

### **End of Year Performance Progress Report**

For the period of September 30, 2023, to September 29, 2024, please respond to the following:

This end of year programmatic progress report covers activities and data related to the SOR-III (2020) SAMHSA/CSAT award to the Arkansas Department of Human Services (DHS), Division of Aging, Adult and Behavioral Health Services (DAABHS); award number 6H79TI083287-02M004 (Multiple).

Number of unduplicated clients who have received treatment services for OUD: **1,866**

Of those unduplicated clients, how many received:

- i. Methadone: 310
- ii. Buprenorphine: 1,043
- iii. Injectable Naltrexone: 102

Number of unduplicated clients who have received treatment services for stimulant use disorder: **4,969**

Number of unduplicated clients who have received recovery support services: **1,657**

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

- i. Recovery Housing: 240
- ii. Recovery Coaching or Peer Coaching: **1,253 (76%)**
- iii. Employment Support: 172

Number of overdose reversals: **Total: 3,658** (3,248\*, 193\*\*, 217\*\*\*)

\*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**. 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 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 15 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 1,906 first responders** regarding the administration of naloxone including virtual and in person trainings. Project staff delivered **nine Prescription Drug/Opioid Overdose Prevention Project Community Roundtable events** with a total of **575 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. 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.
- The University of Arkansas at Little Rock (UALR) MidSOUTH – During 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, 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, and Stone & Ward is collaborating with DHS on website hosting and domain maintenance as the PreventionAR.com site transitions to DHS management. 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. 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 six different ACN institutions and focused on the dangers of fentanyl, overdose awareness, as well as promoting the campus Opioid Overdose rescue kits made available through Act 811. The ad 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 will provide foundational prevention skills for members of our collegiate coalition, the Arkansas Collegiate Network. 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, both through Cardinal Health and several 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.**

## Treatment

- University of Arkansas for Medical Sciences (UAMS) - Dr. Michael Mancino, MD presented **3 sessions on M.A.T. best practices to a total of 148 attendees (5 hours).** MATRIARC participated as a vendor/exhibitor at **3 events, reaching 880 attendees (45 hours).** UAMS received **601 advice and assistance calls, totaling 1202 hours, and held 23 follow-up meetings (46 hours).** Additionally, **495 hours of ADMIS/GPRA assistance** were provided to SOR III-funded agencies. Physician recruitment and education are ongoing, with in-person events resuming, though virtual platforms remain popular for accessibility. Project ECHO continues as the primary educational tool,

offering 1 CME per session for providers treating MOUD patients. Weekly sessions connected healthcare providers with experts in addiction and case management, combining didactic presentations and case discussions. In total, **38 sessions (255 hours, including planning) awarded 2210 CMEs to 203 unique attendees, who participated 2286 times.** UAMS contacted all **63 hospitals**, including follow-ups with non-responsive emergency departments (EDs) and outreach to non-ED sites, requesting educational presentations. Among 29 justice-involved clients screened, 23 tested positive for OUD. Naloxone training was completed for **34 jail staff and inmates, resulting in 4 rescues.** Additionally, **5 participants remained in MOUD treatment post-release for 3 months, and 7 participants for up to 6 months.**

- A collective accomplishment for SOR-funded treatment providers was an average number of **days awaited to enter treatment was only 4.76 days.**
- Arkansas Community Corrections/Prison-Based MOUD Reentry Program (ACC) - Active participants as of 09/30/24 is **87 participants. 96 participants** were released during the reporting period. The program had 34 participants successfully complete the program during the reporting period. The program had 23 participants unsuccessfully discharged from the program. There were **8** medical or other voluntary withdrawals from the program. **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 4400 people were reached as part of program activities during this period. **8 medical staff** overall participated in MOUD education and training facilitated by ACC SOR staff. They also trained approximately **20 professionals** were trained on MOUD services and outreach for the ACC SOR program.

## 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 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 the grant period, **nine 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.

### **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 as much as possible 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**

- Providers stated that participants were unable to continue MOUD treatment services post release from jail because of the lack of housing that allowed them to be on MOUD.
- 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 effective 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**

- 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 Social Services Administration (SSA) to transition to a hub-and-spoke funding model after this grant period. Consequently, these programs will no longer receive direct SOR funding from the SSA; they must instead complete an application process through the Arkansas Alliance of Recovery Centered Organizations 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 - \$319,479.32 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 awards may be used for administrative and infrastructure development costs.

Data Collection & Reporting - \$274,009.50 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 Wyoming Survey and Analysis Center (WYSAC). This is below the required limit that up to five percent of the total grant award may be used for data collection and reporting.