

# DELAWARE

## USE OF STR/SOR GRANT FUNDS TO ADDRESS THE OPIOID CRISIS

### Background on opioid-specific grants to States

The Substance Abuse and Mental Health Services Administration (SAMHSA) administers the State Targeted Response to the Opioid Crisis (STR) and State Opioid Response (SOR) grant programs. These grants aim to address the opioid crisis by increasing access to treatment, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) in the States. States received a total of \$500 million for each of FY 2017 and FY 2018 through STR. Additionally, in FY 2018, States received an additional \$1 billion in new funding through the SOR grants. In FY 2019, States received \$1.5 billion through SOR. Eligible applicants for both STR and SOR are the State alcohol and drug agencies.

### Allocations for Delaware

Delaware received \$2 million through STR for each of FY 2017 and 2018, and \$12.5 million through SOR in FY 2018. In FY 2019, Delaware received a total of \$19.1 million through SOR.

### Overview of Delaware's efforts to address the opioid crisis

Both the Delaware State Targeted Response (STR) grant and the State Opioid Response (SOR) grant funds are being used to improve the treatment and recovery systems in Delaware. The overarching intent of the STR and SOR projects is to improve the entire continuum of care for those with OUD: prevention, access/gateway, treatment, and recovery. Goals relate to improving prevention efforts, increasing access to treatment through the development of new referral pipelines, increasing treatment capacity (specifically for medication-assisted treatment [MAT]), improving wraparound services, and developing/using data systems for action. STR/SOR funding supports systems improvements that benefit individuals of all ages, and genders across all counties in the State, with an enhanced focus on youth/young adults and detainees leaving the Department of Correction (DOC).

# Prevention: stopping opioid misuse before it starts

## School-based interventions

Through a Memorandum of Understanding (MOU), the Division of Substance Abuse and Mental Health (DSAMH) is providing funding to the Department of Education (DOE) to support Local Education Agencies (LEA) and charter schools to implement a Multi-Tier System of Support for Behavioral Health. To assess assets and opportunities around school health in school districts across the State, DSAMH and its partner, Delaware's Division of Public Health (DPH), are working with DOE to support districts in undertaking a comprehensive school health resource and needs assessment. Districts will complete the assessments and use the data to inform their requests for funding, which can include primary, secondary, or tertiary interventions. Under SOR, this includes funding for and technical assistance on:

- The creation or enhancement of school- and district-level health committees as part of school improvement and management teams
- Primary prevention of substance use
- Selection and implementation of an evidence-based, developmentally appropriate health education curriculum
- A series of trainings on Screening, Brief Intervention, and Referral to Treatment (SBIRT) for school nurses, primary care providers, and for attendees at the Delaware State Education Association conference
- Creation of enhanced responsive and informative data systems

## Work with Local Coalitions

Using STR funding, DSAMH supports the Delaware Healthy Neighborhoods Initiative, focused on addressing population health challenges by creating sustainable interventions to improve the health of communities. One of the four priority areas is addiction. To build on the existing infrastructure started under Healthy Neighborhoods, three local entities were selected to enhance statewide prevention efforts related to opioid use. These organizations and their projects include the following:

- Mental Health Association (MHA): MHA is supporting the continuation of their peer internship program. MHA identified two interns to remain in the program and assist with the transition to a new cohort of interns and the maintenance of infrastructure enhancements that were made through the program. Both interns continued to receive supervision and mentorship from MHA staff. The interns served 53 unique individuals, helped with identifying strengths and goals 37 times, assisted with self-advocacy 25 times, and educated individuals on their rights 18 times. MHA also began soliciting participation for the next cohort of interns from four organizations. MHA has also identified three potential sources of funding for a second cohort in order to continue supporting the peer internship program once STR funds are no longer available.

- Sussex County Health Coalition (SCHC): SCHC is raising awareness of prescription drug misuse in Sussex County. The coalition planned a “Day of Hope” awareness day on June 12, 2019. The event had over 200 community members and prevention specialists in attendance. Speakers for the day include: Dr. Gilbert Botvin – national prevention education specialist; Dr. Julius Mullen – Trauma informed care; Dr. James Walsh – Mindfulness, relaxation for pain, PTSD, anxiety and addiction; Panel Discussion – the impact of addiction on family members; Naloxone training; and a Special Break-out session for the Faith-Based community members. SCHC is also produced three public service announcements for distribution to local hospitals as well as doctor's offices that address the dangers of opioids and empower the community ask questions when receiving prescriptions.
- Connections Community Support Programs, Inc.: Connections is using the funding on efforts to reduce incarceration and diversion from arrest for individuals with co-occurring addiction and mental health issues. Connections launched the Georgetown Police Connections Alliance (PCA) program in February 2019. Since then, a clinician has been embedded in the police department ride-along program to engage individuals in a more appropriate level of care based on the impetus behind their criminal behavior and provide individuals with immediate access to treatment. Over 40 individuals were referred to treatment with some of those being transported at the time of contact. In addition, there were a total of 60 substance use/mental health contacts with 14 diversions from arrest and 7 diversions from emergency rooms. The clinician also maintained contact and provided case management services with individuals throughout the program, resulting in 84 individual follow-up contacts. Connections also presented at a National Alliance on Mental Illness (NAMI) sponsored Crisis Intervention Team (CIT) training for Delaware police agencies and educated police about treatment access for individuals that may need it.

### **Special Populations**

STR prevention activities are aimed primarily at friends and family of individuals with OUD and individuals at risk of incarceration and law enforcement involvement. SOR prevention activities are primarily aimed at school staff and students at the school and LEA level.

### **Outcomes**

- In March 2019, DSAMH conducted SBIRT training for 64 school nurses at the Delaware School Nurses Association Spring Conference.
- In April 2019, DSAMH coordinated training on substance use and SBIRT for approximately 40 teachers and other school personnel at the Delaware State Education Association Professional Learning day.

## Increasing access to treatment

Under the Delaware STR and SOR funding, efforts to increase access and gateways to treatment, as well as treatment (particularly MAT) itself, include the following:

- Delaware Substance Use Treatment and Recovery Transformation (START) Initiative:  
The Delaware START Initiative is an effort to increase access to care and treatment for individuals living with substance use disorder. The goal of this initiative is to foster system-wide improvements in order to engage more Delawareans suffering from substance use disorder in treatment, while also meeting their accompanying needs for housing, employment, education, and other wraparound services. The new system of care will ensure 24/7 support through certified peer recovery specialists who will meet with individuals suffering from addiction wherever they connect with the system – the hospital emergency department (ED), a doctor's office, Emergency Medical Services (EMS) transport, a police encounter, or through a family- or self-referral. Once individuals are in treatment, peer recovery specialists will help clients to navigate and stay engaged in their own care.
- START Learning Collaborative: The pilot phase of the START Learning Collaborative was funded with STR dollars. This kickstarted work with two treatment providers and a certified peer recovery specialist provider and has expanded to additional Substance Use Disorder (SUD) treatment providers. With SOR funding, this Learning Collaborative is expanding to reach primary care providers, hospitals/EDs, Institutions of Mental Disease (IMDs), Federally Qualified Health Centers (FQHCs), and community providers. The Learning Collaborative emphasizes a quality improvement process, based on the Institute for Healthcare Improvement (IHI) Breakthrough Series Model, to implement and test innovative approaches for engaging and retaining individuals with SUD/Opioid Use Disorder (OUD) in high quality, comprehensive, coordinated, evidence-based, person-centered treatment and care, including the provision of wraparound services. Participating providers/organizations are developing and implementing workflows and case management systems related to providing innovative and rapid-response services to engage individuals with OUD and assisting them in navigating Delaware's SUD system; implementing standardized screening processes for SUD; increasing access to Medication Assisted Treatment (MAT) services; and utilizing the Delaware Treatment and Referral Network (DTRN). The aim is to support all Learning Collaborative participants in engaging any client who accesses the system.
- Delaware Treatment and Referral Network (DTRN): DTRN is an online, bi-directional treatment referral platform that allows Delaware health care providers seeking services for their patients to make an online referral with one of the participating organizations. DTRN is run from the OpenBeds® platform and provides real time information about treatment availability. Participating organizations update their bed, slot, or appointment capacity at least twice a day so that referring health care providers are aware of what services are available for their patients in real-time.

- Bridge Clinics: The first of three Bridge Clinics opened in January 2019. The Bridge Clinic has one psychiatric resident and five psychiatric social workers, one peer supervisor, and one navigational peer to serve clients, as well as administrative and operations staff. The Bridge Clinic provides OUD and mental health screening and referral to treatment; psychiatric evaluation for individuals with co-occurring disorders; treatment initiation to bridge patients to their permanent provider; and naloxone training to Bridge Clinic clients and in the community. Clinic staff are also doing outreach and promotion to raise awareness of the Bridge Clinic location and services. As part of the outreach, staff educate community members at events and public libraries about overdose prevention and available treatment. If Clinic staff encounter an individual at an event who needs services, they connect the individual to transportation from the event to the Bridge Clinic for assessment and referral to treatment. The second Bridge Clinic opened in Sussex County in July 2019 and the third Bridge Clinic will open in Kent County by September 2019.
- Hospitals and Institutions for Mental Disease (IMDs): As with other providers and organizations participating in START, hospitals and IMDs are developing referral pathways to screen individuals, provide brief intervention (including, if appropriate, MAT initiation), and refer to treatment as one of the gateway access points on entry into Delaware's treatment system. As part of the work with hospitals, DSAMH is working to identify interested practitioners and connecting them with training and resources to become DATA waived, resulting in an increase in the number of providers in hospital emergency departments who can administer/initiate MAT.
- Addiction Treatment Resource Center (ATRC): The ATRC provides technical assistance to Delaware providers statewide. ATRC provide presentations and technical assistance trainings on various topics (e.g., identification and diagnosis of OUD/SUD, treatment of OUD in pregnant and parenting women, addressing stigma and stereotypes) as well as direct supervisions of new MAT prescribers either over the phone and in-person. The ATRC also offers in-person waiver trainings for prescribers with the first training being hosted on July 10, 2019. A committee has been established with subject matter experts and staff from Delaware's Learning Center to develop a curriculum and education opportunities for the ATRC as well as a website.

### **Adolescents and young adults**

- School-based access and treatment: Five additional behavioral health consultants (BHCs) will be hired to provide guidance and technical assistance to all 19 LEAs in Delaware on addiction issues, including primary prevention, screening, identification, and referral for substance use concerns; identifying on-site treatment needs for students; planning for transitions between middle and high schools or between school locations; and other issues as needed
- School-Based Wellness Centers (SBWC): DSAMH is working with DPH and Department of Services for Children Youth and their Families (DSCYF) to implement an SBWC initiative to develop a system by which students are routinely screened for substance

use and mental health conditions and referral pathways to community providers. All 32 SBWCs will receive funds to increase their capacity to provide addiction services, through partnerships with community providers and using telehealth approaches.

- Treatment for transitional youth (age 12-17) and young adults (ages 18-25): DSAMH and partners, including the Division of Prevention and Behavioral Health Services (DPBHS), the Division of Medicaid and Medical Assistance (DMMA), and external social service agencies, are working to establish an addiction program to serve 200 transitional youth and young adults ages 12-17 and 18-25 per year. DSAMH and its partners are working to enhance recovery services and integrate youth transitional services into DSAMH's adult system of care. To do so, all partners are working towards maintaining and expanding treatment accessibility and provider resources by removing barriers to treatment and providing supports to the families.

### **Individuals involved in the criminal justice system**

- Coordination with Department of Correction to provide pathways and linkages to care: An MOU is in place with the Department of Correction (DOC) to engage, identify, refer and link DOC-involved individuals in need of assessment and/or treatment to address substance use and/or mental health issues. DSAMH is partnering with DOC to develop workflows and pathways that support improved coordination between DOC and the DSAMH System of Care and track outcome data and performance measures.

### **Outcomes**

- MAT: Between September 30, 2018 and March 31, 2019, 1,999 clients received medication-assisted treatment. From September 30, 2018 to March 31, 2019, 4,759 received Methadone, 1,028 received Buprenorphine, and 77 received Naltrexone.
- START Initiative: Engaged ten SUD providers, one peer support provider, six hospitals, four IMDs, three FQHCs, two community addiction/mental health providers, and eleven primary care practices in a quality improvement learning collaborative to increase access to treatment for individuals with OUD/SUD.
- Bridge Clinics: One of the targeted three Bridge Clinics has already opened its doors and is providing services to individuals. The second Bridge Clinic opened in the July 2019 and the third will open by September 2019. Since opening on January 1, 2019, the Bridge Clinic has served 143 individuals and logged 125 phone calls (data through April 30, 2019).

### **Overdose reversal efforts: saving lives**

- Delaware Overdose Survival Education (DOSE) Trainings: Under STR funding, DSAMH has contracted with Brandywine Counseling and Community Services to support a series of statewide community-level trainings. DOSE is a program designed for anyone who wants to help opioid users (including themselves) avoid and survive an overdose.

Participants complete a one-hour training workshop, including education on using naloxone. Trainings are in progress and include friends and family as well as individuals at high-risk.

- Pilot ED Program: DSAMH is also working with the Department of Public Health and all six hospital EDs on a pilot for naloxone distribution. DSAMH, DPH, and the hospitals are working through logistical issues related to the MOU, process flow, and provider training, but planning is underway.
- Awareness Campaign: DSAMH developed a naloxone awareness campaign with the intent of increasing awareness of naloxone and its availability throughout the State, while also driving people to HelpsHereDE.com to find a location to acquire naloxone near them. The campaign included digital ads (Facebook, Instagram), sticker for syringe exchange bags, a one-quarter page print ad, and a radio public service announcement (PSA).
- Development of MOU with DPH: DSAMH is developing an MOU with DPH to purchase naloxone kits for additional trainings and ED distribution. DPH has an established process for the bulk purchasing, storage, and distribution of naloxone, along with a method for tracking distribution. Since DSAMH wants to ensure the naloxone is stored appropriately, DPH will assist DSAMH to manage the naloxone supply. As it is needed (i.e., trainings, etc.), DSAMH will submit a request to DPH for naloxone kits to be delivered to the specific site. Additional funding has been allocated in the SOR grant to distribute naloxone to patients being discharged from hospital EDs, treatment access centers, and the correctional system.

## Outcomes

- Since July 2018, 485 individuals have been trained through the DOSE program and 274 doses of naloxone have been distributed. Thirty-four reversals had been reported as of April 2019.

## Supporting recovery

STR and SOR funds are supporting the following:

- Peer navigators: Two peer navigators have been hired to support the two Bridge Clinics that have opened. An additional peer navigator will be hired and trained as Kent County Bridge Clinic is opened.
- Peer recovery specialists: With STR funding, the certified peer recovery support specialist provider is working with hospitals to ensure that hospitals statewide have access to peers 24/7 in their emergency departments. Agreements are in place with two hospitals in the State and final negotiations with two additional hospitals are occurring. (Note: the largest health care system in the State has an existing program in place with a treatment provider to have peers in their EDs). With SOR funding, DSAMH aims to identify currently certified peer recovery specialists in the State who have not been trained on recognition of opioids overdose and naloxone administration, and

then train them in these topics. In addition, naloxone training was integrated into the peer certification trainings conducted by the Mental Health Authority (MHA) of Delaware. During the SOR funding period, DSAMH and DPBHS will also certify twenty-four peer recovery specialists, and train thirty supervisors of peer recovery specialists. Recruitment is underway for trainees. Additionally, DSAMH and MHA will increase peer certification training capacity by increasing the number of peer certification trainers and peer specialist supervisors. DSAMH will also hire and train additional peer recovery specialists for mobile crisis and county-based services for all three counties.

- Transportation: DSAMH will implement a transportation system that serves 100 clients per year and targets areas of need such as Sussex County and New Castle County. Research is underway regarding viable client transportation models, including systems used in other States and jurisdictions. DSAMH has also met with Delaware Department of Transportation (DELDOT) to discuss the possibilities of adding additional stops or new patterns to routes along treatment and housing paths.
- Employment: DSAMH will explore supported employment options and train fifty representatives of industries/companies interested in employing DSAMH clients and establish a related case management system for supported employment. DSAMH has researched innovative employment options for individuals with serious and persistent mental illness (SPMI) and SUD diagnoses and for those with job-disqualifying records due to involvement in the criminal justice system. DSAMH and DSAMH treatment providers had a productive meeting with leadership and members of the construction industry to discuss employment opportunities for DSAMH clients. Both providers and employers demonstrated a willingness to facilitate employment through job readiness, job training, and on the job support for soft skills. A screening tool is being developed to share with the group before the next meeting.
- Housing: Over the funding period DSAMH, the Delaware State Housing Authority (DSHA), and other partners will provide additional level four recovery housing to (140 clients over the two years). Meetings with Piece by Piece and Connections have resulted in additional availability of beds in level four recovery housing in year one of SOR.

## Outcomes

- STR Recovery Support: 2,346 unique individuals received recovery support services from September 2018 – March 31, 2019 (Data source: TEDS). Recovery support services are defined as attending self-help or support groups or residing in a sober living facility at any point during the time period.
- Peer training:
  - Peer 101: Eight participants/six completed
  - Exploring the Neurobiology of Opioid Addiction Continuing Education Workshop (two locations): 12 participants/12 completed
  - Peer Supervision: five participants/ five completed
  - Peer Recovery Specialist Certification Class: 14 participants/14 completed
  - Oxford House Conference (hybrid Peer 101): 60 participants (staff and residents)

- Housing: Thirty integrated recovery services beds came online in New Castle County since December 2018. Sober living, intensive outpatient (IOP), and other treatment services are co-located on the same campus. Twelve additional integrated recovery service beds came online in Harrington, Delaware by December 2018. Since January 2019, 31 clients have participated in workforce development, 15 clients have secured employment, and two clients have completed a six-week construction skills training and secured employment.

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