

End of Year Performance Progress Report

For the period of September 30, 2022 to September 29, 2023, please respond to the following:

This No Cost Extension end of year programmatic progress report covers activities and data related to the SOR-II (2020) SAMHSA/CSAT award to the Arkansas Department of Human Services (DHS), Division of Aging, Adult and Behavioral Health Services (DAABHS); core grant number TI083287.

Number of unduplicated clients who have received treatment services for OUD: **1004**

Of those unduplicated clients, how many received:

- i. Methadone: 0
- ii. Buprenorphine: 78
- iii. Injectable Naltrexone: 4

Number of unduplicated clients who have received treatment services for stimulant use disorder: **13**

Number of unduplicated clients who have received recovery support services: **579**

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

- i. Recovery Housing: **98**
- ii. Recovery Coaching or Peer Coaching: **567**
- iii. Employment Support: **43**

Number of overdose reversals: ***3,428 **529**

*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

Accomplishments

Prevention

- **Naloxone Training at the University of Arkansas emergency room on September 28, 2023:** they handed out over 700 naloxone kits today in two hours. Staff also facilitated training alongside handing out the kits. Staff reported "we gave it to all visitors, community professionals, and family members as well as doctors, police officers." She assured us the people receiving the kits knew this was coming from SAMHSA, and that they would love to do more of these distribution events because they ran out and ended up having to turn people away! This event was

facilitated at UAMS in Little Rock, and they are hoping to ask for more financial support to host another event in the future because it was such a successful day.

- **Criminal Justice Institute:** The Criminal Justice Institute Director coordinated with 34 first responder agencies to assist them in submitting a Letter of Agreement and worked with them to develop and implement the agency model policy. Project staff delivered nine Prescription Drug/Opioid Overdose Prevention Project Community Roundtable events. 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. Counties are listed below. 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. How to Talk to Your Doctor Handbook was designed to improve patient-provider communication and increase patient engagement. Project staff discussed and distributed the How to Talk to Your Doctor Handbook during Community Roundtable events. Project staff meet with Local Advisory groups.

1. St Francis County Advisory Group 47 kits distributed.
2. Drew County Advisory Group 43 kits distributed.
3. Jackson County Advisory Group 41 kits distributed.

	<u>County</u>	<u># Attendees</u>
1.	Polk & Montgomery	27
2.	Columbia	24
3.	Grant	8
4.	Little River & Howard	12
5.	Searcy & Madison	25
6.	Drew	43
7.	Chicot	13
8.	ST. Francis	39
9.	Lee County	26

CJS Project staff delivered two Advanced Overdose Investigations courses focused on investigating and prosecuting death cases resulting from opioid overdose. One Advanced Methamphetamine Investigation course focused on conducting safe and effective methamphetamine-related investigations and the techniques for investigating methamphetamine possession, manufacturing, and distribution.

- June 27 – 28 Methamphetamine Investigation course 36 qualified law enforcement officers in attendance
- July 10 – 12 Advanced Overdose Investigation course 30 qualified law enforcement officers in attendance
- September 6 - 8 Advanced Overdose Investigation course 53 qualified law enforcement officers in attendance

Project staff trained first responders on the protocols, processes, and procedures for administering naloxone.

AR Prescription Drug & Overdose Online Course

<u>Dates</u>	<u># Attendees</u>
• April 4 - 17	83
• April 25 - May 8	99
• May 16 – 29	20
• June 6 - 19	13
• June 27 - July	31
• July 18 - 31	68
• August 8 -21,	31
• August 2 - 31,	410
• August 15 - 28,	80
• August 17 – Sep 8	133
• September 11 – 22	51

Annual Community Advisory Council Forum

On July 24-25, project staff hosted the Annual Community Advisory Council Forum in Jonesboro with 179 in attendance. During the conference, members of local advisory councils learned ways to change the environmental and social risk factors that increase the possibility of opioid misuse within their communities. Local advisory council members developed skills to work specifically on overdose death prevention in high-risk communities. Participants potentially earned 11.75 continuing education hours approved by the Prevention Professionals of Arkansas Certification Board who was in attendance. CJI Director Dr. Cheryl May opened the conference by welcoming attendees and providing an overview of the event. A Community Resource Panel presentation followed the opening, which included representatives from the University of Arkansas for Medical Sciences (U.A.M.S.) Opioid Prevention for Aging & Longevity program (OPAL), the Substance Abuse Collegiate Program (DAABHS) NaloxHome Program-Arkansas Center for Health Improvement (ARCHI), Arkansas Opioid Dashboard - Arkansas Foundation for Medical Care (AFMC), and Prescription Drug and Opioid Overdose Prevention Program-Criminal Justice Institute (CJI). Anthony Pelham energized the crowd with his keynote presentation titled Choosing to Be the Best “U” to prepare the participants for two days of learning and networking, which included nine break-out sessions, a Faith-based panel, Emerging Drug Trends plenary, Building Partnerships & Community Engagement plenary. Project staff and instructors received compliments and congratulations verbally and in evaluations.

*Family Training and TOT (**Treatment & Recovery Support**)*

- Trained **481** treatment and recovery center staff and family members who come close in contact with the possibility of an overdose through Family and TOT training.
- The How to Talk to Your Doctor Handbook presentation during TOT training and Roundtable events was designed to improve patient-provider communication, increase patient engagement, and prevent the misuse of prescription drugs. Project staff discussed and distributed the How to Talk to Your Doctor Handbook during TOT training and community Roundtable events and as requested.

Information Dissemination

Media

On May 22nd, a vodcast was recorded featuring the co-founder and Executive Director of the Hope Movement Coalition, Staci James. Staci lost her 22-year-old son, Hagan, from an accidental drug overdose caused by fentanyl poisoning.

Some statewide components include messaging for Drug Take Back Day and television advertising with expanded markets beyond the targeted areas. Statewide messaging is also utilized for special events such as “Striking Out Opioid Abuse” at the Arkansas Travelers baseball game.

Project staff disseminated **137,174** Opioid and Prescription drug awareness and health literacy materials during Pharmacy Tours, Community Roundtables, Regional Conferences, treatment and Recovery events, and approved activities in the field.

Treatment

- Arkansas Community Corrections/Prison-Based Vivitrol Re-Entry Program: There were 19 MAT re-entry graduates of the post-release program during this reporting period. No overdoses were reported from MAT participants during this period. There have been approximately 144 staff trained on Medication Assisted Treatment, Vivitrol, and the program. This includes both parole/probation and residential centers’ staff. Over 2,805 residents in the residential facilities have been educated on Medication Assisted Treatment, the MAT Vivitrol Re-Entry Program and Overdose Education. 678 residents have chosen to participate in the MAT/Vivitrol Re-Entry program. Each participant is provided Narcan Education prior to community re-entry. 62 residents have been released to parole and began the MAT/Vivitrol Re-Entry program during this reporting period. The participants received Narcan in their exit property. 678 residents have received Vivitrol post-release since the program began. Every participant is connected to a Peer Recovery Support person during the exit interview /reentry process.
- MATRIARC/Project ECHO (University of Arkansas for Medical Sciences/Psychiatric Research Institute-Center for Substance Abuse Treatment: Forty-five of the 75 counties in Arkansas have access to medication-assisted treatment for opioid use disorders (MOUD) through MATROARC funded agencies. There are 58 counties with at least one waived provider, leaving 17 counties with none. Six MATRIARC contracted agencies exceeded expectations in utilizing funds efficiently during the funding period, so we were pleased to increase funding by \$60,000.

Recovery

- MATRIARC-Linked Recovery Support: Funding allowed for 5 full-time PRSS and 6 full-time Peer in Training (PIT). A second amended item in the RFP allowed for funding for Community Outreach and Education. Specific guidelines are in place to help agencies obtain educational materials designated and designed to bring awareness of MOUD treatment options and education to members of their communities. The MATRIARC team reviews and approves all proposals submitted to ensure the effectiveness of the six agencies who intend to use funding to educate their communities. Consultations, Advice and Assistance: 1001 hours logged in with 391 contacts in state catchment areas. Outreach: MATRIARC placed an ad in the Fall and Winter volume of the Arkansas Family Physician Documentary- 7 Days: The Opioid Crisis in Arkansas highlighting

Michael Mancino, MD and featuring funded award recipient Kristin Martin, DO, MS, FAAFP, Addictionologist - River Valley Medical Wellness. MATRIARC virtual exhibit 2022 MidSouth Conference, 383 participants, 60 visits; Jere Brewer Wolfe Street meeting, 20 participants.

Barriers

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).
- 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.

Recovery

- Staff changing within the DHS DAABHS has contributed to new hires. This process has slowed down program development. The DHS Peer Recovery Team has also begun the process of grant reporting through a data collection agency that will begin at the end of 2023 to provide more in depth reporting for federal grant partners.

Caps on Administrative, Data Collection & Reporting costs:

Indirect/Administrative & Infrastructure Development - \$68,613.65 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 percent of total grant award may be used for administrative and infrastructure development costs.

Data Collection & Reporting - \$88,305.79 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 five percent of the total grant award may be used for data collection and reporting.