



Virginia Department of
Behavioral Health &
Developmental Services

Virginia's Use of State Targeted Response to the Opioid Crisis Funds

"Opioid Prevention Treatment and Recovery- Virginia - OPT-R"

Report on Year 1
Joint Commission on Health Care
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DBHDS Vision: A life of possibilities for all Virginians

Overview

- Funds authorized in 21st Century CURES Act through the Substance Abuse and Mental Health Services Administration (SAMHSA)
- Funds allocated to states by formula - \$9,762,332
- Requirements:
 - No more than 5% for administration
 - At least 80% of remaining funds to support treatment of opioid use disorder
 - Only FDA approved medications:
 - methadone – opioid treatment programs
 - buprenorphine products (i.e., Subutex[®], Suboxone[®])
 - naltrexone products (i.e., Vivitrol[®])
 - naloxone (i.e., Narcan[®], Evzio[®])



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Slide 2

Goals:

- Decrease prescription drug and heroin overdoses
- Increase the number of individuals receiving treatment for Opioid Use Disorder (OUD)
- Increase the number of people with OUD who receive recovery services.

Planning Process

- Community Selection Based on Data
 - Community-based epidemiological workgroups
 - Virginia Social Indicator (VASIS) Dashboard (<https://vasisdashboard.omni.org/rdPage.aspx?rdReport=Home>)
 - Community coalition strategic plans submitted by CSBs
 - Office of the Chief Medical Examiner - opioid-related death rates
- Utilized CSB infrastructure for service delivery
- Partnered with other state agencies to develop or expand existing capacity and infrastructure

Virginia's STR Grant

Virginia's state targeted response to the opioid epidemic;
Opioid Prevention, Treatment – Recovery (OPT-R)

includes

Prevention, Treatment, and Recovery.


Goals and objectives were developed in each of these
three areas.

Direct Service Strategies

- Prevention
 - 35 CSBs selected to receive funding to support coalition building, community education, and implement specific supply reduction strategies
- Treatment
 - 18 CSBs initially selected to initiate or expand use of medication assisted treatment (MAT) – expanded to 23
- Recovery
 - Regional Warm Lines in all five regions
 - Introduce peer supports to emergency rooms to provide linkage to services for people who overdose

CSB STR Participants

CSB	Treatment Funding	Recovery Funding	Prevention Funding
Alexandria			x
Alleghany Highlands			x
Blue Ridge	x	x	x
Chesapeake			x
Chesterfield	x	x	x
Colonial	x	x	x
Crossroads			x
Cumberland	x	x	
Danville-Pittsylvania	x	x	x
Dickenson County	x	x	
District 19			x
Eastern Shore	x	x	x
Fairfax Falls-Church			x
Goochland Powhatan	x	x	x
Hampton-Newport News	x	x	x
Henrico	x	x	
Highlands	x	x	x
Horizon			x
Loudoun			x
Middle Peninsula Northern Neck	x	x	
Mount Rogers	x	x	x
New River Valley	x	x	x
Norfolk	x	x	x
Northwestern	x	x	x
Planning District One	x	x	x
Piedmont	x	x	x
Portsmouth	x	x	x
Prince William			x
Rappahannock Area	x	x	x
Rappahannock-Rapidan	x	x	x
Region Ten			x
Richmond Behavioral Health Auth	x	x	x
Rockbridge			x
Southside			x
Virginia Beach	x	x	x




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Slide 7

Virginia OPT-R Prevention Strategies

1. Coalition development	2. Heightening Community Awareness/Education	3. Supply Reduction Environmental Strategies	4. Tracking and Monitoring	5. Harm Reduction
Coalition capacity building Community mobilization Recruitment and engagement Facilitating systems of care linkages	Social marketing campaigns Targeted media messaging, i.e. parents of adolescents, Senior Citizens, Pregnant Women Community Events Prescriber, Pharmacy, Emergency Department, and Patient Education	Rx Bag Stickers Smart Pill Bottles Drug Take Backs (Boxes, Drop-Off Locations) Drug Deactivation Packets Proper Disposal with targeted groups, i.e. hospice, funeral homes	PDMP approaches, i.e. incentivizing prescribers to activate their PDMP Hospital Emergency Department Tracking	Naloxone Trainings Abatement Task Force - Identify problem properties where drug use is witnessed



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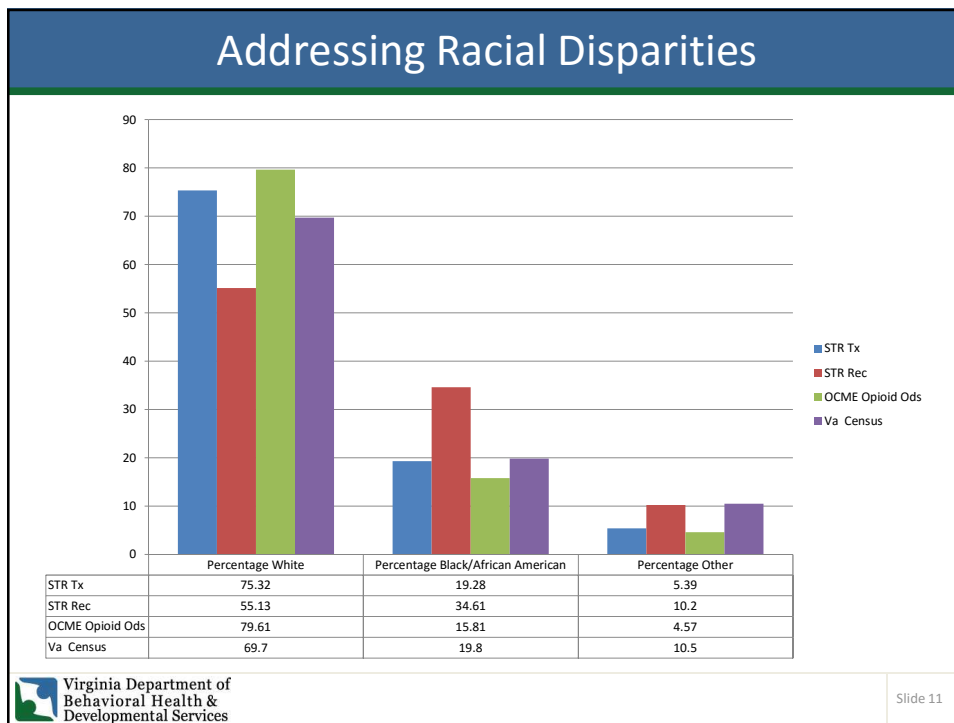
Slide 8

Number of Persons Served (Unduplicated) for Opioid Use Disorder Treatment Services

Age	Total	White		African American/Black		Other/Unknown	
		Male	Female	Male	Female	Male	Female
17 and Under	4	2	1	1	0	0	0
18-24	86	37	33	3	2	4	7
25-44	689	272	299	61	28	14	15
45-64	219	61	48	69	27	10	4
65 +	3	1	0	2	0	0	0
TOTAL	1,001	373	381	136	57	28	26
Pregnant	65		55		5		5

Number of Persons Served (Unduplicated) for Opioid Use Disorder Recovery Support Services

Age	Total	White		African American/Black		Other/Unknown	
		Male	Female	Male	Female	Male	Female
17 and Under	3	0	1	1	0	0	1
18-24	230	85	42	31	42	12	18
25-44	215	54	78	25	36	8	14
45-64	127	22	35	39	25	3	3
65 +	0	0	0	0	0	0	0
TOTAL	575	161	156	96	103	23	36
Pregnant	0		0		0		0



- ### Outcome Measures
- National Outcome Measure System (SAMHSA) collected at admission and discharge:
 - Use of alcohol and other drugs
 - Employment/education status
 - Criminal justice involvement
 - Housing stability
 - Social connectedness
 - Retention in treatment
 - Cost effectiveness
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- Slide 12

Prevention Achievements and Challenges

- 365,649 Virginians reached through community mobilization strategies.
- 35 local community and coalition readiness assessments were conducted.
- 6,050,174 reached through local media campaigns and targeted media messaging.
- 513,204 community members reached and educated about the availability of naloxone.
- 2,323,718 participated in safe storage and disposal efforts to include: drug deactivation packets, drug take backs, prescription drug lock boxes, and smart pill bottles.

Treatment and Recovery Achievements and Challenges

- Treatment: 1,001 individuals received treatment for OUD that included MAT as well as assistance with addressing barriers to treatment, such as transportation and safe, sober housing.
- Recovery: 575 individuals received assistance from a trained peer recovery specialist
 - Ten Warm Lines established statewide = 764 Calls
 - Six MOUs signed with hospital Emergency Departments in 2 regions; 208 ED follow-up calls
- Lack of access to qualified prescribers in some regions hampered ability of CSBs to provide MAT
- Lack of transportation to services in rural and suburban areas
- Lack of safe housing for individuals seeking services
- Hospital concerns about Peers in Emergency Departments

Other Initiatives


- Distributed “take-back” kits to local pharmacies (VDH)
- Expanded Project ECHO® (grand rounds for providers) to support buprenorphine prescribers (VDH)
- Funded purchase of naloxone for distribution at local health departments (free access) - VDH
- Funded naloxone for State Police for officers to carry (DSP)
- Funded development and production of video trainings for
 - Child Protective Services Workers (DSS)
 - Early Intervention Virginia – in home services for at-risk families developed by James Madison University (VDH)
- Purchased and distributed 1,000 REVIVE! kits to Recovery and other community organizations to support use of naloxone
- Provided training for clinicians specializing in adolescent and young adult SUD treatment about the use of MAT

Directions for Y2

- **Prevention:**
 - Continue Coalition Development in Communities
 - Drug Take Back Initiatives
- **Treatment:**
 - Expand the number of CSBs providing MAT
 - Continue Project ECHO (VDH)
 - Provide training for prescribers to qualify for “waiver” (VDH)
 - Provide online instruction for physicians about addiction and pain management to earn CMEs (DHP)
 - Continue funding access to naloxone
- **Recovery**
 - Expand peers in ED by two additional EDs
 - Continue Warm Lines
 - Support for Peer Training and Certification

State Opioid Response (SAMHSA)

- \$15, 580,846 for each of two years
- Submitted August 13 2018
- Expand and enhance Prevention support to all CSBs
- Expand number of MAT providers
 - All CSBs that have a prescriber
 - Other community settings (FQHCs)
 - Training and technical support for prescribers (VDH)
 - Improve access to MAT and supports for individuals returning to the community from DOC prisons (pilot) (DOC)
 - Continue Project ECHO© (VDH)
 - Establish Prescriber Warm Line (VDH)
 - Reduce the incidence of NAS by providing supports to pregnant women (VDH/DMAS)
- Continue Peer Recovery Supports
 - Warm Lines
 - Provide peer support to individuals returning to community from local jails
 - Expand use of peer in EDs
 - Provide assistance to Virginia colleges in establishing recovery environments




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Slide 17

Pregnant and Postpartum Women - SAMHSA

- Virginia is one of three states in the nation to receive this pilot grant: \$1,097,813 X 3 years
- Goals:
 - Reduce abuse of alcohol and other drugs
 - Increase engagement in treatment services
 - Increase retention in the appropriate level and duration of treatment
 - Ensure that opiate-dependent women have access to clinically appropriate MAT and psychosocial support services.
- Nine sites:

Blue Ridge	Cumberland Mountain	Dickenson County
District 19	Hampton Newport News	Planning District One
Rappahannock Area	Region Ten	Virginia Beach



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Slide 18

Questions/Contacts

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