NPAIHB Tribal
Opioid
Response
Two years
strong



TOR Evaluation Update



What services have TOR Consortium Tribes implemented with grant funds?

- Service data reflecting period from Oct. 2018 through Mar. 2020
 - TOR1 began in Oct. 2018; TOR2 began in Oct. 2019

Grant Cohort		2018					2020											
	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
TOR1 (22 Tribes)	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧
TOR2 (6 Tribes)													٧	٧	٧	٧	٧	٧

- Data collected via Monthly TOR Activity Reports which outline the OUD-related services and activities conducted with TOR grant funds
 - Reports were submitted by all 28 Tribes. 100% response rate! Thank you!

This report shows the services and activities Tribes have implemented from grant start through March 31, 2020.



Staff Support & Workforce Development

Staff Support

- 17 Tribes have hired or supported staff for opioid response programs
 - 113 staff positions were funded in whole or in part with TOR funds (permanent and temporary)
 - Service Coordinators, Peer Mentors/Recovery Coaches, Counselors, Program administrators, Clinicians, Administrative Support Staff



Workforce Development

- 16 Tribes offered workforce development activities for staff, including attendance at trainings, professional conferences, or regional gatherings.
 - Five Tribes have hosted a professional training!
- Special development regarding MAT capacity:
 - 16 medical professionals from 6 Tribes were trained and became DATA
 2000-waivered



Public Awareness Campaigns

Increase Public Awareness

- 21 Tribes developed public awareness campaigns related to opioids
 - 15 Tribes had begun to implement their campaigns









Naloxone

- 17 Tribes purchased naloxone kits
 - About **3,000 naloxone kits** were purchased
- 16 Tribes had distributed naloxone kits
 - About **1,100 kits** had been distributed.
- 12 Tribes developed policies for naloxone use and distribution.





Medication-Assisted Treatment

- 18 Tribes made MAT available to their Tribal members:
 - 7 Tribes incorporated MAT into their tribal clinics
 - **35 individuals** were initiated on MAT
 - 5 Tribes linked with an IHS clinic to refer patients for MAT
 - 19 individuals were referred
 - 12 Tribes linked with an external clinic to refer patients for MAT
 - 70 individuals were referred
- 6 Tribes **developed policies** for the implementation of a MAT program in their communities





Prevention Services



- 15 Tribes implemented prevention programs
 - 8 Tribes implemented **culturally-based** prevention programs
- Prevention programs reached **4,600 people**, including almost **800 youth**

	# of Tribes	# of People Served	# of Youth Served
Implemented any prevention services	15	4,651	774
Implemented culturally based prevention programs	8	3,562	356
Implemented other prevention programs	12	1,089	418



Recovery Services



■ 13 Tribes implemented recovery services

- 10 Tribes implemented **culturally-based** recovery programs
- 5 Tribes implemented recovery coaching programs
- Served almost 600 individuals

	# of Tribes	# of People Served
Implemented <u>any</u> recovery services	12	572
Implemented culturally based recovery programs	10	334
Implemented recovery coaching program	5	55
Implemented housing recovery services	3	47
Implemented other recovery services	9	136



Clinic Enhancements

9 Tribes incorporated safer opioid prescribing practices

- 6 Tribes developed culturally appropriate education materials for clinic use
- 5 Tribes implemented the CDC's guidelines
- 4 Tribes used the Prescription Drug Monitoring Program database



 Including training for medical providers, expansion of decision tools within their EHR systems.





Overview of TOR-funded Activities

Most Tribes used TOR dollars to fund multiple strategies.

- TOR1 Tribes implemented an average of 7 activities since Oct 2018.
- TOR2 Tribes implemented an average of 3-4 activities in the first 6 months of the grant.

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Activity	Α	В	С	D	Е	F	G	Н	ı	J	K	L	М	N	0	Р	Q	R	S	Т	U	V	W	Х	Υ	Z	AA	ВВ
Public awareness campaign	٧	٧	٧		٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧		٧	٧				٧		٧	٧	٧	
Support for staff positions	٧	٧	٧	٧	٧		٧	٧	٧	٧	٧			٧	٧	٧	٧			٧			٧		٧			
EHR adaptations	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧	٧		٧		٧	٧	٧	٧	٧	٧			٧	٧	٧		٧	
Safer prescribing practices	٧			٧	٧		٧	٧	٧				٧		٧												٧	
Naloxone	٧	٧		٧	٧	٧		٧	٧	٧	٧		٧	٧	٧		٧	٧	٧		٧		٧					
Medication- Assisted Treatment	٧	٧	٧	٧			٧	٧			٧		٧		٧	٧	٧	٧	٧	٧			٧		٧	٧	٧	No
Policy development	٧			٧	٧			٧	٧		٧		٧	٧	٧		٧		٧				٧					activity
Recovery support services	٧		٧		٧		٧		٧	٧			٧	٧		٧		٧	٧	٧						٧		
Prevention programs	٧		٧	٧	٧			٧	٧	٧	٧		٧	٧	٧	٧			٧	٧						٧		
Wraparound services	٧	٧	٧	٧	٧		٧	٧	٧	٧	٧		٧	٧	٧	٧	٧	٧	٧							٧		
Workforce development	٧	٧	٧	٧	٧		٧	٧	٧	٧	٧		٧		٧				٧	٧				٧			٧	
Behavioral Health Aid Manual						٧															٧	٧						



Summary

- Tribes used their TOR funds to implement a range of services, highlighting their commitment to providing a comprehensive response to opioids in their communities.
- Tribes understood that there is not one singular approach to opioid response and that a varied, crosssector strategy would more effectively reach and support the people in their communities who would benefit from services.
- Given the current funding context related to OUD, Tribes conscientiously braided together funding sources to ensure that their opioid response was comprehensive, timely, and grounded in cultural strengths.



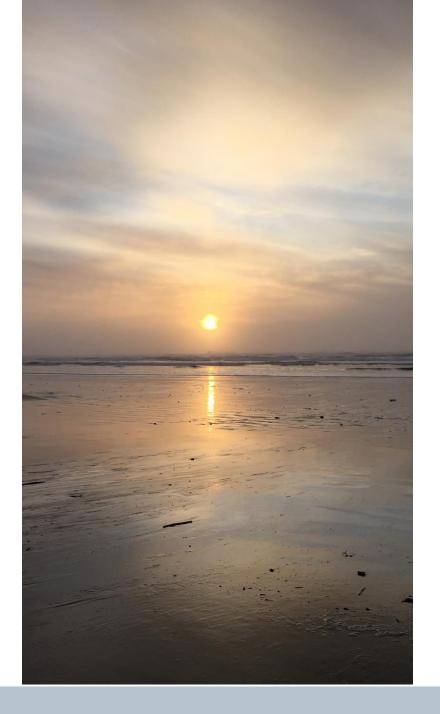


A Note about COVID-19

- Restrictions and shutdowns related to the COVID-19 pandemic began in mid-March 2020 and, therefore, are not reflected in this service data period.
- Tribes have been actively adapting to this new context, finding creative ways to provide services to and maintain contact with clients, while adhering to social distancing and other public health guidelines.
- The impact of the virus and related restrictions will likely be evident in future reports that use data collected after March 2020.







EVALUATION ACTIVITIES

- Monthly TOR Activity Report
 - Continue throughout grant period
 - Thank you for 100% completion!
- GPRA Client-Level Interviews
 - GPRA intakes will continue throughout the grant period
 - GPRA follow-up interviews will begin in July and continue throughout the grant period
 - Please stay in touch with NPC about your progress with GPRA interviews
 - Please make sure to submit interviews to NPC within 4 days of completing them





Notice of Funding Opportunity Community Opioid Intervention Pilot Project (COIPP)

IHS' Office of Clinical and Preventive Services/Division of Behavioral Health

- Due Date to Apply: December 15, 2020
- 33 awards will be issued for a 3-year project period, with awards of up to \$500,000
- 2 grants per IHS Area (24 awards total)
- 6 set-aside grants for urban Indian organizations
- 3 set-aside grants with Maternal & Child Health as the population of focus. One grant will be funded in each of the three highest priority IHS Areas (Alaska, Bemidji, and Billings)

The intent is to increase knowledge and use of culturally appropriate interventions and to encourage an increased use of medication-assisted treatment (MAT). This program will support Tribal and urban Indian communities in their effort to provide prevention, treatment, and recovery services to address the impact of the opioid crisis within their communities. Each application for the COIPP will be required to address the following objectives:

- Increase public awareness and education about culturally-appropriate and family-centered opioid prevention, treatment, and recovery practices and programs in AI/AN communities.
- Create comprehensive support teams to strengthen and empower AI/AN families in addressing the opioid crisis in Tribal or urban Indian communities.
- Reduce unmet treatment needs and opioid overdose related deaths through the use of MAT.

Contact Information:

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COIPP website for links to the full funding announcement documents www.ihs.gov/asap/coipp

Tribal Opioid Response projects

TOR1: FY 2018-2020, extended to 2021

TOR2: FY 2019 -2021 FOR3: FY 2020-2022

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