

ARKANSAS

USE OF STR/SOR GRANT FUNDS TO ADDRESS THE OPIOID CRISIS

Background on opioid-specific grants to States

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. These grants aim to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) in the States. States received a total of \$500 million for each of FY 2017 and FY 2018 through STR. Additionally, in FY 2018, States received an additional \$1 billion in new funding through the SOR grants. In FY 2019, States received \$1.5 billion through SOR. Eligible applicants for both STR and SOR are the State alcohol and drug agencies.

Allocations for Arkansas

Arkansas received \$3.9 million through STR for each of FY 2017 and 2018, and \$5.1 million through SOR in FY 2018. In FY 2019, Arkansas received a total of \$7.8 million through SOR.

Overview of Arkansas' efforts to address the opioid crisis

The Division of Adult Aging and Behavioral Health Services within the Arkansas Department of Human Services is currently using STR/SOR funding to expand and further develop medication-assisted treatment (MAT) in the State. This expansion includes the development of recruiting Drug Addiction Treatment Act (DATA)-waivered medical staff to perform MAT. The populations of focus identified in the grant are pregnant and parenting with an included subset of parents at risk of losing their children to the Division of Children and Family Services; parolees re-entering the community from incarceration; and those who have survived an opioid overdose. Other noteworthy initiatives under the grants are the development of the first ever peer recovery infrastructure within the State of Arkansas (people with lived experience), education on opioid use disorder (OUD) to various populations, including first-responders, medical professionals, and family members of those who survived an opioid overdose (family members are trained on the use of naloxone and given a kit).

Primary prevention: stopping opioid misuse before it starts

- SOR grant resources have allowed for expansion of opioid prevention efforts into the substantial "elder" (age 65 and over) population in Arkansas. This is being implemented through collaboration with the University of Arkansas for Medical

Sciences (UAMS) Reynolds Center on Aging, which operates geriatric clinics and other services throughout the State.

- Prescriber education is also supported by these funding sources. That programming includes assistance in developing online educational/case conference programs on opioid-related topics (e.g., pain management/alternatives, medication management, signs of dependence, etc.). In addition, conferences and print material/distribution have received support from STR funds. That included large scale distribution of ASAM Opioid Guideline pocket reference books, sent to M.D., D.O., and A.P.R.N. mailing lists statewide.
 - Distribution of 8,500 ASAM pocket reference guides to medical providers; contact with over 200 providers at conference information booths, and provision of weekly webinar consultations. Public information/health literacy campaigns have generated (estimated): an average of over 5 million views per month of public postings (billboards, social media), patient information (“How to Talk to Your Doctor” handbooks) distributed to over 2,000, and “Don’t Run, Call 911” brochures/folios regarding Arkansas’s “Good Samaritan Law” distributed at a volume over 50,000.

Increasing access to treatment

- **Access to MAT through Provider Recruitment:** recruitment of DATA-waivered medical professionals contributing to the treatment of 1,365 clients with MAT. In May 2018, Arkansas had 141 DEA waived providers in the State, and as of July 2019, the State has 252 waived providers. Efforts to recruit providers have resulted in an increase of 111 new waived providers over 14 months, which is a 78% increase.
- **Provider Education on OUD Treatment:** A multi-pronged collaborative effort has been in progress to recruit more DATA-waivered providers in the State, specifically in rural areas. Medication Assisted Treatment Recovery Initiative for Arkansas Rural Communities (MATRIARC) is a partnership with the Psychiatric Research Institute and the Arkansas Department of Human Services designed to expand evidence-based treatment for opioid use disorders. An addiction psychiatrist is available free of charge via telephone to offer consultations to primary care physicians, general psychiatrists, advanced practice nurses, physician assistants, and mental health professionals providing medication-assisted treatment to patients dealing with opioid use disorder. Project ECHO is part of MATRIARC, providing weekly video conferences to community health centers needing assistance in opioid addiction treatment.
- **Development of Recovery Infrastructure:** ensures trained peers with lived experience are available to deploy to treatment facilities, hospitals, jails, prisons, and drug courts.
- **Special Populations:** While all who suffer from OUD are eligible to receive STR/SOR funding for MAT, special populations identified for treatment under both grants are pregnant and parenting women, parolees re-entering the community, and individuals revived with naloxone.

Overdose reversal efforts: saving lives

Training of first responders and distribution of naloxone in high need communities:

	Trained	Kits Distributed
STR	610	622
SOR	1,308	997

- Total trained as of August 2019: 2,744
- Total kits distributed as of August 2019: 2,211
- Lives saved as of August 2019: 273

NARCANSas smart phone app: NARCANSas is a mobile phone app designed to educate and inform individuals about opioid use disorder. It includes information about prevention, treatment, and recovery. It walks individuals through the steps of rescuing someone who has overdosed by administering naloxone and calling 911. It describes signs of an overdose and information about the drug takeback efforts. It is available for download on both [Apple](#) and the [Google Play Store](#). To date it has been 819 downloaded times.

Collaborating with local coalitions: STR and SOR funds support opioid prevention work with local coalitions through the naloxone training/distribution project, which includes assisting target communities to establish and/or build local coalitions. These efforts begin with the community service contractor's introduction of the naloxone project that is focused on: 1) first responder agencies, and 2) treatment centers that in turn will be equipped to train/issue naloxone kits to support network members of OUD-diagnosed patients at risk of relapse-related overdose. The ultimate aim of work with these coalitions is to create groups that sustain and expand community-level prevention efforts well beyond the scope and lifespan of STR/SOR activities.

Targeting special populations:

- First responder naloxone program resources are focused on high-need communities (HNCs), which are determined by an annual data-driven needs assessment. All counties across the State are ranked by scores on a composite index of risk/severity/resource access, and then communities are selected prospectively with consultation/approval of the State Opioid Prevention Workgroup to be HNC targets for the following year of programming. The treatment center portion of naloxone training/distribution is progressing through all regional treatment centers statewide.
 - *Outcomes:* To date, through STR funding (with future extension in SOR), 370 naloxone kits (740 intranasal dose units) have been distributed in HNCs, i.e., indicating 370 individuals trained, a prerequisite of kit receipt. Overdose rescue reports have attributed 18 overdose reversals to STR programming; this figure is expected to increase (past the grant funding period) as overdose incidents are ongoing and additional rescues likely will result from use of STR-funded resources.

Outcomes: According to the State Drug Director's Office, there have been 204 lives saved using naloxone reported to the Arkansas State Police. Additionally, the State has used STR and SOR funds to purchase 2,906 doses of naloxone. To date, a total of 592 naloxone kits have been distributed to first responders under the State's first responder trainings. Arkansas anticipates the number of lives saved to increase as a direct result of continued programming taking place under the SOR grant.

Supporting recovery

Arkansas has been able to create a comprehensive peer recovery infrastructure using STR and SOR funds. Arkansas has trained approximately 300 peer recovery support specialists, many of which have become certified in Peer Recovery through the Arkansas Substance Abuse Certification Board. This laid the groundwork for the State to create the Arkansas Model of Peer Recovery building on the foundations of the Georgia Model as developed by the Appalachian Consulting Group. An estimated 700-900 clients have received recovery support services using various recovery support methods, including peer recovery support services, recovery assistance in the community, and other recovery outlets.

Collaborating with local entities

Arkansas DHS/Division of Aging, Adult, & Behavioral Health Services has strengthened existing partnerships with the Arkansas Health Department, Prescription Drug Monitoring Program (PDMP), the local communities, and Arkansas Medical Board in building a stronger MAT infrastructure in Arkansas. This collaboration has also lent itself to the development of new and existing advisory boards that oversee substance use issues within the State.

For more information, contact Robert Morrison, Executive Director, at rmorrison@nasadad.org, or Shalini Wickramatilake-Templeman, Federal Affairs Manager, at swickramatilake@nasadad.org.