. Working with someone who has lived experience and made changes helps clients feel more comfortable.

Judgement - Free
Clients return to use! It’s important to build a relationship in which the client feels safe to still use the program and discuss options. Don’t set standards!
Barriers

Stigma
One consistent theme in our client’s lives is that stigma prevents people from getting help. Working to reduce stigma or at least be a supportive ally helps clients gain confidence to address their own needs.

Provider MAT Restrictions
In their first year of practice prescribers may only see 30 patients. This restriction has come up time and again as a factor limiting access to care.

Language Matters
Ensuring that teammates are trained in language and cultural competency means that clients won’t be turned off or feel dehumanized. This includes body language!

Cost of Treatment
Treatment for uninsured clients is extremely limited. Individuals who are interested in treatment are often dissuaded by long waits to start or high out of pocket costs. Medicaid expansion would help!