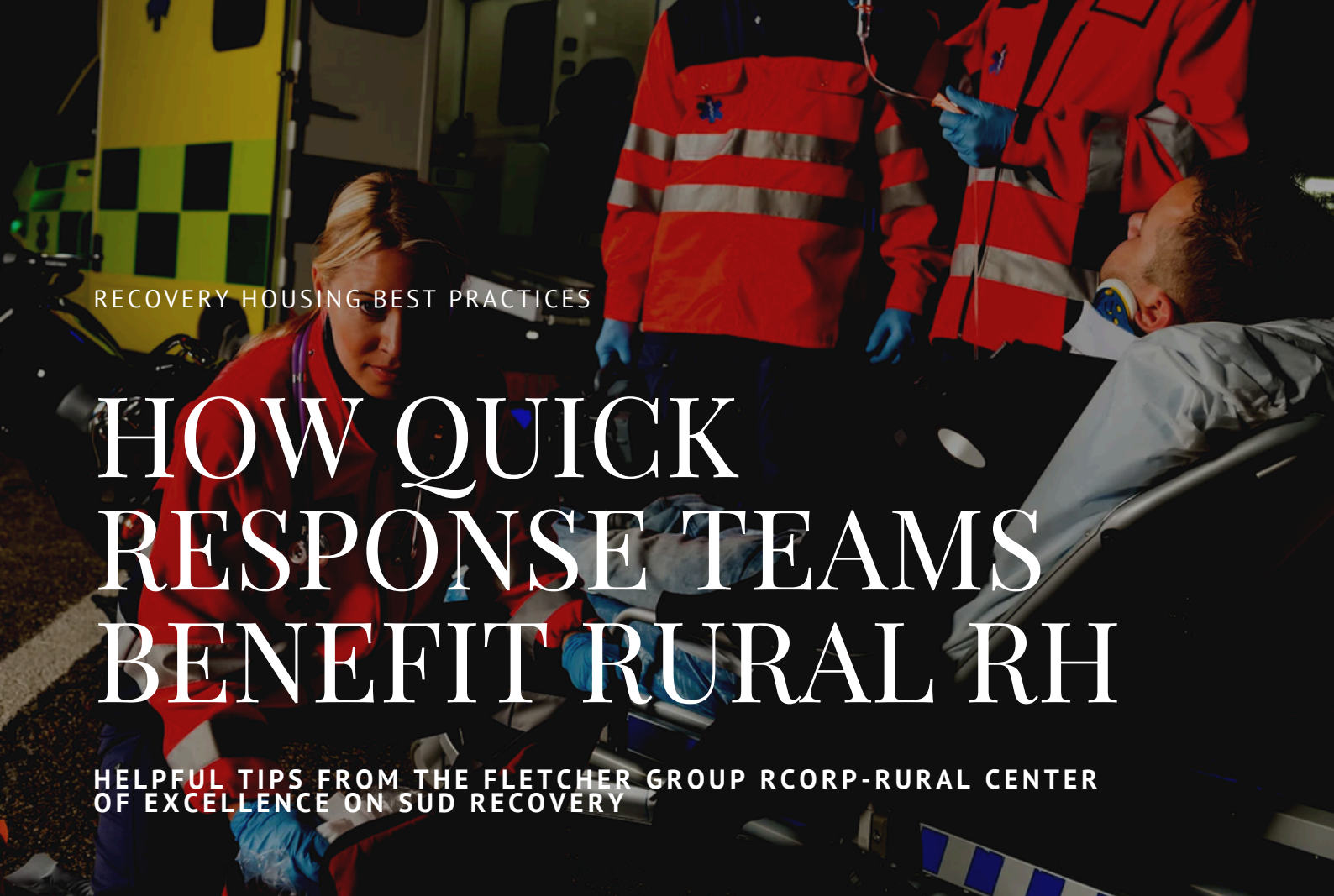




RECOVERY HOUSING BEST PRACTICES

HOW QUICK RESPONSE TEAMS BENEFIT RURAL RH

HELPFUL TIPS FROM THE FLETCHER GROUP RCORP-RURAL CENTER OF EXCELLENCE ON SUD RECOVERY

QRT AND YOU

QRT stands for "Quick Response Team," an interdisciplinary community response program that systematically delivers person-centric services and support to individuals within 48 to 72 hours of a non-fatal overdose.

Depending on the availability of community resources, a QRT may be comprised of a police officer, a medical professional and/or rescue personnel, and a counselor and/or recovery coach. Other agencies may be involved as well, such as hospitals, peer organizations, and behavioral health providers.

QRT and associated social recovery efforts can be particularly helpful in rural areas where infrastructure deficiencies and stigma might otherwise leave untreated those with mental health challenges and Substance Use Disorders (SUD).

Because individuals are more receptive to recovery services within 72 hours of overdosing, wellness checks conducted by QRT Teams can help provide the timely assistance people need to begin turning their lives around.

WHAT YOU NEED TO KNOW ABOUT QRT

To help you save lives and protect your community



QRT GOALS

QRT has several goals including prevention, education, and connecting individuals to treatment services. Those goals can be accomplished through the following activities.

- Follow-up wellness checks conducted by police and medics after a non-fatal overdose
- Consultation with a licensed counselor or peer navigator within two to five days
- Completion of a triage and initial assessment
- The provision of both short- and long-term support for individuals and their families
- Continuing long-term engagement
- Distribution of Naloxone or Narcan to reverse respiratory depression and potentially save lives

In addition, QRT can educate communities by applying predictive analysis to local data. QRT can also prevent overdoses by actively building the trust needed to connect those in need with recovery resources and treatments before an emergency develops.

And For those individuals who aren't ready to engage in treatment, QRT teams build trust by providing food, warm clothing, and other essential supports until the person may be ready to seek treatment.



And if a community lacks treatment services, a long-term arrangement with a QRT can help bridge the gap, enabling those in need to overcome local challenges and gain the services and supports necessary for recovery.

Rural Benefits

Recovery Residences are instrumental in helping individuals with Substance Use Disorders. In rural areas where access to treatment and services can be limited or nonexistent, partnering with a local QRT can be of particular help in creating the kind of "Recovery Ecosystem" needed to deliver a full Continuum of Care.

In the event of a repeat or non-fatal overdose, a rural Recovery Residence operator may turn to a QRT to help reconnect the individual and his or her family to appropriate treatments and services.

How to Connect

To find a QRT near you, reach out to your local law enforcement and emergency services, hospital, or behavioral health agencies. Once located, cultivate a relationship by inviting the QRT to visit your house. At that time, discuss with the QRT some guidelines you might want the QRT to follow when referring someone to your house.

In cases of re-occurrence in your house, QRT can help address the emergency and may be able to find an alternative placement until the client can return to the house.

INTENDED OUTCOMES

It's still early in terms of ascertaining the long-term benefits of existing QRTs, but so far the results are encouraging. They include:

- A reduced number of deaths as a result of proactive engagement and distribution of Naloxone or Narcan
- A reduction in repeated overdoses by individuals
- Fewer overdose incidents due to follow-up engagement, service access, and use of predictive analysis
- Greater awareness of available resources among victims and families
- Stronger support networks for victims and families

Steady Growth

After beginning in Ohio and expanding to Kentucky, West Virginia, Indiana, and North Carolina, QRT is already being practiced or is in the process of being implemented in numerous states. Continuous growth is expected nationwide.

History

QRT was launched in 2014 in Colerain Township, Ohio after the community saw a 176% rise in overdoses from 2011 to 2014. The pilot program was created by former Police Chief Dan Meloy, who at the time served as the Township's Director of Public Safety. Now the Founder of QRT National LLC, Meloy worked closely with Assistant Fire Chief Will Mueller and two members of the Addiction Services Council of Greater Cincinnati—CEO Nan Franks and social worker Shana Merrick.



"People suffering from an SUD or OUD don't expect law enforcement and emergency medical services to appear at their front door with resources and support," says Meloy. "Their typical reactions is, 'Why would Law Enforcement or EMS care?' Our answer is, 'That's what we do. We serve our community. And not just some, but everyone.'"

Efficacy

The QRT Team in Colerain Township completed 497 follow-up visits with overdose patients. More than half resulted in people entering treatment and direct contact has been maintained with 357.

Between 2017 and 2019, Colerain Township reported a 50 percent decrease in overdoses. The QRT Teams there continue to monitor the model's effectiveness.

HOW TO START A QRT IN YOUR COMMUNITY

The success of QRT depends on community collaboration and support. Here are the steps to follow if you're interested in starting a QRT.

- Clearly identify the problem or problems that you're hoping to address.
- Find out what local data may be available to justify the creation of a QRT. For example, has your city, county, United Way, or rural health organization conducted an assessment of community needs?
- Identify community partners who might be willing to support a QRT program

Likely collaborators include law enforcement officers, emergency medical technicians, or mental health counselors. If they are not available, consider those who may be directly impacted, such as emergency rooms, recovery coaches, peer support specialists, and others with experience in the social model of recovery.

Here to help

- Whether you're in an urban or rural area, collaboration is the key to implementing a successful QRT program.
- To find out if an Outreach and Engagement Specialist from the Fletcher Group Rural Center of Excellence is available in your area to provide technical assistance, call **606-657-4662** or contact us through our website at **fletchergroup.org**



For further information

To learn more about starting a QRT, please inquire at <https://o2sl.com/> or contact:

Scott C. Allen
Senior Community Engagement Specialist
Operation 2 Save Lives and QRT National
8170 Corporate Park Drive, Suite 200
Cincinnati, Ohio 45242
(877) 759-7215

Several videos on Quick Response Team training are also available on YouTube.

This publication is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$3.3 M with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government.