$95,000 was earmarked in the Massachusetts FY24 budget for the placement of naloxone (i.e. Narcan) at all MBTA Red Line stations, as follows:

- Each red line station shall have 3 freestanding unalarmed naloxone boxes containing 2 units of 4 milligram intranasal naloxone spray;
- The boxes shall be checked daily to replace used naloxone and to create a record of naloxone used each day;
- Flyers shall be mounted around the boxes with instructions on how to use naloxone in the event of an emergency.

The program was inspired by a group of students at Harvard, the Harvard College Overdose Prevention and Education Students (HCOPES) through an article published in June 2023, “Designing a public access naloxone program for public transportation stations”. The budget amendment was sponsored by State Sen. John Keenan, Norfolk and Plymouth District.
5 Pilot Stations Launching in July 2024

• Boxes will be installed in phases, beginning in July 2024.
• Phase 1 (Pilot) will include 5 stations: Quincy Center, Ashmont, Andrew, South Station, and Harvard.
• Pilot stations selected based on overdose-related data at or near stations in combination with presence or short response time for TPD in the event of an emergency.
• Pilot phase will last 3-6 months with close monitoring of uptake rate, 911/EMS call data, and oversight by MBTA Safety Department, after which the remaining Red Line rollout will be determined.
Program Design

• **Location of Cabinets/Naloxone:** Unpaid and paid lobby areas, as well as in or near publicly accessible restrooms. Cabinets will not be placed on platforms.

• **Signage:** Flyers in English, Spanish, and Chinese will be posted next to each cabinet indicating:
  - How to identify an overdose and how to use naloxone
  - Warning to stand back after administering naloxone
  - How to report an empty cabinet
  - Warning that MBTA staff are not trained to provide medical assistance
  - QR code linking to state harm reduction program locator and how to obtain training

• **Daily Checks and Naloxone Replacement:** RL Inspectors will check the cabinets, replacing any used, opened, or expired naloxone, and recording every replacement in their station daily report. A small supply of extra naloxone will be stored inside the Inspector’s booth at stations where storage is possible.

• **Cabinets meet accessibility requirements**, including not protruding more than 4 inches from wall; hung with appropriate ranges for clear floor space.
Public Access

• **Program is meant for public access.**
  • No new requirement or expectation that MBTA staff will be trained to administer naloxone.
  • However, Transit Police officers do carry Narcan and are trained to administer it.

• Aim of the program is to make life-saving medication publicly available either for immediate use or for people to carry with them.

• Program design is similar to City of Cambridge’s public access program: naloxone is made available in public buildings for anyone to use in case of emergency. Staff are not required to be trained but may choose to take a training offered by the state.
Program Evaluation and Oversight

• MBTA Safety Department has conducted Safety Risk Management (SRM) review; will monitor closely for first 90 days and then hold a second SRM.

• Data collection will include: naloxone replacement rates; 911/EMS calls; TPD and OCC responses; reports of empty or damaged cabinets; reports of overdoses reversed on site; and any known adverse safety incidents related to the program.

• Safety Department will be involved in the continuous review of data and reports to identify trends and patterns of concern.
Appendix
Phase 1 (Pilot)

Quincy Center, Ashmont, Andrew, South Station, Harvard
Quincy Center

#1: Unpaid area, right of fare gates
Right pamphlet shelf will be removed

#2: Inside public restroom

#3: Paid area, left of fare gates
Ashmont

#1: Unpaid area, north entrance

#2: Unpaid area, south entrance

#3: Unpaid area, inside public restroom
Andrew Square

#1: Paid area, toward inbound trk

#2: Paid area, outside corner of restrooms

#3: Unpaid area, between bus stairwells
South Station

#1: Unpaid area, RL entrance

#2: Paid area, near SL stairs

#1: Paid area, near fare gates
Harvard Square

#1: Paid area (main entrance), left of fare gates when entering

#2: Unpaid area (secondary entrance/busway), outside restrooms

#3: Unpaid area (main entrance), left of FVMs
Cabinet and Signage

- **Cabinet**: 13" x 13" x 4"
- **Opioid overdose poster**: 16" x 20"
- **3D wall sign**: 7.5" x 6" x 3"
- **MBTA sign**: 1.75" x 12"
# Program Costs

## Box & Naloxone Quantities

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Stations</td>
<td>22</td>
</tr>
<tr>
<td>Boxes/Naloxone per station</td>
<td>3</td>
</tr>
<tr>
<td>1 more at Kendall and Central</td>
<td>2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>68</td>
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## Cost of Metal Cabinet

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Cost per box</td>
<td>$309.00</td>
</tr>
<tr>
<td># of boxes + extra for storage</td>
<td>90</td>
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<tr>
<td>Shipping</td>
<td>$950.00</td>
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<tr>
<td><strong>Total</strong></td>
<td>$28,760.00</td>
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## Cost of Naloxone

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Cost per dose ($38 for 2 doses)</td>
<td>$19.00</td>
</tr>
<tr>
<td>Min # of doses (136) + 20 extra for storage at stations (440)</td>
<td>576</td>
</tr>
<tr>
<td>Shipping</td>
<td>unknown</td>
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<tr>
<td><strong>Total</strong></td>
<td>$10,944.00</td>
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## TFM Labor - Carpenter

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<tbody>
<tr>
<td>Estimated # of stations + travel time</td>
<td>1</td>
</tr>
<tr>
<td>Avg hourly rate (x2 staff)</td>
<td>$180.38</td>
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<tr>
<td>Avg overtime rate (x2 staff)</td>
<td>$112.36</td>
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<tr>
<td>Total labor cost - avg hourly rate (x2 staff)</td>
<td>$5,968.36</td>
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<tr>
<td>Total labor cost - avg overtime rate (x2 staff)</td>
<td>$2,471.92</td>
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<tr>
<td><strong>ESTIMATED IMPLEMENTATION COST</strong></td>
<td>$49,591.68</td>
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<tr>
<td>+ 15% Contingency</td>
<td>$7,438.75</td>
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<td><strong>TOTAL</strong></td>
<td>$57,030.43</td>
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## Annual Ongoing Costs

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<tr>
<th></th>
<th>Estimate</th>
<th>(Low- Medium- High)</th>
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<tbody>
<tr>
<td><strong>Naloxone replacement</strong></td>
<td>100</td>
<td>150</td>
</tr>
<tr>
<td>Uses per year</td>
<td>$1,900.00</td>
<td>$2,850.00</td>
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<tr>
<td><strong>Cabinet replacement</strong></td>
<td></td>
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<tr>
<td>Per year</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>$1,545.00</td>
<td>$3,090.00</td>
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<tr>
<td><strong>TFM labor for cabinet replacements</strong></td>
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<td></td>
</tr>
<tr>
<td># of hours of work per replacement + travel time</td>
<td>1</td>
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<tr>
<td>Total labor cost - avg hourly rate (x2 staff)</td>
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<tr>
<td>Total labor cost - avg overtime rate (x2 staff)</td>
<td>$561.80</td>
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<tr>
<td><strong>ESTIMATED ANNUAL ONGOING COSTS</strong></td>
<td>$4,006.80</td>
<td>$8,468.10</td>
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