

Closeout Performance Report

For the period of October 1, 2022, to September 29, 2024, please respond to the following:

This multi-year closeout programmatic progress report covers activities and data related to the SOR-III (2022) SAMHSA/CSAT award to the Arkansas Department of Human Services (DHS), Division of Aging, Adult and Behavioral Health Services (DAABHS); FAIN: H79TI083287; award number 6H79TI083287-02M004 (Multiple).

Number of unduplicated clients who have received treatment services for OUD: **2,870**

Of those unduplicated clients, how many received:

- i. Methadone: 310
- ii. **Buprenorphine: 1,121 (42%)**
- iii. Injectable Naltrexone: 106

Number of unduplicated clients who have received treatment services for stimulant use disorder: **4,709**

Number of unduplicated clients who have received recovery support services: **2,236**

Of those unduplicated clients, how many received the following services:

- i. Recovery Housing: 338
- ii. Recovery Coaching or Peer Coaching: **1,820 (81%)**
- iii. Employment Support: 215

Number of overdose reversals: **7,615** (3,428*, 529**, 3,248***, 193****, 217*****)

*Data gathered from the Arkansas Department of Health County Overdose Data Table for the use of Naloxone/Narcan.

**Arkansas Office of Drug Director data on Naloxone saves using police reporting from September 2022 – September 2023

***Data gathered from the Arkansas Department of Health County Overdose Data Table for the use of Naloxone/Narcan.

****Data gathered from the Arkansas Naloxone Reporting Tool

*****Data gathered from Arkansas Department of Human Services ADMIS data reporting platform GPRA surveys completed.

Accomplishments

Prevention

- Opioid Prevention for Aging and Longevity (O.P.A.L.) - During the award period, the O.P.A.L. Program trained **796 individuals and distributed 1,677 Naloxone kits across 28 training sessions held in 26 of Arkansas' 75 counties (35%)**. Marketing efforts, which included **billboards and bus bench advertisements, generated a total of 76,497,153 impressions in 22 counties**. O.P.A.L. also developed or updated various educational materials, such as a large print version of "Older Adults, Prescription Opioids and Naloxone," The Yoga Booklet, The Interventional Pain "Get Help" booklet, as well as Spanish and Marshallese translations of O.P.A.L. flyers and fact sheets. Outreach and engagement activities included a successful **Drug Take-Back event on April 26, 2024, the distribution of over 2,000 informational fans to African American churches**, and the establishment of a regularly updated Facebook page. Additionally, O.P.A.L. participated in **12 additional booth attendances or presentations for events or agencies** beyond the previously listed provider-planned events. The O.P.A.L. staff continues to educate clinical personnel through Naloxone training, the distribution of literature, and the publication of a collaborative manuscript titled "The Effects of Concurrent Use of Opioids and Gabapentin on Fall Risk in Older Adults," which has been accepted by the Journal of Pain and Palliative Care Pharmacotherapy.
- Criminal Justice Institute (CJI) - The Criminal Justice Institute Director coordinated with **49 first responder agencies** to assist them in submitting a Letter of Agreement and worked with them to develop and implement the agency model policy. This contractor delivered **training for 3,044 first responders** regarding the administration of naloxone and overdose investigation, including virtual and in person trainings. Project staff delivered **18 Prescription Drug/Opioid Overdose Prevention Project Community Roundtable events** with a total of **792 attendees**. These events are designed to bring together community, grassroots, and key stakeholders to discuss the extent of the problem and possible solutions, prevention efforts, and ways to address the opioid epidemic in the county. To address the need for prevention and reduce the risk factors of misusing prescription medication in a diverse population, the Project staff utilizes the "How to Talk to Your Doctor Handbook." Project staff discussed and distributed the Handbook during Community Roundtable events. Project staff also met with Local Advisory groups.
 - On July 24-25, 2023, project staff hosted the **Annual Community Advisory Council Forum** in Jonesboro, **attended by 179 people**. The event focused on strategies to reduce opioid misuse and overdose deaths in high-risk communities, offering up to 11.75 continuing education hours. Highlights included a keynote by Anthony Pelham, nine breakout sessions, and presentations from various organizations like U.A.M.S. and CJI. The event received positive feedback from participants.
- The University of Arkansas at Little Rock (UALR) MidSOUTH – During year 2 of this reporting period, UALR MidSOUTH successfully disseminated **prescription lock boxes at various local events and through the Division of Children and Family Services (DCFS)**, distributing a total of **471 large boxes, 319 small med. boxes, and 584 lock bags**. Employees trained and distributed to included Protective Services Workers, Foster Care Workers, Adoption Specialists, Program Assistants, and Supervisors.

- An advertising sub-vendor promoted the Prevention Nursing Conference to nurses statewide by purchasing a contact list from the Arkansas State Board of Nursing. The 2024 MidSOUTH Nursing Conference, held on June 21, 2024, saw **301 registered participants and confirmed CEUs accepted by the AR State Nursing Licensing Board**. This event marked the largest virtual conference hosted by MidSOUTH, utilizing Event Mobi with integrated Zoom services.
- The facilitation of **educational materials being added to the Prevention website was completed**, including training on Arkansas laws regarding naloxone accessibility, naloxone distribution, and naloxone administration, also including a public information campaign to colleges and the collegiate population about overdose awareness and statewide opioid/substance use. Stone & Ward is collaborating with DHS on website hosting and domain maintenance as the PreventionAR.com site transitions to DHS management. **DHS produced and distributed a statewide media campaign using the DEA's "one pill can kill" slogan** through Nexstar Media Group. The ad featured students from 6 different Arkansas Collegiate Network (ACN) institutions and focused on the dangers of fentanyl, overdose awareness, as well as promoting the campus Opioid overdose rescue kits made available through Arkansas Act 811 of 2023. The advertisement aired during prime-time slots in the Summer Olympics and continued through the duration of the grant year. RIZE consultants created an introductory course in prevention science, specifically targeted at students and collegiate professionals working in health and wellness. This training provides foundational prevention skills for members of our collegiate coalition, the ACN. The training is currently being piloted by coalition members at three ACN schools and will roll out in spring semester after their feedback is received.
- **MidSOUTH distributed Naloxone to 22 of 23 ACN schools (96%)**, through both Cardinal Health and direct deliveries. A modest surplus is currently housed here at DHS for continued distribution to colleges who request more kits. MidSOUTH's final distribution spreadsheet containing more details of these efforts is attached. **18 universities submitted** the required documentation and had their naloxone doses shipped to them, **distributing a total of 2,471 two-dose units**.
- University of Arkansas for Medical Sciences (UAMS) - **UAMS handed out over 700 naloxone kits** during a 2-hour Naloxone Training at the University of Arkansas for Medical Sciences in Little Rock's emergency room on September 28, 2023. Staff reported, "We gave the kits to all visitors, community professionals, and family members, as well as doctors and police officers." They assured us that the recipients were aware the kits came from SAMHSA and expressed enthusiasm about organizing more distribution events in the future. The event was so successful that they ran out of kits and had to turn people away. They hope to request additional financial support to host another event soon.

Treatment

- University of Arkansas for Medical Sciences /Psychiatric Research Institute-Center for Substance Abuse Treatment (UAMS) - MATRIARC/Project ECHO UAMS staff presented **3 sessions on M.A.T. best practices to 148 attendees**, and **participated as a vendor at 3 events, reaching 880 attendees**. UAMS handled **601 advice calls, held 23 follow-up meetings, and provided 495 hours of ADMIS/GPRA assistance** to SOR III-funded agencies. Physician recruitment and education efforts continued, with Project ECHO offering **38 sessions that awarded 2,210 Continued Medical Education hours (CMEs) to 203 attendees**. Outreach to 63 hospitals included follow-ups with emergency departments and non-ED sites for educational presentations. Among 29 justice-involved clients screened, 23 tested positive for OUD; **naloxone trainings were held for 34 jail staff and inmates led to four rescues**, and several clients remained in MOUD treatment post-release. UAMS-funded agencies provided **MOUD access in 45 Arkansas counties, with 58 counties having at least one waived provider**. 6 contracted agencies exceeded funding expectations, leading to an additional \$60,000 in support.
- Arkansas Community Corrections/Prison-Based MOUD Reentry Program (ACC) - **892 residents have chosen to participate** in the MAT/Vivitrol Re-Entry program. Each participant is provided Naloxone Education and a connection to peer services prior to community re-entry. The program had **115 participants successfully complete the program** during the reporting period, and had several participants who were unsuccessfully, medically, or voluntarily discharged. There have been approximately **172 staff trained** on Medication Assisted Treatment, Vivitrol, and the program. During year 2 of this award period, **375 naloxone kits were purchased during the reporting period and 319 were distributed**. Education of both first responders, community members and targeted diverse populations continued throughout the reporting period. A total of approximately **7,205 people were reached as part of program activities during this period**.
- A collective accomplishment for SOR-funded treatment providers during year 2 was an average number of **days awaited to enter treatment was only 4.76 days**.

Recovery

- The University of Arkansas at Little Rock (UALR) MidSOUTH – Through SOR funding, UALR MidSouth provided technical assistance, educational opportunities, and certification training to a total of **843 peer workers** during year 2 of the grant period. Of these, **265 individuals successfully completed certification training** for the Core, Advanced, or Supervisor levels of credentialing, representing participants from **56 different counties**. A total of **134 peer workers took the examination** required for certification, achieving an overall **pass rate of 68%**. Additional training sessions offered included Justice-Involved training, Professional Development, Ethics, and various virtual continuing education opportunities, which collectively benefited 374 peer workers. Furthermore, the 5th Annual Peer Recovery Conference provided 14 hours of continuing education on topics related to substance use disorders and mental health services, with **324 attendees from 54 counties**. During these training sessions and the conference, a **total of 1,738 two-dose units of Naloxone Opioid Antagonist nasal spray** were

distributed to peer workers, along with 1,440 overdose response pouch kits equipped with voice modules.

- Peer Achieving Collaborative Treatment (PACT) – During year 2 of the grant period, **9 providers** facilitated the delivery of peer services, reaching a total of **1,657 individuals**. Notable statistics include the following: 1,046 individuals (63%) reported a preference for opioids or stimulants; **516 individuals (31%) achieved sustained recovery** while receiving services; **503 individuals (30%) were connected to treatment** options; 319 individuals (19%) indicated that they were currently unhoused; and **398 individuals (24%) attained family reunification** through peer services. Additionally, one medical-based program was authorized to provide peer services in a non-funded county jail for incarcerated individuals.
- University of Arkansas for Medical Sciences /Psychiatric Research Institute-Center for Substance Abuse Treatment (UAMS) - MATRIARC UAMS linked Recovery Support: Funding allowed for **11 full-time peer workers**. An amended item in the RFP allowed for funding for Community Outreach and Education. Specific guidelines are in place to help agencies obtain educational materials designed to bring awareness of MOUD treatment options and education to members of their communities. The MATRIARC team reviews and approves all educational proposals submitted to ensure the effectiveness of the six agencies who intend to use funding to educate their communities. **1001 hours logged in with 391 contacts** in state catchment areas regarding consultations, advice, and assistance. MATRIARC placed a “**7 Days: The Opioid Crisis in Arkansas**” **advertisement** in the Fall and Winter volume of the Arkansas Family Physician Documentary highlighting Michael Mancino, MD and featuring funded award recipient Kristin Martin, DO, MS, FAAFP, Addictionologist of River Valley Medical Wellness. Outreach efforts also included a MATRIARC virtual exhibit at the 2022 MidSOUTH Conference reaching 383 participants, and Jere Brewer RCO meeting reaching 20 participants.

Barriers

Prevention

- Opioid Prevention for Aging and Longevity (O.P.A.L.) - O.P.A.L. staff members have received a substantial volume of educational requests from their vendors, some of which they have been unable to fulfill due to a limited number of personnel. In instances where requests could not be met, program literature was mailed as a substitute for in-person representation. Additionally, O.P.A.L. faces challenges related to the turnaround time required for the development of educational materials for distribution. The staff has collaborated with their printing vendor to expedite this process in the future. Furthermore, O.P.A.L. aims to expand its outreach to more rural African American churches; however, they encounter difficulties in this effort due to a lack of sufficient contact and demographic information available to the public.

Treatment

- SOR – II formally supported the implementation of adolescent treatment through the “ROAR” program, but it closed July 2022 due to lack of admissions. This program faced issues related to referrals and appropriate assessments to treatment for this age group (youth under 18).
- Providers stated that participants were unable to continue MOUD treatment services post release from incarceration due to the lack of housing that allowed them to participate in MOUD services.
- From UAMS: Implementation of SAMHSA’s new GPRA tool has caused adjustments and retraining on the part of many provider organizations. There has also been confusion as to how to process clients who are active when one grant closes out and the other opens. The requirement to perform a discharge assessment, an administrative discharge, and then reentering the initial information collected at intake back into the system is incredibly time consuming. The statutory Legislative review/approval requirements and subsequent agency-level procurement processes are an unavoidable delay in getting the contracts executed.
- ACC staff reported that they are experiencing a financial barrier to fund staff, medication, and service expansion to include transportation and housing support. They also reported that stigma and misunderstanding the usefulness of MOUD wrap around support for the justice-involved population continue to effect outcomes for financial gains and administrative support for the programs across the state. There are several barriers related to providing services to the reentry population due to systemic challenges including access to services, enrollment into insurance/state funded programs, and agency buy-in.

Recovery

- Staff changing within the DHS DAABHS has contributed to new hires. This process has slowed down program development. The DHS Recovery Team began the process of grant reporting through a data collection platform at the end of 2023, which allowed them to provide more in-depth reporting for federal grant partners.
- Peer Achieving Collaborative Treatment (PACT) - Barriers to SORIII-funded PACT programs persist, particularly regarding access to resources in rural areas of Arkansas, where 55 of the 75 counties (73%) are classified as rural*. Individuals receiving services in these regions face challenges such as a lack of essential resources, including food banks and recovery meetings, as well as difficulties accessing available services due to transportation issues. Another challenge is the recent decision by the Arkansas Single State Authority (SSA) to transition to a hub-and-spoke funding model during future SOR funding. Consequently, previously funded programs no longer receive direct SOR funding from the SSA; they must instead participate in an application process through the Arkansas Alliance of Recovery Centered Organizations (AARCO) to be eligible for funding in the upcoming year. Furthermore, due to the limited budgets of some counties served, they are often unable to advocate effectively for self-sustaining support.

*Data gathered from the 2020 United States Census

- **Credentialing** - During the current grant period, the recovery team under DHS has encountered a significant barrier related to a necessary change in the credentialing body. The division transitioned from utilizing an in-house credentialing entity to a nationally recognized body. This shift has resulted in considerable confusion and inquiries among peer workers. The change was prompted by insufficient results from the previous entity. Fortunately, the new credentialing body has appointed an Arkansas Credentialing Manager, which will lead to a reduction in uncertainty within the field following continued collaboration efforts.

Caps on Administrative, Data Collection & Reporting costs:

Indirect/Administrative & Infrastructure Development - \$388,092.97 grant award funds were spent to date on indirect/administrative and infrastructure development costs during the reporting period. This amount was well below the amount of the cap applying the rule that no more than 5% of total grant award may be used for administrative and infrastructure development costs.

Data Collection & Reporting - \$362,315.29 grant award funds were spent on data collection and reporting during the reporting period. That amount is attributable to invoiced costs of evaluation/data services allocated (via sub-grant) to Arkansas Foundation for Medical Care. This is below the required limit that up to 5% of the total grant award may be used for data collection and reporting.