

Current Initiatives:

3. Identify your agency's (or organization's) initiatives that address the opioid crisis since **July 1, 2016** (**State Fiscal Year 2017**)

Initiative #1

A. Describe initiative:

The Louisiana Department of Health, Office of Behavioral Health (OBH) has implemented the Louisiana Opioid State Targeted Response (STR) Initiative to enhance existing statewide prevention, treatment, and recovery support services offered for individuals experiencing or at risk for opioid use disorder (OUD). The priority populations served by this grant are: (1) the under- and uninsured, (2) individuals living in areas with high prevalence rates of overdose or opioid overdose deaths and (3) the criminal justice population. In addition, African American males represent a sub-population of those disproportionately affected by this epidemic due to increased opioid use and will be a population of focus. The goals of the Louisiana Opioid STR Initiative include: 1) Increasing public and professional awareness and bolstering education for prevention and treatment of opioid use, misuse, and abuse; 2) Increasing by 1,670 the number of individuals with a OUD diagnosis who are being treated with EPBs (835 per year for two years); and 3) Increasing recovery support services for 600 OUD clients (300 per year for two years).

Prevention, intervention, treatment and recovery support activities are all supported by the grant. The prevention priority for the Louisiana Opioid STR Initiative utilizes the existing SPF-based infrastructure as a basis to prevent prescription drug misuse and abuse through a statewide awareness and education campaign, with special activities being planned and implemented within each of Louisiana's ten Local Governing Entities (LGE), coordinated with the ten Opioid Treatment Programs (OTP), designated as Methadone clinics. Activities are based on the strategies outlined in SAMHSA's Opioid Overdose Prevention Toolkit, including public education through a media campaign and provider training, with an intervention strategy of Naloxone education and distribution to target populations. To date, approximately 3,000 kits have been distributed to our partners at LGEs throughout the state.

OBH is enhancing and expanding the existing OUD treatment availability statewide through capacity-building at local OTPs and other behavioral health provider networks. This has provided expanded access to evidence-based treatments, particularly Medication Assisted Treatment (MAT), and education and training on non-opioid alternatives. A specialized approach working with the Department of Corrections allows treatment services for offenders participating in re-entry-programs at two designated facilities. This is an integral part of the treatment services provided to the OUD population. Recovery support services are provided to individuals with OUD by newly-hired Behavioral Health Peer Recovery Support Staff at the LGEs, hired with STR funding. These Peers provide local visibility through outreach and educational activities, and coordination with resources for referral and access to services for the OUD population.

This comprehensive approach to prevention, treatment and recovery supports is helping to address the myriad of problems in Louisiana associated with illicit opioid use. The identified goals and outcomes are helping to move the state toward improvements in treatment for OUD and a reduction in the number of lives lost to the opioid epidemic which has plagued our nation and our state.

B. Initiative can be categorized as: (check all that apply)

- Prevention – type of Prevention initiative: Education Awareness Outreach
- Treatment
- Other

C. Current status of this initiative:

1. Start Date: Click or tap here to enter text.
2. In Progress: Yes No
3. End Date: April 30th, 2019

D. Identify the program indicators used to measure the contributions necessary to enable the initiative to be implemented. Indicators may include process and impact. To better understand an indicator, please refer to this link: <https://www.cdc.gov/eval/indicators/index.htm>

- Program Indicator 1: Data Management: The Data Analyst will monitor the integrity of data collection, entry, validation and analysis for consistent and accurate reporting. The sites will be expected to complete and submit monthly client data for tracking and monitoring of outcomes to the Data Analyst, ahead of monthly coordination calls. The monthly coordination calls will also serve as venues for further training and technical assistance to ensure data collection, protocols and procedures are being implemented with fidelity. The security, back-up and privacy policies/ procedures will overlay this process and be monitored for compliance and adherence. Electronic Health Record (EHR) data will be checked for errors and completeness by the Data Analyst, and all raw data files will be converted to a suitable statistical package for analysis.
- Program Indicator 2: Data Analysis: Data will be analyzed to identify the population of focus (i.e., racial, ethnic, sexual/gender minority groups) vulnerable to disparities so that the program evaluation is utilization-focused, developmental, and adherent to established and rigorous evaluation methods. Quantitative data will be cross-tabulated and synthesized with descriptive statistics (frequency, percentage, mean/median/mode, variance, standard deviation, standard error, and range) and analysis of variance (ANOVA) by the Healthy People 2020 groups who have experienced greater obstacles to health (i.e., race, ethnicity, gender, sexual orientation, and other characteristics) at baseline, discharge, and 6 months post-baseline. The analysis will account for barriers encountered during data collection and analysis and efforts made to address and overcome any issues that arise.
- Program Indicator 3: Data Reporting: In addition to reporting in accordance with SAMHSA submission deadlines, the LA Opioid STR Initiative staff will have monthly coordination calls to ensure consistent data reporting of all data and findings to create action items that are necessary to realign and continuously improve program activities. Program outcomes will be reported to community partners and compiled for SAMHSA national evaluation activities, workshops and publications. Data will be aggregated and de-identified to ensure reporting will not attribute specific data responses to clients in accordance to 42 CFR Part 2 and HIPAA privacy rules.
- Program Indicator 4: Quality Improvement Process: LA Opioid STR Initiative staff will meet regularly to review the key indicators of project implementation and development in order to identify any areas of improvements and meet SAMHSA's reporting requirements. These meetings, as well as the monthly coordination calls where sites will update and present data, will allow staff to identify and resolve problems in meeting program objectives and performance measures. As a result, staff will be able to meet with providers to develop recommendations for improvement and remedial action as needed.

E. Target Population of this initiative: (check all that apply)

1. Age: 0-17 18-21 22-45 46 and older
2. Gender: Male Female Other Data not available
3. Geographic Location(s) – Identify the geographic location(s) impacted by your initiative (please check the appropriate type and list the specific region(s) in the text box provided below) :
 Statewide Parish Regional Health Unit Judicial District
 Local Governing Entity (LGE) Region/Human Services District Other geographic region

Click or tap here to enter text.

F. Identify funding source for this initiative: (check all that apply)

- State general funds Federal grant funds Local/parish funds
 Private/foundation funds Other funds

G. Partnerships: List any other agencies or organizations that you partner with on this prevention or treatment initiative.

- **Partnership 1:** Local Governing Entities: Acadiana Area Human Services District; Capital Area Human Services District; Central Louisiana Human Services District; Florida Parishes Human Services Authority; Imperial Calcasieu Human Services Authority; Jefferson Parish Human Services Authority; Metropolitan Human Services District; Northeast Delta Human Services Authority; Northwest Louisiana Human Services District; South Central Louisiana Human Services Authority.
- **Partnership 2:** Opioid Treatment Providers: Baton Rouge Comprehensive Treatment Center; BAART Breaux Bridge; Center for Behavioral Health, LA – Monroe; Center for Behavioral Health, LA - Shreveport; Choices of Louisiana, Inc. – Alexandria; Choices of Louisiana, Inc. – LaPlace; Choices of Louisiana, Inc. - North Shore; DRD New Orleans Medical Clinic; Behavioral Health Group - Lake Charles; Behavioral Health Group - New Orleans
- **Partnership 3:** Louisiana Department of Public Safety and Corrections
- **Partnership 4:** Click or tap here to enter text.

H. Can you identify any gaps or opportunities for partnerships?

As we have proceeded through Year 1 of the Grant, it has become increasingly apparent that transportation is a major barrier for potential grant clients to access treatment and support services. This is true in both rural and urban areas. Grant clients are also finding it difficult to adequately address childcare needs, which can preclude regular attendance at the OTP. To ensure the widest possible access to treatment, it is also imperative that we assist prospective clients to understand that they may now be eligible for MAT and related services (especially methadone, which is not covered by Medicare or Medicaid), and assist them in completing applications and other paperwork.

The Office of the Secretary of LDH has developed a Steering Committee that includes all sections within LDH, which aims to coordinate department efforts related to opioids. This ensures that the various Divisions within LDH that are addressing OUD are collaborating to prevent duplication of efforts and to identify gaps in services. This collaboration creates a framework which enables LDH to address OUD in a coordinated, consolidated approach that incorporates all health related fields, including behavioral health, public health, and data collection and analysis.

If your agency has no other initiatives, go to question 4, page 18