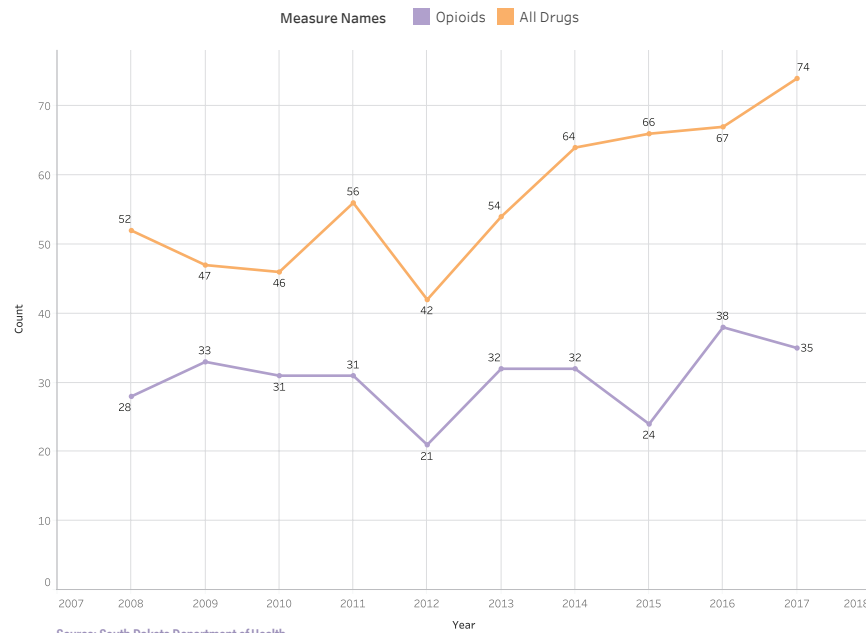


In South Dakota, opioid related deaths have **steadily increased** since 2012

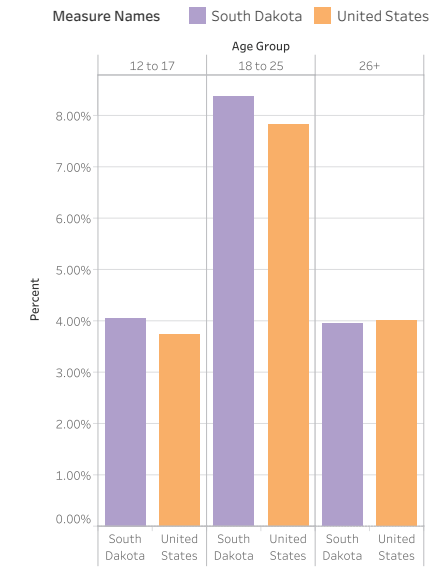
For more opioid related stats: AvoidOpioidSD.com/key-data



Drug-Related and Opioid-Related Deaths, South Dakota (2008–2017)



Pain Reliever Misuse in the Past Year (2015–2016)



Note: The 2015-2016 NSDUH started collecting Pain Reliever Misuse in the past year separate from Illicit Drug Use in the Past Year.
Source: National Survey on Drug Use and Health (NSDUH)

South Dakota Opioid Abuse Strategic Plan

Progress Report 2016–2018

The South Dakota Opioid Abuse Advisory Committee developed South Dakota's Statewide Targeted Response to the Opioid Crisis in October 2017. This progress report highlights our goals, progress to date, and next steps.

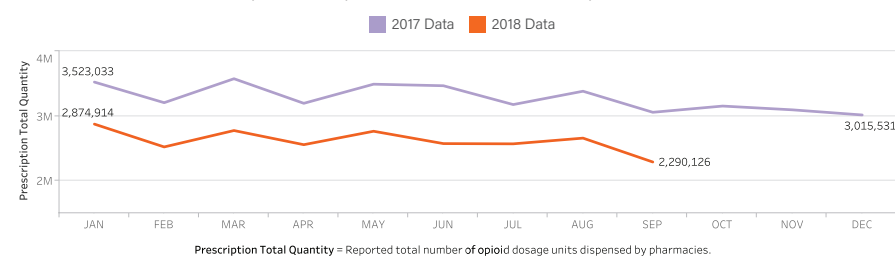
To view the full plan and related strategic documents: avoidopioidsd.com/about/strategic-plan/

Clients with an Opioid Use Disorder Receiving Publicly Funded Treatment Services, South Dakota (FY 2012–2018)



Note: During 2015 and May of 2016, data was not collected for clients receiving Criminal Justice Initiative (CJI) services in STARS. CJI clients started being tracked during June of 2016.
Source: South Dakota Department of Social Services

Prescription Drug Monitoring Program (PDMP) Data, South Dakota (Opioid Prescriptions in South Dakota (2017–September 2018))



Source: South Dakota Board of Pharmacy

Goals, Progress, Next Steps

GOAL 1 Prevention and Early Identification

Progress to Date

- Established prescribing guidelines for physicians, physician assistants, nurse practitioners, and nurse midwives
- Implemented prescription limits for first time opioid users on Medicaid
- Funded training to 450 physicians and prescribers via live presentation and webinars related to appropriate prescribing and effective pain management
- Required all controlled substance registrants to register with Prescription Drug Monitoring Program (PDMP)
- Integrated PDMP with electronic health records at Avera, Regional, and Sanford
- Implemented PDMP alerts to allow prescribers to quickly identify potential opioid misuse/abuse by their patients
- Launched AvoidOpioidSD.com with information on opioids, data dashboards, and where to find help
- Established GoodHealthTV units in tribal health clinics/hospitals and schools for messages specific to Native American populations
- Educated more than 4,000 youth and community members on the harmful effects of opioid misuse

Next Steps

- Review curriculum at post-secondary health education programs for pain management, safe opioid prescribing, and substance use disorders
- Promote pain management treatments that don't involve prescription opioids (i.e., ibuprofen/acetaminophen, exercise therapy, acupuncture, etc.)
- Assess pain management guidelines and covered services (i.e., alternative to pain management) within Medicaid
- Continue PDMP enhancements including integration with controlled substance registry
- Provide prescribers "at a glance" analytics on a patient's prescription use within PDMP
- Implement SD-specific media campaign related to opioid abuse and misuse
- Collaborate with Great Plains Tribal Chairmen's Health Board to support a youth-driven media campaign on Rosebud, Pine Ridge, and Crow Creek reservations
- Provide follow-up to Helpline callers and individuals flagged by law enforcement/first responders
- Continue targeted education of youth and the farming and ranching community

GOAL 2 Treatment and Recovery

Progress to Date

- Established an Opioid Resource Hotline, texting service, and web-based resource portal including community-specific resources through the Helpline Center
- Hosted Listen & Learn Sessions regarding medication assisted treatment (MAT) with treatment providers
- Expanding MAT in the Sioux Falls and southeast areas of South Dakota
- Awarded RFPs to expand access to MAT through telehealth technology to connect primary care providers to community-based mental health services

Next Steps

- Develop capacity for physicians to receive training and support from expert physicians in the treatment of opioid use disorders, including case consultation
- Expand MAT training for addiction treatment professionals and prescribers
- Expand MAT to Rapid City and a rural area of SD
- Six SD tribes have received Tribal Opioid Response Grants to increase access to culturally appropriate, evidence-based treatment (including MAT)
- Expand peer recovery supports for patients and loved ones impacted by opioid misuse/abuse
- Support information exchange system enhancements that promote MAT/Care Coordination

GOAL 3 Reducing Illicit Supply

Progress to Date

- Medicaid sending semi-annual letters to top prescribers to inform when prescribing is outside the normal range
- Implemented Medicaid prescription limits for opioids on early refills, patients utilizing more than one long-acting and one short-acting opioid, and prescription amounts in excess of CDC guidelines
- Established drug take back locations in 10 community pharmacies that have collected 1,035 pounds of unused drugs

Next Steps

- Expand drug take back location in counties without a take back site and/or explore alternative safe drug disposal options

GOAL 4 Response to Opioid Misuse and Abuse

Progress to Date

- Passed laws to increase access to and use of naloxone
- Trained over 980 first responders on naloxone administration
- Provided nearly 2,020 doses of naloxone to first responders with 226 patient administrations statewide

Next Steps

- Develop community resource guides for law enforcement to distribute when interacting with individuals and/or family members with addiction-related concerns
- Provide training for hospital/EMS personnel on treatment of conditions related to opioid use
- Support training and continuing education for law enforcement
- Provide ongoing evaluation of naloxone distribution project (e.g., administrations, patient status, provider information)
- Enhance capacity at the State Public Health Laboratory related to testing and analysis of drugs and timely transport of drugs/specimens