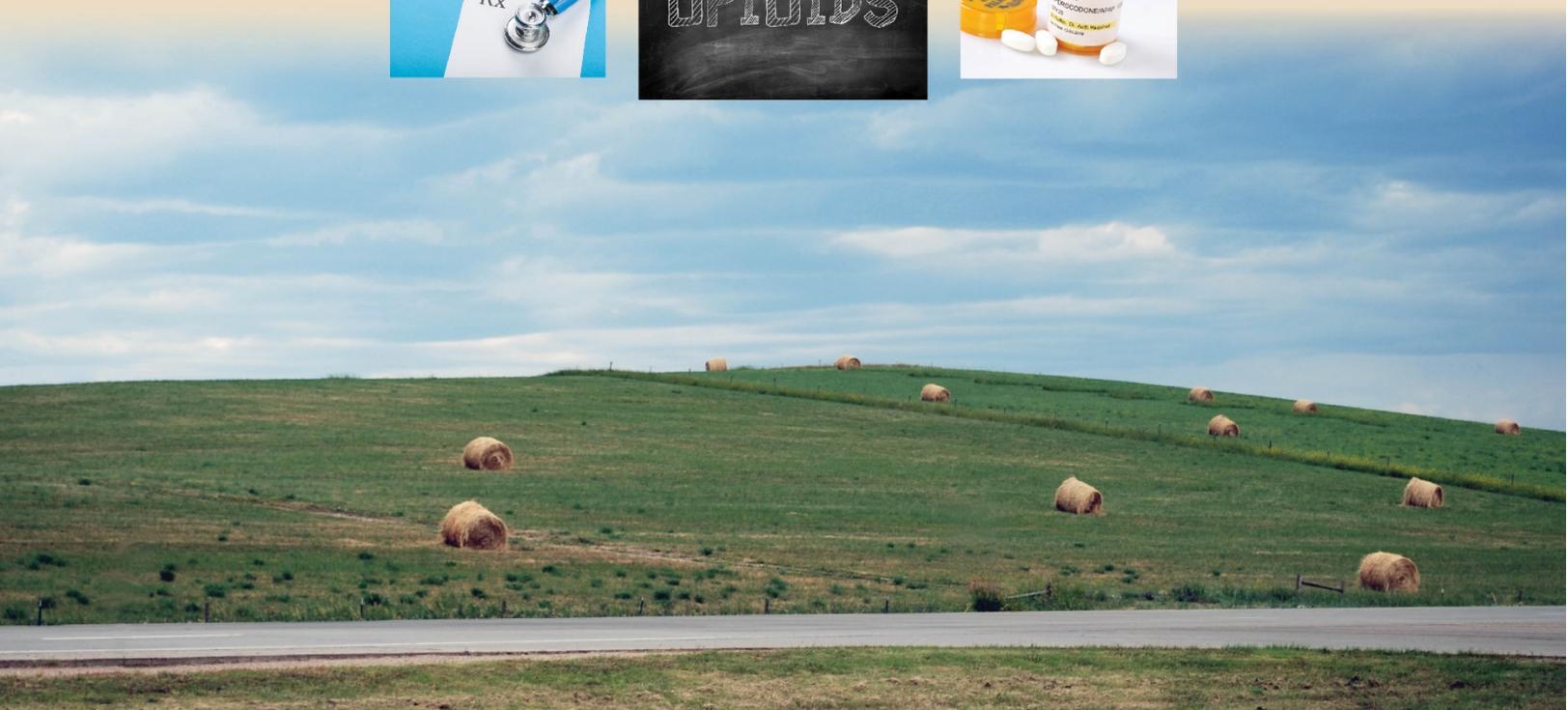




# SOUTH DAKOTA'S STATEWIDE TARGETED RESPONSE TO THE OPIOID CRISIS

A Strategic Plan Framework adapted from the National Governors Association's *Finding Solutions to the Prescription Opioid and Heroin Crisis: A Road Map for States*



# South Dakota's Opioid Road Map

## Executive Summary

### The Problem

South Dakota has the opportunity through strategic planning and initiatives to prevent an opioid abuse epidemic and in turn save lives that other states are seeing lost to opioid-related deaths.

The South Dakota Department of Health (SD DOH) was awarded the *Prescription Drug Overdose: Data-Driven Prevention Initiative* planning grant from the Centers for Disease Control and Prevention (CDC) to support and build efforts to track and understand the full impact of opioid use and abuse in South Dakota. An Opioid Abuse Advisory Committee was formed in 2016 to oversee this work, comprised of stakeholders representing SD DOH, South Dakota Department of Social Services (SD DSS), South Dakota State Medical Association (SDSMA), South Dakota Pharmacists Association, South Dakota Board of Medical and Osteopathic Examiners, South Dakota Office of the Attorney General, South Dakota Association of Healthcare Organizations (SDAHO), Indian Health Service (IHS), tribal health, Volunteers of America, Dakotas (VOA), state legislators, and family/victim advocates. The purpose of the grant is to: a) conduct a needs assessment; b) complete a strategic plan that responds to those needs and strengthens South Dakota's capacity to prevent misuse/abuse of opioids; and c) develop a strategy to enhance and integrate current surveillance efforts for more accurate, timely data.

In addition, SD DSS received support from the Substance Abuse and Mental Health Services Administration (SAMHSA) through the State Targeted Response to the Opioid Crisis (STR-Opioid) grant in May 2017. The purpose of the grant program is to a) increase access to treatment, reduce unmet treatment need, and reduce opioid overdose-related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) including prescription opioids as well as illicit drugs such as heroin; b) supplement current opioid activities being implemented; and c) support a comprehensive response to the opioid epidemic using a strategic planning process inclusive of needs and capacity assessments. Representatives from the SD DSS STR-Opioid project participated in the work of the Opioid Abuse Advisory Committee throughout the summer of 2017 to accomplish this work collaboratively.

Evidence-based strategies and the Opioid Abuse Advisory Committee needs assessment informed this strategic plan. In addition to the high-level summary provided here, the full needs assessment report is available online at <https://doh.sd.gov/news/opioid.aspx>.

The framework of the Opioid Abuse Advisory Committee strategic plan is shared jointly between the Department of Social Services and Department of Health. In addition, other stakeholders including but not limited to the criminal justice sector may develop additional strategies and action plans based on the needs assessment report and best practices in their field.

## Target Population/Area of Focus

The Opioid Abuse Advisory Committee acknowledged that the target population was not individuals with cancer or chronic debilitating pain, or those managing end of life conditions, but rather individuals whose pain management may not require the utilization or duration of drugs that could put a person at risk for addiction.

There was agreement across the disciplines within the Committee that much was to be learned from each other regarding effective pain management balanced with responsible prescribing practices. The Committee also acknowledged and holds professional respect for each of the disciplines involved in this continuum, which ensures a collaborative effort is embraced for the citizens of South Dakota potentially at risk of opioid abuse issues.

## Status of Plan Development

Two efforts led by different state agencies in South Dakota drove the development of this strategic plan. These efforts – funded by SAMHSA and CDC, respectively – are being implemented concurrently but at different timelines as per the terms of each Notice of Award. Thus, the plan at this time reflects varying degrees of objective development in terms of action plans, known or confirmed funding sources, measures, and associated timelines. The plan will be updated on a regular basis through the work of the Opioid Abuse Advisory Committee and state leaders from SD DOH and SD DSS.

## Joint Agreement to Adhere to Evidence-Based Practices

The Committee opted to follow the already vetted National Governors Association (NGA) Opioid Road Map, along with reference to other evidence-based models available such as CDC Guideline to Prescribing Opioids for Chronic Pain<sup>1</sup>, and SAMHSA Overdose Prevention Toolkit<sup>2</sup> as a guiding document for the state-based strategic plan. The resulting South Dakota Opioid Abuse strategic plan is organized under the NGA health prevention and treatment strategies.

In addition, the Committee developed and agreed upon a set of guiding principles to serve as a footing for their collaborative work moving forward.

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<sup>1</sup> <https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm>

<sup>2</sup> <https://www.samhsa.gov/capt/tools-learning-resources/opioid-overdose-prevention-toolkit>

# Opioid Misuse in South Dakota

## SUMMARY OF 2017 NEEDS ASSESSMENT FINDINGS

### In 2015...

**66 individuals died in a drug-related death.** (Vital Statistics, 2015)

24 (36%) OF THOSE DEATHS ARE ATTRIBUTED TO OPIOIDS



South Dakota ranked **2<sup>nd</sup> lowest** in the nation for drug overdose deaths. (CDC, 2015)

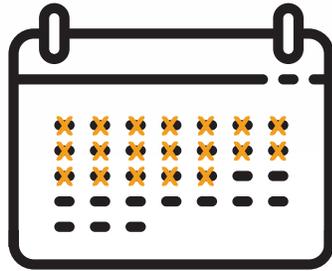


**330 individuals were HOSPITALIZED** as a result of drug use (SDAHO, 2015)

Enough doses of opiates were prescribed to South Dakotans in 2015 to medicate every SD adult **around-the-clock** for

**19 STRAIGHT DAYS.**

(SD PDMP Statistical Information, 2015)



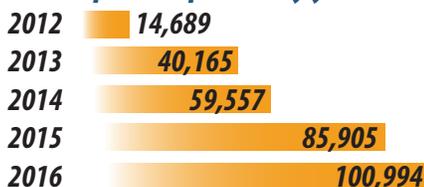
### Prescription Drug Monitoring Programs

continue to be among the

MOST PROMISING STATE-LEVEL INTERVENTIONS

to improve opioid prescribing, inform clinical practice, and protect patients at risk.

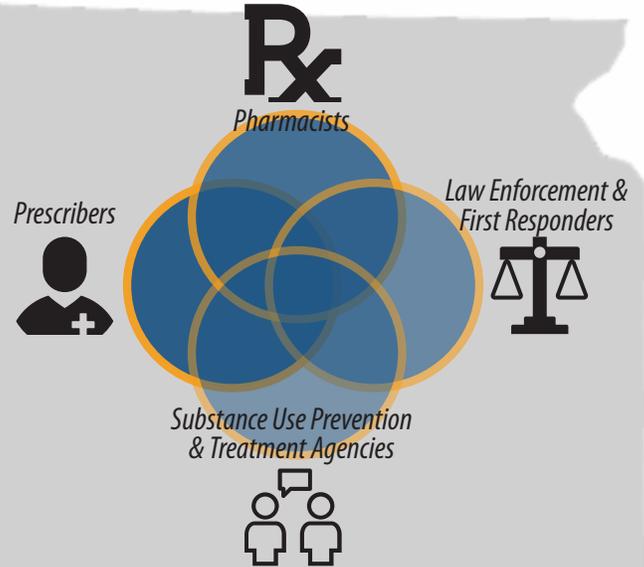
#### Online profile queries by year



**DSS**  
Strong Families - South Dakota's Foundation and Our Future

For more information visit <https://doh.sd.gov/news/opioid.aspx>

726 stakeholder responses to a series of surveys sent Spring 2017



### Recommended Strategies



Pharmacists

- better communication with medical providers
- improve utilization of the PDMP
- educate patients on safe use and disposal of opioids



Prescribers

- promote alternative therapies for pain management
- update and enforce prescribing guidelines
- promote continuing education & training
- increase use of PDMP to inform clinical practice and improve patient care



Law Enforcement & First Responders

- increase naloxone access and training
- increase public awareness on the dangers of opioids
- increase training on investigative processes and HIPAA guidelines



Substance Use Prevention & Treatment Agencies

- create and support avenues for multidisciplinary team case management
- better coordination with medical providers
- increase awareness of treatment options and efficacy

Revised 10-25-2017

## Guiding Principles to the Strategic Plan

- Leverage all statewide resources in a coordinated, comprehensive approach so as not to duplicate efforts.
- Ensure evidence-based medicine and behavioral health is promoted.
- Recognize responsible prescribing and monitoring practices.
- Equip prescribers and all stakeholders involved with the best, most accurate information from which to base a patient care plan.
- Increase capacity of communities to prevent and treat prescription opioid abuse through education and public awareness.
- Promote collaboration of all stakeholders including, but not limited, to patients, families, prescribers, pharmacists, criminal justice, community treatment providers, and recovery support resources.
- Reflect the diversity of our state through materials, education, and messaging that are culturally sensitive.
- Target illicit supply and demand.
- Ensure objectives are well defined as to how efforts are successful or need intervention.

## South Dakota's Opioid Road Map

### STRATEGIES FOR PREVENTION AND EARLY IDENTIFICATION

1. Develop and update guidelines for opioid prescribers in South Dakota.
2. Promote and provide education and training for all opioid prescribers on the appropriate prescribing of opioids.
3. Maximize the use and effectiveness of the South Dakota Prescription Drug Monitoring Program (PDMP).
4. Raise public awareness about the dangers of prescription opioids.
5. Improve treatment access via connection to resources and information through call center support.

### STRATEGIES FOR TREATMENT AND RECOVERY

6. Increase professional competency in opioid use disorder (OUD) treatment and better connect treatment providers, prescribers, and recovery support services in complex case management and staffing of OUD cases.
7. Expand access to medication-assisted treatments (MAT) across South Dakota through enhanced referral systems and linkages to in-person and virtual MAT clinics.
8. Enhance awareness of treatment options and cost assistance available.
9. Improve treatment retention and recovery through peer and family support services.

### STRATEGIES FOR REDUCING ILLICIT SUPPLY

10. Explore the potential for a comprehensive opioid management program within South Dakota Medicaid.
11. Expand drug take-back programs to increase accessibility to safe disposal options for prescription opioids.

### STRATEGIES FOR RESPONSE TO OPIOID MISUSE AND ABUSE

12. Equip first responders and emergency departments with naloxone to increase statewide access.
13. Offer training on available treatment options to jails statewide (which are independently operated).

# Work Plan on Policy Priorities

## STRATEGIES FOR PREVENTION AND EARLY IDENTIFICATION

1. Develop and update guidelines for opioid prescribers in South Dakota.

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
a. Ensure that guidelines are developed and recommended for all opioid prescribers including, but not limited to, physicians, physician assistants, nurse practitioners, podiatrists, optometrists, and dentists.	January 2019		Lead: SD DOH
b. Recommend that any newly developed prescribing guidelines include dosing, day limits, and limit prescriptions for acute pain.			Lead: SD DOH
c. Review content in any current guidelines and recommend revisions or additions based on CDC-developed prescribing guidelines.			Lead: SD DOH

2. Promote and provide education and training for all opioid prescribers on the appropriate prescribing of opioids.

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
a. Support high-quality continuing education courses in pain management and safe opioid prescribing that incorporate opioid prescribing guidelines.			Lead: SD DOH
b. Collaborate with partners to provide quality educational opportunities utilizing multiple methods and venues.	May 2018		Lead: SD DOH
c. Work with the University of South Dakota Sanford School of Medicine, South Dakota State University's Nursing Program, and USD's Physician Assistant Program that educate and train opioid prescribers to develop curricula on pain management, safe opioid prescribing, and substance use disorders that incorporate opioid prescribing guidelines.			Lead: SD DOH

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
<p>d. Train prescribers using SAMHSA's Opioid Overdose Prevention Toolkit. Offer via webinar in conjunction with efforts supporting workforce development through the to-be-established teleECHO hub and clinics in South Dakota.</p> <ul style="list-style-type: none"> <li>• Using framework provided by the Opioid Overdose Prevention Toolkit, create and produce training materials specific to the target audiences.</li> <li>• Identify best time and place for training(s), ensuring statewide access for prescribers.</li> <li>• Coordinate logistics for in-person trainings offered in select communities across the state.</li> <li>• Execute in-person trainings.</li> <li>• Set-up webinar platform.</li> <li>• Market webinar trainings.</li> <li>• Execute webinar trainings.</li> </ul>	<p>Execute in-person trainings in June 2018 and January 2019. Execute webinar trainings beginning June 2018.</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>
<p>e. Secure and sponsor nationally renowned keynote speakers at a minimum of one professional conference each year that has a statewide reach/audience in the prevention and treatment of OUD.</p> <ul style="list-style-type: none"> <li>• Identify nationally recognized and reputable experts in the field of OUD prevention and OUD treatment.</li> <li>• Coordinate with established conferences among professional associations in the state (e.g., South Dakota Association of Addiction and Prevention Professionals) to sponsor keynote sessions.</li> </ul>	<p>Subject to timing of established conferences.</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>

3. Maximize the use and effectiveness of the South Dakota Prescription Drug Monitoring Program (PDMP).

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
a. Issue Request for Proposal (RFP) for integration of Controlled Substance Registration database with the PDMP.	Issue RFP by December 2017.	STR-Opioid grant	Lead: SD DOH Partners: SD DSS, SD Board of Pharmacy
b. Complete integration of the PDMP with electronic health records in the three major health systems in South Dakota.	May 2019		Lead: SD DOH Partners: SD Board of Pharmacy
c. Explore the integration of the PDMP with SD Health Link.			Lead: SD DOH Partners: SD Board of Pharmacy
d. Develop training for users on how to use the PDMP platform including, but not limited to, entering data, reading reports, intervention processes, and investigation processes.			Lead: SD DOH Partners: SD Board of Pharmacy
e. Enhance reporting capacity of the PDMP to better identify trends in opioid prescribing.	Ongoing		Lead: SD DOH Partners: SD Board of Pharmacy

4. Raise public awareness about the dangers of prescription opioids.

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
a. Implement a mass media campaign (television, radio, newspaper, social media) to inform the public about the dangers of prescription opioids.	September 2018	CDC DDPI grant/STR-Opioid grant	Lead: SD DOH Partner: SD DSS
b. Create a website and supporting marketing materials to include information about the harmful effects of opiates, personal testimonials, and the medical community related to opioid use/misuse and where to get help. <ul style="list-style-type: none"> <li>• Issue RFP and select vendor to provide website creation and management services.</li> <li>• Curate and develop information for the website.</li> <li>• Populate website in partnership with selected vendor.</li> <li>• Establish communications calendar for ongoing updates and social media interconnection.</li> </ul>	Issue RFP Fall 2017; launch by March 2018	STR-Opioid grant	Lead: SD DSS Partner: SD DOH

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
<p>c. Building upon existing longitudinal studies in place within the Behavioral Health Division, SD DOH, and other state- and community-based agencies, create and support a data collection and outcome assessment dashboard to identify areas of effectiveness and opportunities for intervention from a statewide perspective.</p> <ul style="list-style-type: none"> <li>• Complete inventory of data variables.</li> <li>• Overlay national population data over SD.</li> <li>• Correlate risk factor characteristics.</li> <li>• Compile into web-based system.</li> <li>• Launch dashboard.</li> </ul>	Launch dashboard by August 2018	STR-Opioid grant  CDC DDPI grant	Lead: SD DSS and SD DOH <i>Partners: State Epidemiological Outcomes Workgroup</i>
<p>d. Facilitate community town hall meetings through the Prevention Resource Centers in South Dakota regarding the needs of the selected communities and strategies to support prevention and awareness of opioid use/misuse. Share and vet findings from the needs assessment to solidify the state's response to the opioid crisis.</p> <ul style="list-style-type: none"> <li>• Identify target communities.</li> <li>• Identify key stakeholders within communities to co-host meetings.</li> <li>• Determine dates and times for meetings.</li> <li>• Arrange logistics.</li> <li>• Develop and distribute invites.</li> <li>• Summarize findings and review with stakeholders; adapt or modify strategic plan to reflect insights gained.</li> <li>• Distribute resulting action plan back to community participants to build engagement.</li> <li>• Document any community action plans resulting from the meetings.</li> </ul>	Host meetings by March 2018	STR-Opioid grant	Lead: SD DSS <i>Partners: Prevention Resource Centers</i>
<p>e. Conduct presentations to high school youth on the dangers of opioid use through the existing Prevention Resource Center and community coalition network.</p> <ul style="list-style-type: none"> <li>• Meet with Prevention Resource Center directors to outline expectations and craft a workplan.</li> <li>• Develop a simple presentation that outlines the opioid issues facing South Dakotans, specifically youth.</li> <li>• Identify target schools/communities.</li> <li>• Create travel/logistics schedule and make arrangements.</li> <li>• Execute presentations.</li> <li>• Assess presentation effectiveness with follow-up survey.</li> </ul>	Execute presentations September-October 2018	STR-Opioid grant	Lead: SD DSS <i>Partners: Prevention Resource Centers</i>

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
f. Develop educational materials that are culturally sensitive for Native Americans and work with providers and service agencies to utilize those materials. <ul style="list-style-type: none"> <li>• Draft and issue RFP for a vendor to develop materials and distribution.</li> <li>• Select vendor and execute agreement/implement scope of work.</li> <li>• Distribute materials/videos to Native American communities through education and medical services.</li> </ul>	Issue RFP by October 2017. Distribute materials to communities by June 2018.	STR-Opioid grant	Lead: SD DSS
g. Enhance early identification and referral processes for OUD individuals from medical providers to treatment providers, leveraging the work already supported through the SBIRT grant.	Ongoing through grant period (2016-2021)	State SBIRT grant	Lead: SD DSS <i>Partners: SBIRT Advisory Committee</i>
h. Conduct community dialogue sessions in five (5) communities to further explore attitudes, perceptions of, and supports in place for those directly affected by opioid misuse or abuse. Use the findings to validate/refine proposed strategies within the South Dakota Opioid Road Map.	Host sessions by March 2018. Build action plans between March and September 2018. Finalize plans by November 2018.	STR-Opioid grant	Lead: SD DSS

5. Improve treatment access via connection to resources and information through call center support.

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
<p>a. Define information/content that needs to be developed to supplement materials of existing call centers specific to opioid use or abuse, and identify a partner for implementation.</p> <ul style="list-style-type: none"> <li>• Identify information points/resources and staff training on opioid use/abuse needed by a call center to enable smooth referrals to community providers.</li> <li>• Draft RFP.</li> </ul>	<p>Select a vendor(s) and establish execution timeline by March 2018.</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>
<p>b. Connect individuals and families/friends to resources within their community through enhanced training, content, and delivery provided by local support agencies via the selected vendor.</p> <ul style="list-style-type: none"> <li>• Develop and promote a public awareness campaign to encourage affected individuals to access assistance and support through the identified hotline and/or two-way texting service.</li> <li>• Develop a one-way educational texting campaign using short code and keywords to push out information about signs of opioid addiction and available resources.</li> <li>• Finalize information content and prompts for call center use to encourage outreach to the hotline and connections to community resources.</li> <li>• Establish enhanced protocols that include warm hand-offs and follow-up calls to individuals and family/friends to ensure referral connections to resources that are established.</li> <li>• Pilot test to evaluate efficacy of materials and identify areas of improvement.</li> </ul>	<p>Launch by March 2018</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>

## STRATEGIES FOR TREATMENT AND RECOVERY

6. Increase professional competency in OUD treatment, and better connect treatment providers, prescribers, and recovery support services in complex case management and staffing of OUD cases.

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
<p>a. Define requirements for Project ECHO replication in South Dakota.</p> <ul style="list-style-type: none"> <li>• Define state implementation plan.</li> <li>• Leverage findings of the needs assessment to identify gaps, define areas of strength, improvement, and opportunities regarding case staffing of OUD cases.</li> <li>• Assess availability of ‘hub’ members/experts to facilitate teleECHO clinics in South Dakota.</li> <li>• Assess interest of community clinician and ‘spoke’ champions.</li> <li>• Identify potential partners and organizations to connect with in support of a teleECHO clinic model.</li> <li>• Conduct follow-up conversations with prescribers and treatment providers to vet preliminary strategies derived from the NGA Learning Lab technical assistance process.</li> <li>• Identify preliminary avenues for funding/revenue sources, program objectives, qualities of ‘hubs’, curriculum for didactic presentations, and needed IT structure and support.</li> </ul>	Complete implementation planning and move to action by October 2017.	STR-Opioid grant	Lead: SD DSS
<p>b. With selected partner(s), design an ECHO model workforce support hub for delivery of virtual evidence-based training and case staffing of complex OUD treatment cases.</p> <ul style="list-style-type: none"> <li>• Draft RFP from which a selected vendor or consortium could respond.</li> <li>• Issue RFP and conduct interviews.</li> <li>• Finalize partner selection and execute a timeline.</li> <li>• Develop incentives for participation.</li> <li>• Identify and empower community champions for ‘spokes’.</li> <li>• Identify and implement evaluation strategies and tracking tools.</li> </ul>	Design complete by December 2018	STR-Opioid grant	Lead: SD DSS

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
<p>c. Launch the teleECHO clinic model in South Dakota with selected partner(s).</p> <ul style="list-style-type: none"> <li>• Develop standardized forms and processes for managing teleECHO clinics and patient cases.</li> <li>• Create HIPAA compliant tools to manage and report outcomes and facilitate patient case presentations.</li> <li>• Create and operationalize a data archive system.</li> <li>• Train all 'hub' and 'spoke' staff and providers on how to use the system.</li> <li>• Practice through pilot testing via three 'dry-runs' to work out problems with IT and connectivity, clinic protocols, and related concerns.</li> <li>• Create marketing materials to communicate availability of teleECHO resources to statewide audiences.</li> <li>• Launch and implement ongoing quality monitoring metrics to ensure efficacy.</li> </ul>	<p>Deploy pilot testing specific to OUD cases no later than March 2019.</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>
<p>d. Provide mini-grants to local communities to offset expenses with hardware integration and connection to the South Dakota ECHO hub.</p> <ul style="list-style-type: none"> <li>• Quantify grant size (\$) and anticipated volume of need based on requirements derived in the planning stages for teleECHO implementation.</li> <li>• Create grant application form and define priority funding considerations based on needs identified.</li> <li>• Initiate grant program and review applications; award funds.</li> <li>• Follow-up with sites to ensure successful implementation.</li> </ul>	<p>Implement by year end 2018</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>

7. Expand access to medication-assisted treatments (MAT) across South Dakota through enhanced referral systems and linkages to in-person and virtual MAT clinics.

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
<p>a. Conduct a follow-up assessment to strategically plan and execute statewide MAT access in South Dakota.</p> <ul style="list-style-type: none"> <li>• Facilitate dialogue with stakeholders on best fit strategies in South Dakota.</li> <li>• Identify target areas/populations of need.</li> <li>• Identify primary referral sources and process.</li> <li>• Determine indicators for referral.</li> <li>• Identify referral sources and process.</li> <li>• Define training needs and deployment strategy.</li> </ul>	Follow-up assessment complete by November 2017.	STR-Opioid grant	Lead: SD DSS
<p>b. Refine/finalize requirements for statewide MAT access with emphasis on telehealth delivery of care within primary care clinics and emergency departments, and the ability to conduct case management for patients referred to community providers.</p> <ul style="list-style-type: none"> <li>• Compile requirements.</li> <li>• Issue RFP.</li> <li>• Review responses and conduct interviews.</li> <li>• Select partner(s).</li> <li>• Define and establish contract(s) with selected partner(s) for MAT clinic access and implementation, emphasizing quick turn-around as a key qualification.</li> </ul>	Select partner by February 2018. Launch initiative by June 2018.	STR-Opioid grant	Lead: SD DSS
<p>c. Develop training modules to educate prescribers and treatment providers on MAT.</p> <ul style="list-style-type: none"> <li>• Compile training requirements through partnership with selected partner(s) on capacity-building and planning efforts for statewide MAT access.</li> <li>• Design training modules aligned with best practices with fidelity testing.</li> <li>• Implement across available training platforms.</li> <li>• Integrate training within teleECHO clinic hubs.</li> <li>• Monitor training effectiveness and trainee satisfaction/knowledge gained on an ongoing basis.</li> </ul>	Launch modules by August 2018.	STR-Opioid grant	Lead: SD DSS

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
d. Provide professional development and training to prescribers and treatment providers through sponsored keynote-speakers at one conference per year that has a statewide reach. <ul style="list-style-type: none"> <li>• Identify a nationally recognized and reputable expert in the administration of MAT.</li> <li>• Coordinate with established conferences among professional associations in the state to sponsor keynote sessions.</li> </ul>	Define plan and resource by year end 2017	STR-Opioid grant	Lead: SD DSS

8. Enhance awareness of treatment options and cost assistance available.

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
a. Develop and execute a communication and marketing plan to increase awareness of prevention and treatment resources along with financial assistance available. <ul style="list-style-type: none"> <li>• Create marketing materials.</li> <li>• Create communication plan and calendar, including points of contact with clients and their families/caregivers.</li> </ul>	Launch by January 2018	STR-Opioid grant	Lead: SD DSS
b. Provide cost of treatment as payer of last resort for patients qualifying for indigent funding (based on federal poverty level of 185% or less) or meet SD DSS hardship guidelines (those that do not qualify for indigent funding but have extenuating financial circumstances). Treatment will encompass both medications and psychosocial components. <ul style="list-style-type: none"> <li>• Integrate STR funds as a payer type within the SD DSS system.</li> <li>• Educate community treatment providers about the availability of STR funds as a source of last resort.</li> </ul>	Update SD DSS system by November 2017. Educate providers by January 2018.	STR-Opioid grant	Lead: SD DSS

9. Improve treatment retention and recovery through peer and family support services.

Action Steps	Anticipated Completion	Funding Source(s)	Lead Agency and Partner(s)
<p>a. Develop peer-based recovery support networks that target individuals and families affected with/by OUD. Prioritize capacity-building to communities of highest incidence of opioid use, target a minimum of five (5) communities in the state.</p> <ul style="list-style-type: none"> <li>• Define steps for capacity building with partner(s) based on best practices (e.g., town hall meetings, community dialogues, stakeholder engagement).</li> <li>• Create a project plan for each community, including community partner engagement strategy.</li> <li>• Define key criteria for success in each community.</li> <li>• Implement project plan at the grassroots level.</li> <li>• Define materials, marketing needs, and promotion strategies to increase awareness among clients and their families within each community. Partner with Prevention Resource Centers and their town-hall process to inform these steps.</li> <li>• Monitor community engagement with selected partner(s) and work to remove barriers and support efforts at the local level.</li> </ul>	<p>Select partner by June 2018. Implement project plan by August 2018.</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>
<p>b. Design and create training and education modules for employee and management audiences within the workplace.</p> <ul style="list-style-type: none"> <li>• Define requirements and issue RFP, prioritizing groups that have experience delivering substance abuse awareness education to corporate clients and a proven model for corporate engagement.</li> <li>• Select target area for initial testing.</li> <li>• Pilot test modules through established relationships with employers.</li> <li>• Refine modules as needed, and replicate in at least two other communities (central and western South Dakota).</li> <li>• Target large employers for training. Leverage findings from peer-support recovery service capacity building efforts to inform target audiences/locations.</li> </ul>	<p>Select partner and define plan by June 2018. Pilot test between July-August 2018. Refine/replicate modules between September 2018 – May 2019.</p>	<p>STR-Opioid grant</p>	<p>Lead: SD DSS</p>

## STRATEGIES FOR REDUCING ILLICIT SUPPLY

10. Explore the potential for a comprehensive opioid management program within South Dakota Medicaid.

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
a. Monitor opioid prescriptions and send letters to top prescribers.			Lead: SD DSS, Medical Services Partners: SD DOH
b. Determine feasibility of prior-authorization for opioid prescriptions, in alignment with updated prescribing guidelines. Continue existing drug utilization review (DUR) within SD Medicaid to evaluate opioid utilization (including methadone).			Lead: SD DSS, Medical Services Partners: SD DOH

11. Expand drug take-back programs to increase accessibility to safe disposal options for prescription opioids.

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
a. Create an inventory of current take-back programs and identify areas of need.	May 2018		Lead: SD DOH Partner: SD Board of Pharmacy
b. Explore alternative drug disposal options.	Ongoing		Lead: SD DOH Partner: SD Board of Pharmacy
c. Integrate take-back program into public awareness campaigns.			Lead: SD DOH Partner: SD Board of Pharmacy

## STRATEGIES FOR RESPONSE TO OPIOID MISUSE AND ABUSE

12. Equip first responders and emergency departments with naloxone to increase statewide access.

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
a. Continue partnership and planning efforts between SD DOH and SD DSS to provide naloxone to first responders.	Ongoing	STR-Opioid grant	Lead: SD DSS Partners: SD DOH
b. Craft a targeted approach for implementation. <ul style="list-style-type: none"> <li>• Identify target groups for training.</li> <li>• Define quality metrics.</li> <li>• Define standing physician order requirements.</li> <li>• Market training dates and times.</li> </ul>	Begin trainings by October 2017	STR-Opioid grant	Lead: SD DSS Partners: SD DOH

13. Offer training on available treatment options to jails statewide.

<b>Action Steps</b>	<b>Anticipated Completion</b>	<b>Funding Source(s)</b>	<b>Lead Agency and Partner(s)</b>
a. Develop training materials, or adopt/adapt.		STR-Opioid grant	Lead: SD DSS Partners: South Dakota Sheriffs' Association
b. Define a training schedule and arrange logistics for conference presentation.	Subject to conference schedule.	STR-Opioid grant	Lead: SD DSS Partners: South Dakota Sheriffs' Association