ORCCA outlines the priority populations and 19 essential evidence-based interventions to reduce opioid overdose deaths across five domains:

Prioritize individuals at heightened risk for opioid overdose:
1. Prioritize delivery of services to those who need them most in criminal legal settings and other venues
2. Implement field-based population detection methods
3. Use data sources to target intervention to those who need services
4. Engage individuals with lived experience in decision-making process

Opioid-overdose prevention and naloxone distribution (OEND):
5. Implement active overdose education and naloxone distribution (OEND) programs for people who use opioids and their social networks
6. Implement active OEND at venues where overdoses are more likely to occur
7. Include passive OEND strategies
8. Build OEND capacity among first responders

Enhance delivery of medications to treat opioid use disorder:
9. Expand medications for opioid use disorder (MOUD) capacity in healthcare, criminal legal settings, and through telemedicine
10. Initiate on-site MOUD in community-based settings
11. Create linkage programs and protocols
12. Enhance MOUD engagement and retention

Remove barriers to critical resources:
13. Expand peer recovery support and peer services
14. Remove barriers to housing services
15. Expand transportation initiatives for patients with opioid use disorder (OUD)
16. Address barriers to needed resources, including insurance coverage, food security, childcare, and employment
17. Remove barriers to supplemental behavioral health services

Safer opioid prescribing, dispensing, and disposal practices:
18. Ensure safer opioid prescribing
19. Implement safe and effective opioid disposal

“A 2020 article by Winhusen et al. in *Drug and Alcohol Dependence* explains the ORCCA strategies and their evidence base.”

Redonna K. Chandler, PhD, Director, HEALing Communities Study, National Institute on Drug Abuse (NIDA)