



2022 ANNUAL REPORT

FEDERAL OPIOID FUNDING – STATE OF SOUTH DAKOTA



JOINTLY PREPARED BY THE DEPARTMENTS OF HEALTH AND SOCIAL SERVICES



On behalf of the Department of Health (DOH) and Department of Social Services (DSS), please find the enclosed report outlining Opioid Federal Funding for federal fiscal years 2021 through 2023. The report lists accomplishments, planned activities, and key outcomes associated with dollars managed by our Departments in support of four shared strategies impacting opioid misuse and abuse in South Dakota.

1. Prevention and Early Identification
2. Treatment and Recovery
3. Reducing Illicit Supply
4. Response to Opioid Misuse or Abuse

This report marks our fifth year of inter-department collaboration on these important initiatives. Together, with feedback and direction from the Opioid Abuse Advisory Committee, we have implemented programs and formed partnerships that support and enhance efforts in our local fight against the opioid epidemic. Our teams work collaboratively to ensure the federal funding awarded to South Dakota is used to support these strategies in a coordinated, comprehensive manner.

Together, we:

- ✓ focus on **data-driven decisions** and program development.
- ✓ promote and support **evidence-based practices** in medicine, behavioral health, and prevention.
- ✓ **address polysubstance abuse**, particularly stimulant use disorder, where appropriate and applicable.
- ✓ work to **reflect the cultural and geographical diversity of our state** in all materials and messaging.

We are pleased to again report a number of key accomplishments in the last year. Prevention efforts continue, with the addition of newly trained professionals in early intervention strategies aimed at identifying needs of individuals, families, and communities with known adverse circumstances who are more vulnerable to the risks associated with opioid misuse and abuse. Local coalition development efforts through the Communities that Care Program enhances these efforts, which builds local capacity to implement strategies that work best for their community. Medications for Opioid Use Disorder are available, with additional case management and recovery support services to support individuals statewide. Partnerships with emergency departments have expanded through training and education on a toolkit aimed at enhancing local community substance abuse response and connection to resources for treatment and recovery supports. Recovery support services continue to expand with several new recovery homes brought online in the past year and additional sites on the horizon. We expanded access to safe medication storage and disposal options and worked to promote awareness of these free resources to all South Dakotans.

Our future program activities will continue to remain rooted in our shared strategies, and we commit to continued collaboration to ensure services and supports along the full continuum of care for individuals impacted by opioid misuse or abuse are available statewide in support of long-term recovery and lives saved.

Sincerely,

A handwritten signature in blue ink that reads 'Joan Adam'.

Joan Adam
Secretary of the Department of Health

A handwritten signature in blue ink that reads 'Laurie B. Gill'.

Laurie B. Gill
Secretary of the Department of Social Services



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Background

In 2016, DOH was awarded the Prescription Drug Overdose: Data-Driven Prevention Initiative (DDPI) 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 the state. The purpose of the grant was 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. An Opioid Abuse Advisory Committee was formed to oversee this work. In October 2021, the committee was restructured and expanded from 13 members to 17 members. In July 2022, pursuant to the terms of the National Settlement Agreement, the committee was expanded to 22 members (Appendix A).

When DSS had the opportunity to apply for federal funds, the decision was made to combine efforts. In May 2017, DSS was awarded the State Targeted Response to the Opioid Crisis Grant (STR) from the Substance Abuse and Mental Health Services Administration (SAMHSA); additional grant funding continues through the State Opioid Response (SOR) Grants, also issued by SAMHSA. Federal funding priorities focus on increasing access to treatment, reducing unmet treatment needs, and reducing 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. The SOR grant program also allows funding to be used to address stimulant use disorder in addition to OUD.

In 2019, DOH was awarded the Overdose Data to Action (OD2A) grant from CDC. The purpose of the grant is to support the collection of high quality, complete, and timely data on opioid and all drug overdoses, and to use that data to inform prevention and response efforts to reduce opioid overdose deaths through partnerships with communities and other state partners.

DOH and DSS have each applied for and successfully received additional federal opioid funds since the initiation of these efforts in 2016, allowing for continued service delivery, strategic focus on data-driven initiatives, and expansion of key programs supported by the work.

Additionally, South Dakota will receive approximately \$54 million over the next 18 years from the National Settlement Agreement involving Johnson & Johnson, AmerisourceBergen, Cardinal Health, McKesson, and a Bankruptcy Resolution concerning Purdue Pharma, L.P. The first year payment is expected to occur in the Fall of 2022 pending completion of the Memorandum of Agreement between participating local governments and Department of Social Services, who manages the funds in state.



Acronyms and Abbreviations

ASAM	American Society of Addiction Medicine
CDC	Centers for Disease Control and Prevention, U.S. Department of Health & Human Services
COARE	Community Opioid Abuse Response Effort
DATA	Drug Addiction Treatment Act of 2000
DDPI	Prescription Drug Overdose: Data Driven Prevention Initiative
DOH	South Dakota Department of Health
DOJ	U.S. Department of Justice
DSS	South Dakota Department of Social Services
ECHO	Extension for Community Healthcare Outcomes Model
EMS	Emergency Medical Services
FFY	Federal Fiscal Year
HIE	Health Information Exchange
MAT	Medication-Assisted Treatment
MOUD	Medications for Opioid Use Disorder
NARCAN	NARCAN® (naloxone HCl)
OD2A	Overdose Data to Action Grant
OEND	Overdose Education and Naloxone Distribution
ORN	Opioid Response Network
OUD	Opioid Use Disorder
P&T	Medicaid Pharmacy & Therapeutics Committee
PDMP	Prescription Drug Monitoring Program
PHEP	Public Health Emergency Preparedness
PSA	Public Service Announcement
SAMHSA	Substance Abuse and Mental Health Services Administration, U.S. Department of Health & Human Services
SDAAPP	South Dakota Association of Addiction and Prevention Professionals
SDAHO	South Dakota Association of Healthcare Organizations
SDSMA	South Dakota State Medical Association
SOR	State Opioid Response Grant
STR	State Targeted Response to the Opioid Crisis Grant
SUD	Substance Use Disorder



Opioid Settlement Funds

Over the next 18 years, South Dakota will receive approximately \$54 million from the National Settlement Agreement involving Johnson & Johnson, AmerisourceBergen, Cardinal Health, McKesson, and a Bankruptcy Resolution concerning Purdue Pharma, L.P. The first year payment of \$1,719,927.03 will occur in the Fall of 2022.

During the 2022 Legislative Session, HB 1038 appropriated these funds to the Department of Social Services for disbursement to address opioid abuse and misuse within the State. Codified in SDCL 34-20B-116, 70% (Statewide Share) will be appropriated to the State and 30% (Localized Share) will be disbursed directly to participating local governments.

Participating Local Governments include all South Dakota counties, and cities and towns with populations over 10,000 (based on the United States Census Bureau's Vintage 2019 population totals pursuant to the National Settlement Agreement).

Local governments had until July 15, 2022, to decide whether to participate. Appendix D features a list of participating and non-participating local governments. A Memorandum of Agreement (MOA) was created based on the National Settlement Agreement provisions, including those specific to South Dakota's structure. The MOA outlines the allocation, use, distribution, reporting, and other provisions as required. On August 24, 2022, Participating Local Governments received notice of their first year payment and a draft copy of the MOA. They were to notify DSS of who their primary point of contact would be regarding further communication as well as who will be their signing official on the MOA. DSS began collecting Participating Local Governments' signatures to the MOA on September 22, 2022. The first settlement payment will be received once the MOA is fully executed.

By January 31st of each calendar year, each Participating Local Government shall submit a report to DSS detailing for the preceding calendar year: (1) the amount of the Localized Share received; (2) the amount of Localized Share expended—broken down by funded project, program, or strategy; and (3) the amount of any allocations awarded by the Participating Local Government—listing the recipients, amounts awarded, amounts disbursed, disbursement terms, and the projects, programs, or strategies funded. By December 31st of each calendar year, the State shall publish in a report online detailing for the preceding fiscal year: (1) the amount received; (2) the amount expended and a description for each program of activity receiving funds; and (3) the amount of any grants awarded—listing the recipients, amounts awarded, amounts disbursed, disbursement terms, and programs, strategies, and projects funded. This information will be included in this annual report going forward.

Per the Janssen Settlement Agreement, an advisory committee is required to establish oversight and reporting requirements, address default provisions and other matters related to the funds. The State of South Dakota utilized the existing Opioid Abuse Advisory Committee with the addition of six local representatives.

Settlement documents, information, and updates will be posted on a public settlement website: <https://nationalopioidsettlement.com/>. The website will provide current information on an ongoing basis as the settlement implementation progresses.



Federal Funding Overview

The following federal funding sources have been leveraged to support the South Dakota Opioid Abuse Strategic Plan and are referenced throughout this report. Note that the federal fiscal year begins October 1 of each year.

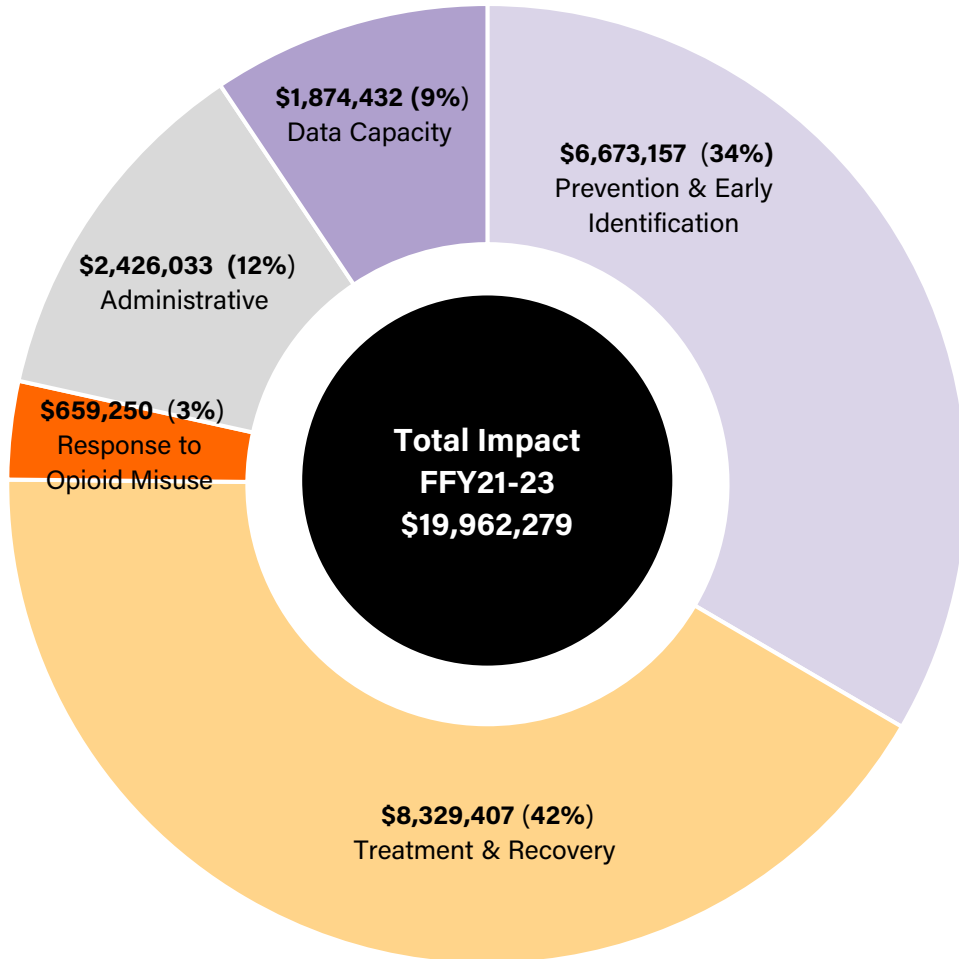
<p>SAMHSA SOR I</p>	<p>Substance Abuse and Mental Health Services Administration State Opioid Response (SOR I) Grant</p> <p>Award: \$8,038,692 plus \$2,098,099 supplemental funding Duration: 3 years Funding End Date: September 29, 2021 Federal Fiscal Years: FFY19 - FFY21 Lead Agency: DSS</p>	<p>SAMHSA SOR II</p>	<p>Substance Abuse and Mental Health Services Administration State Opioid Response (SOR II) Grant</p> <p>Award: \$4,001,239 per year Duration: 3 years Funding End Date: September 29, 2023 Federal Fiscal Years: FFY21 - FFY23 Lead Agency: DSS</p>
<p>SAMHSA SOR III</p>	<p>Substance Abuse and Mental Health Services Administration State Opioid Response (SOR III) Grant</p> <p>Award: \$4,000,000 per year Duration: 2 years Funding End Date: September 29, 2024 Federal Fiscal Years: FFY22 - FFY23 Lead Agency: DSS</p>	<p>CDC OD2A</p>	<p>Centers for Disease Control and Prevention Overdose Data to Action</p> <p>Award: \$2,622,603 each of Years 1-3; \$2,422,603 in Year 4 Duration: 4 years Funding End Date: August 31, 2023 Federal Fiscal Years: FFY20 - FFY23 Lead Agency: DOH</p>
<p>DOJ COAP</p>	<p>Department of Justice, Bureau of Justice Assistance Comprehensive Opioid Abuse Program</p> <p>Award: \$875,972 Duration: 3 years Funding End Date: September 30, 2021 Federal Fiscal Years: FFY19 - FFY21 Lead Agency: South Dakota Board of Pharmacy</p>		



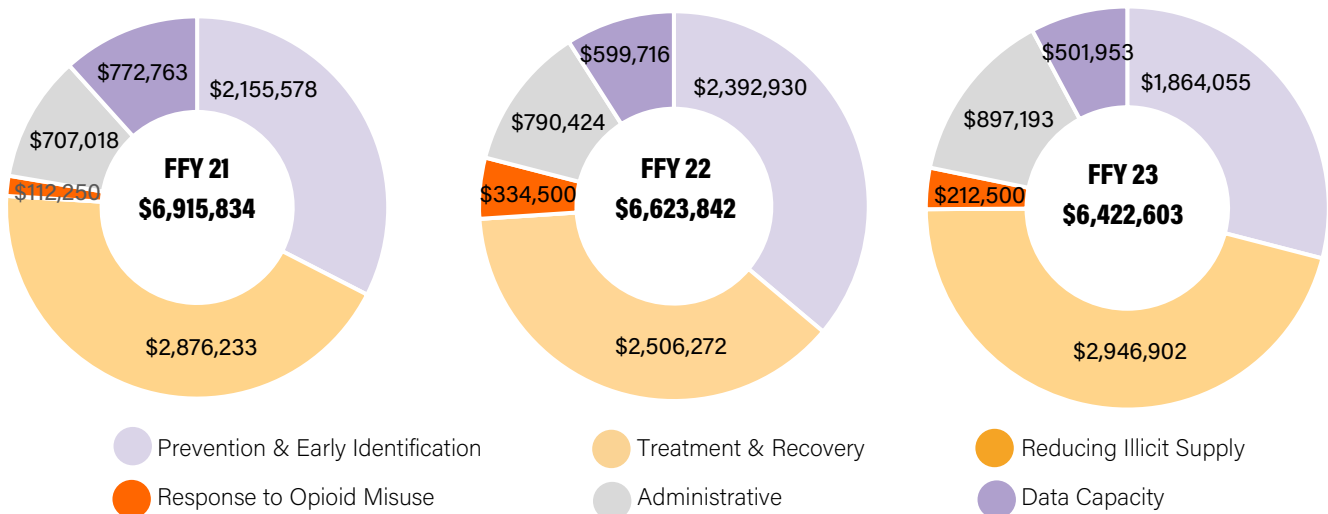
Budget Breakdown by Federal Fiscal Year

The following reflects federal dollars budgeted for each goal area within the South Dakota Opioid Abuse Strategic Plan, as well as funding to support data capacity efforts and grant administration.

Federal Fiscal Year 2021-2023 Opioid Funding



Opioid Funding, by Federal Fiscal Year (FFY)





South Dakota Opioid Abuse Strategic Plan

The framework of the strategic plan, modeled after the National Governors Association Opioid Road Map, is shared jointly between DSS and DOH. Evidence-based strategies, a statewide needs assessment, and input from the South Dakota Prescription Opioid Abuse Advisory Committee informed the objectives within the plan. View the entire Strategic Plan document and more information at <https://www.AvoidOpioidSD.com/about/strategic-plan/>. Appendix B provides a list of partner agencies that have received grant funding to carry out the below strategies.

Recognizing the extraordinary coordination that has taken place among community, healthcare, and government stakeholders, and acknowledging the accomplishments that have already been achieved, the strategic plan was updated in June 2021. The updated plan outlines the goals, strategies and objectives that will continue to guide our response to the opioid epidemic in the coming years to enhance the positive changes that have already occurred. Please refer to Appendix C for archived or completed strategies.

GOALS			
PREVENTION AND EARLY IDENTIFICATION	TREATMENT AND RECOVERY	REDUCING ILLICIT SUPPLY	RESPONSE TO OPIOID MISUSE AND ABUSE
STRATEGIES			
<ol style="list-style-type: none"> 1. Promote and provide professional education and training on evidence-based practices for opioid misuse prevention and early intervention. 2. Support continued practice improvement through tools that help providers and health systems implement evidence-based care for opioid use disorder such as prescription drug monitoring program utilization. 3. Continue to raise awareness around resources and information available through community-based prevention and media strategies that address the risks associated with opioid misuse or abuse. 4. Enhance supports for alternative pain management strategies through expanded partnerships and awareness efforts. 	<ol style="list-style-type: none"> 5. Support awareness of and access to Medications for Opioid Use Disorder and recovery supports through continued training and education, enhanced referral systems, linkages to care, connection to resources, and treatment cost assistance. 6. Improve treatment engagement and retention through care coordination and follow-up services, peer and family support services, recovery housing, case management, and other recovery support services. 	<ol style="list-style-type: none"> 7. Increase access to safe medication storage and disposal through drug take-back programs and at-home medication storage and disposal. 	<ol style="list-style-type: none"> 8. Enhance overdose education and naloxone distribution across South Dakota through expanded training and continued, coordinated distribution.



Capacity Building Efforts : Data Surveillance and Analysis

Data surveillance and analysis serves as the foundation to the strategic plan. The CDC DDPI grant built state capacity to collect, analyze, and apply data to develop and support strategies for combatting opioid misuse and abuse. These capacity-building efforts have continued through the CDC Overdose Data to Action (OD2A) grant, which supports South Dakota in obtaining high-quality, more comprehensive, and timelier data on overdose morbidity and mortality.

Accomplishments

Launched data dashboards on the Avoid Opioid SD website to provide stakeholders and the public with credible, regularly updated data, which includes drug related deaths, including opioid specific deaths, clients with OUD receiving publicly funded treatment services, and more. The dashboards continue to be updated on a quarterly basis. (www.AvoidOpioidSD.com/key-data)

Utilized Syndromic Surveillance¹ to track suspected opioid overdoses presenting to hospital emergency rooms.

Established quarterly data abstracts from the Prescription Drug Monitoring Program.

Conducted a county-level vulnerability assessment to identify areas at high risk for bloodborne infections associated with nonsterile drug injection. (<https://doh.sd.gov/statistics/vulnerabilityassessment.aspx>)

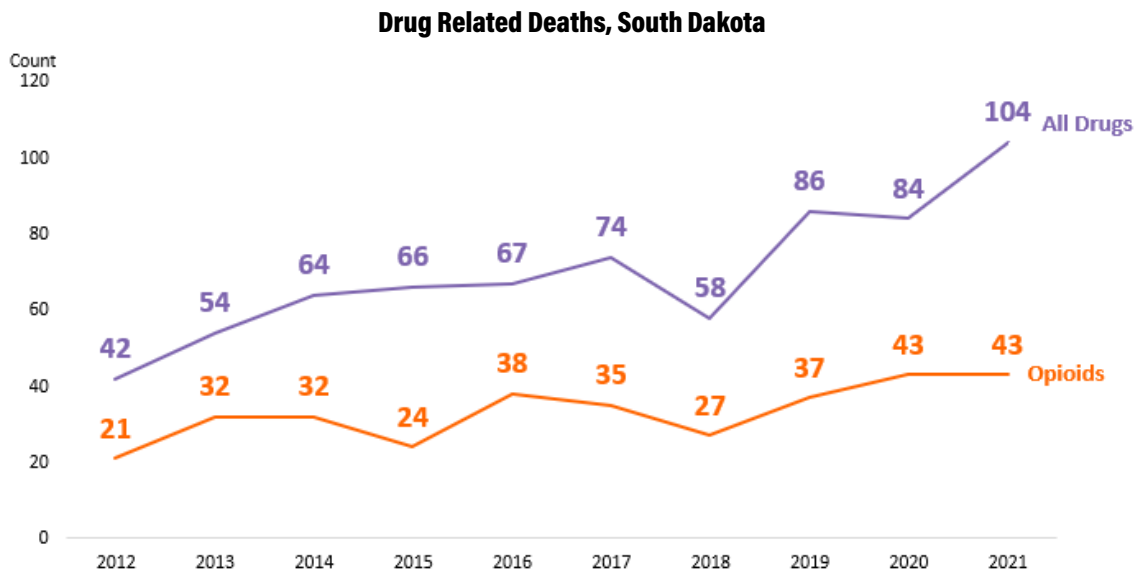
Enhanced the amount of relevant clinical data available to clinical end users of the South Dakota Health Link (the state’s Health Information Exchange, or HIE), a one-of-a-kind network that allows secure consultations and sharing of test results between providers for better patient outcomes.

In November 2021, a small multi-agency Data to Action workgroup started to examine provisional overdose data on a monthly basis to identify potential trends in fatal and non-fatal overdose. Four counties were identified as being of concern, and local partners were notified and resources shared.

Current Activities & Future Plans

Collect, submit, and disseminate data on suspected drug overdoses and drug overdose deaths to the Drug Overdose Surveillance and Epidemiology (DOSE) System and the State Unintentional Drug Overdose Reporting System (SUDORS).

The South Dakota Public Health Lab coordinates with South Dakota hospitals to provide comprehensive drug and toxicology testing support for non-fatal overdose cases to track the public health risk of the illicit opioid drug supply.



¹ Collection and analysis of chief complaint data from hospital emergency departments for the purpose of identifying and predicting trends as they are occurring. Note that chief complaint data from Indian Health Services, Veterans Affairs, and two hospitals across South Dakota are not included at present. For more information see: <https://www.AvoidOpioidSD.com/key-data/>



Goal Area 1: Prevention and Early Identification

1. Promote and provide professional education and training on evidence-based practices for opioid misuse prevention and early intervention.

Accomplishments

For the past several years, sponsorships have been awarded to numerous organizations for training and education events aimed at professionals that work in opioid misuse prevention, allowing them to further their abilities at the local level. Funding has supported a range of programs spanning from conference keynote speakers to the purchase of equipment for simulated regional anesthesia techniques that reduce the need for opioids and improve patient outcomes.

In FFY22, DSS coordinated trainings for prevention professionals statewide in early intervention, which focused on screening and brief interventions, as needed, for substance use problems at an early stage. Three training sessions were held in evidence-based practices centered on promoting positive behavior change – Prime for Life from the Prevention Research Institute and Interactive Journaling® from The Change Companies®.

Current Activities & Future Plans

Additional trainings in early intervention are planned for FFY23, following assessment of the need for and interest in additional skill-building in early intervention or other universal prevention strategies.

SDAHO continues to engage in provider education, focusing on topics such as reducing stigma around OUD, identifying and diagnosing OUD, referral to treatment, and access and utilization of the Prescription Drug Monitoring Program.

Key Outcomes & Metrics

- ✓ In April 2022, 234 individuals attended the *Strategies to Reduce the Impact of Substance Use* workshop, facilitated in partnership with the Helpline Center.
- ✓ A total of 62 prevention professionals completed early intervention training in FFY22.
- ✓ In partnership with the South Dakota Dental Association, 60 dental professionals participated in training on Chemical Dependence and Prescription Writing on June 19, 2020, and 70 dental professionals participated in training on effective alternatives to opioids for pain management on May 13, 2021.

2. Support continued practice improvements through tools that help providers and health systems implement evidence-based care for opioid use disorder such as prescription drug monitoring program utilization.

Accomplishments

Through a special Committee on Pain Management and Prescription Drug Abuse, the South Dakota State Medical Association (SDSMA) developed [evidence-based guidelines](#) for prescribing opioid analgesics to effectively treat pain and minimize patient risk. In FFY21, the Ad Hoc Committee updated its Acute Pain Care Guidelines, since adopted by the Board of Dentistry as well as the South Dakota Dental Association. The SDSMA Committee on Pain Management and Prescription Drug Abuse updated their white paper on the Effective Management of Acute Pain, providing recommendations on pain management and prescription drug abuse.

Enhanced the [South Dakota Prescription Drug Monitoring Program \(PDMP\)](#) by providing quarterly Prescriber Reports and patient Clinical Alerts.

Enhanced South Dakota's PMP AWARe platform to NarxCare which is a comprehensive platform to identify, prevent and manage substance use disorder (SUD). It empowers prescribers and dispensers to identify patients that may be at risk for addiction, overdose, and death, and equips them with the tools and technology they need to help those patients.

Statewide PDMP integration within electronic health records and pharmacy management systems continues to be a key component of South Dakota's ongoing efforts to address the opioid crisis. Integration empowers healthcare practitioners at the point of care with information that enhances clinical decision-making. The



PDMP has been integrated into the electronic health record platforms at all three of South Dakota’s major health systems – Avera Health, Monument Health, and Sanford Health.

Completed a PDMP assessment through a survey that was sent to registered users of the PDMP, with results showing that both prescribers and pharmacists found the PDMP to be useful with a variety of tasks including patient management and communication.

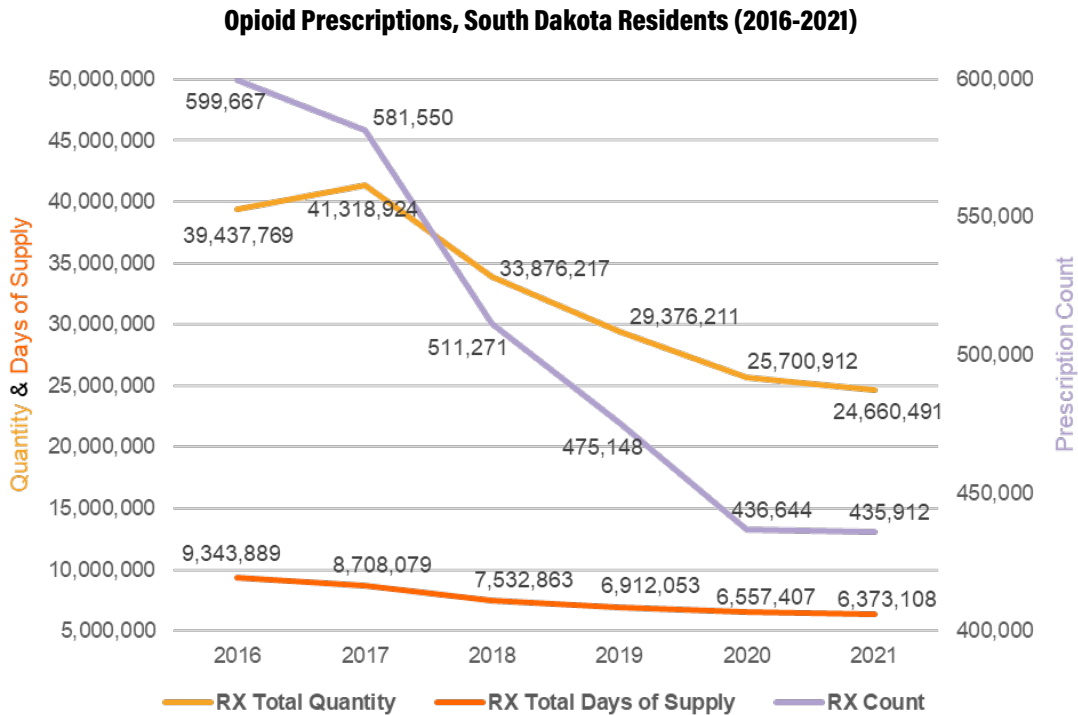
Current Activities & Future Plans

Continue to establish interstate data sharing through PMP InterConnect with all participating PDMPs; currently connected to 38 other PDMPs including 35 states, St. Louis County, MO, Puerto Rico, and the Military Health System. The SD PDMP also shares data with Nebraska via the RxCheck hub.

Continue efforts to have all SD professional licensing boards live with the License Integration enhancement project. This enhancement supports automatic reverification processes for current users to maintain program user integrity and auto-approval of new accounts enabling healthcare practitioners immediate access to this clinical decision-making tool.

Key Outcomes & Metrics

- ✓ Total approved, active users of the PDMP is 7,600.
- ✓ Utilization, measured by the number of patient queries performed, has doubled in four years and two-thirds of queries by SD prescribers and pharmacists are now done in-workflow through one click integration access.
- ✓ In the last four years, both the total number of Clinical Alerts for all prescribers and the total number of prescribers receiving Clinical Alerts have decreased.



Note: PDMP data is pulled monthly and reflects numbers at that point in time. Changes in data may occur after initial analysis.



3. Continue to raise awareness around resources and information available through community-based prevention and media strategies that address the risks associated with opioid misuse or abuse.

Avoid Opioid Awareness Campaign

Accomplishments

The statewide [Avoid Opioid Campaign](#) shares relevant and educational information focused on saving lives by raising awareness of the risk and signs of overdose, safe ways to respond, best practices in prescribing, treatment and recovery practices to those most impacted, such as family members and friends, prescribers, pharmacists, behavioral health professionals, and other professionals. A strategic media mix has been instrumental in driving traffic to the website and increasing calls to the Resource Hotline. Statewide media broadcast overlaps with targeted social media campaigns aimed at specific at-risk populations with emphasis in and around vulnerable counties.

- AvoidOpioidSD.com launched in June 2018, along with associated social media platforms for Facebook, Instagram, and YouTube. The website continues to be enhanced with relevant and up-to-date information.
- Developed print materials and made them available at no cost to the public and targeted audiences.
- Developed four South Dakota-specific testimonials for placement in broadcast television and social media. Broadcast campaigns began running in December 2018. During 2021-22 four Naloxone videos and correlating social media ads were developed for statewide broadcast and social media placement. They emphasize the importance of having Naloxone on hand to reverse an overdose and overdose warning signs.
- In October 2020, an integrated campaign launched to promote Care Coordination and the suite of extended services available to South Dakotans via the Treatment Resource Hotline. A set of matching radio ads supported the television flights as did regular placement in a number of industry trade publications.
- A Snapchat campaign launched in May 2020, and has reached nearly 470,000 people with overdose prevention, Treatment Resource Hotline, and stress management messaging.
- In February 2022, the Lucas Lock Box broadcast placement began running in combination with Facebook/Instagram posts resulting in 1,272 medication lock box orders in February alone.

Current Activities & Future Plans

Promotion of the statewide media campaign will continue in FFY23, with new broadcast media to increase public awareness of services available.

In addition to ongoing mass media efforts designed to raise public awareness related to overdose prevention, safe medication handling practices, treatment and referral services and support, additional resources and tools are being developed to help advocates in the first responder and law enforcement fields reinforce prevention messages and connect the public to available services and resources.

- A set of new print materials designed to call attention to the dangers of counterfeit pills and polysubstance use will be distributed to law enforcement partners statewide along with existing educational materials.
- Corresponding website content will help South Dakotans learn that counterfeit pills are widely available and increasingly deadly, how to keep your family safe and how to help raise awareness.
- Radio scripts have been developed in partnership with local law enforcement agencies and will feature officers from communities talking about the increases in overdoses and deaths related to counterfeit pills and will point people to the website for additional information.

Key Outcomes & Metrics

- ✓ Over 2,360,000 individuals² have been reached with Avoid Opioid SD messages since the beginning of the campaign.

² Individuals reached can surpass the SD population due to people visiting from out of state, living near the state border, and owning multiple social media accounts.



- ✓ Two new Care Coordination videos were launched on broadcast and social media in October 2020. On social media, this resulted in 700 Call Now Button clicks, which auto-populates the Treatment Resource Hotline number in the individuals' mobile device³.
- ✓ In FFY21, there were 35,397 website visits and in FFY22 there were 84,564 visits, a 139% increase.
- ✓ Over 859,000 South Dakotans have been reached with messaging on safe at-home medication disposal options via social media since campaign launch.

Opioid Awareness Efforts for Targeted Populations

Accomplishments

DSS utilized the GoodHealthTV® narrowcast network to deliver culturally connected health and wellness education directed towards Native American audiences specific to opioid misuse/abuse prevention and awareness for the third year. Airtime played throughout all participating clinics and health centers in South Dakota in both FFY21 and FFY22.

Five, 30 second videos were distributed to South Dakota American Indian teens and young adults through Facebook and Instagram from 12/7/20 – 5/31/21. The videos created for these distribution channels utilized a graphic animation style, which provided both an approachable format and was culturally reflective. This approach proved to be effective as the view through rate was 73%, far exceeding the industry standards for a successful view through rate of 30%⁴.

Current Activities & Future Plans

Continued broadcasting of existing video segments with messaging focused on increasing awareness of opioid misuse and the associated dangers will continue in tribal schools and clinics in FFY23.

Key Outcomes & Metrics

- ✓ Social media campaign ran on Facebook and Instagram from December 7, 2020 – May 31, 2021, and achieved 138,100 post engagements⁵. From January 1, 2022, through May 31, 2022, the content ran in a digital media buy with a total volume of 1,020,567 including a View Through Rate (VTR) of 66.95%, and an industry average Click Through Rate (CTR) of 0.19%.
- ✓ During FFY21, video segments were played 84,369 times throughout the target clinics. With some schools still closed due to COVID-19, airtime was increased in the target clinics. During FFY22 video segments were played 39,376 times throughout 16 health clinics and played 31,510 times in 13 schools on all participating GoodHealthTV® South Dakota locations.

Prevention

Accomplishments

Trained prevention professionals from local community-based coalitions have worked across the state to promote [evidence-based opioid prevention programs](#) and deliver educational materials to middle- and high-school youth.

Through established key partnerships with local community-based coalitions and the Prevention Resource Centers (PRCs), DSS supports prevention awareness and education across South Dakota.

During FFY19 – FFY21, Positive Action® curriculum was delivered to students participating in after-school and summer programming at 14 Boys & Girls Clubs statewide.

Beginning in FFY21, the PRCs have continued to collaborate with organizations faced with unique challenges in combatting the opioid crisis.

- PRC staff outreached to local funeral home directors to provide materials that can educate family members on proper medication disposal and provided DisposeRx packets for distribution.

³ After the number is auto populated, the user must still complete the call. While Call Now Button clicks don't always result in an actual call to the Resource Hotline, it is still an accurate gauge of audience interaction with messaging.

⁴ The view through rate references the number of times individuals were presented with a video and instead of clicking to skip the video, they chose to watch the entire video.

⁵ Post engagement is any action someone takes on post, examples include comments, shares, and likes.



- PRC staff also worked with local realtors on education of proper medication storage and provided resources and medication lock boxes for homeowners.
- Outreach and education among veterinarians was done to increase awareness of potential misuse of pet medications and safe storage and disposal options for expired or no longer in use pet medications available in their communities.

Current Activities & Future Plans

DSS and DOH will continue to actively work with prevention professionals across the state to provide opioid prevention awareness and education. Supported activities are evidence-based and in alignment with SAMHSA's Opioid Overdose Prevention Toolkit.

The [Communities That Care® \(CTC\) Prevention Framework](#) is currently implemented in 10 communities identified as being high risk for opioid overdose. This framework is intended to build prevention capacity while promoting healthy youth development, improving youth outcomes, and reducing problem behaviors.

Five South Dakota based CTC coaches are being trained to provide technical assistance to the selected communities as well as build capacity and sustainability for the CTC process in state.

In FFY23, the PRCs will continue to educate, train, and increase public awareness on the dangers and risks associated with opioid misuse. In addition, focus will be made on increasing pharmacy participation and community utilization and awareness related to the statewide standing order for Naloxone as an opioid overdose reversal agent.

Key Outcomes & Metrics

- ✓ As of September 30, 2022, more than 10,100 youth have been impacted by evidence-based prevention programming in schools or after-school settings, and more than 4,400 individuals across dozens of towns in South Dakota participated in locally delivered training or town hall meetings regarding opioid education and awareness.

4. Enhance supports for alternative pain management strategies through expanded partnerships and awareness efforts.

Accomplishments

Supported leader training and workshops for the [Better Choices, Better Health Chronic Pain Management](#) program as an alternative to pain management.

Added alternative delivery options, such as virtual evidence-based program delivery for Better Choices, Better Health Chronic Pain Management, Fit & Strong, and Walk with Ease programs.

Current Activities & Future Plans

Continue support of the Better Choices, Better Health Chronic Pain workshops, as well as the [Fit & Strong](#) and [Walk With Ease](#) programs, as alternatives for pain management.

Key Outcomes & Metrics

- ✓ Through FFY22, 172 individuals have participated in Chronic Pain Workshops, 903 individuals have participated in the Walk With Ease program, and 384 in the Fit & Strong program.



Goal Area 2: Treatment and Recovery

5. Support awareness of and access to Medications for Opioid Use Disorder and recovery supports through continued training and education, enhanced referral systems, linkages to care, connection to resources and treatment cost assistance.

Accomplishments

Support for awareness of and access to [Medications for Opioid Use Disorder \(MOUD\)](#), formerly referred to as Medication Assisted Treatment (MAT), is a key strategy of the State Opioid Response grant program. MOUD is the use of medications, in combination with counseling and behavioral therapies, to provide a “whole patient” approach to the treatment of opioid use disorder. Medications used are approved by the Food and Drug Administration and MAT/MOUD programs are clinically driven and tailored to meet each patient’s needs. DSS is currently contracted with four organizations that offer and increase access to MOUD statewide through office-based and telemedicine-based care. Providers are able to leverage State Opioid Response funding to provide treatment cost assistance for their patients as a payer of last resort. In addition, DSS is working with the Minnehaha County Jail to provide MOUD and case management supports for incarcerated individuals as they prepare to re-enter the Sioux Falls area, primarily, and work to connect those individuals to services outside of jail once released.

Of note, MOUD is an eligible service covered by Medicaid.

The Indigent Medication Program provides temporary financial support for psychotropic medication, medication for the treatment of substance use disorders, maintenance treatment, and related lab costs to eligible individuals while other funding options are identified. This can be used to cover the costs associated with MOUD for individuals with no other funding source.

Through a partnership with the Helpline Center, DSS supports the Treatment Resource Hotline and [searchable online database](#) housed on AvoidOpioidSD.com. Individuals struggling with opioid misuse and other substances, or those affected by someone else’s suspected misuse, are encouraged to connect with the [Care Coordination Program](#) for support.

Training and education are key tenets of this strategy:

- In FFY22, DOH partnered with South Dakota Health Link and Avera Behavioral Health System to launch the Navigator program that provides coordination of services by being a point of contact for patients in the behavioral health system as well as providers across the system who may need assistance in directing their patients to behavioral health services. The program offers a follow up call to every discharged patient. The Navigator program also provides community education on mental health and substance use.
- DOH also worked to develop and implement the Emergency Department Provider Toolkit, an interactive guide for providers and hospital administrators providing strategies to incorporate best practices for screening and diagnosis, referral to treatment, safe prescribing, and community resources in an Emergency Department setting.
- DSS partnered with University of South Dakota to implement training and education related to OUD and reducing stigma associated with Naloxone and MOUD on the college campus and in the community, including enhancements to the Physician Assistant (PA) curriculum through evidence-based practices.

Current Activities & Future Plans

MAT/MOUD will continue to be available across South Dakota through contracted providers. Care is available via telemedicine as well as through traditional office visits. Funds are primarily used to support temporary financial assistance for cost of treatment and medications for opioid use disorder.

The Treatment Resource Hotline & texting service is staffed 24 hours a day, 365 days a year offering free, confidential support. The Treatment Resource Hotline continues to receive phone calls since it was launched in October 2018.

DOH intends to continue its work with South Dakota Health Link and Avera Behavioral Health by further developing identified needs and agreements to put the framework into use.



SDAHO aims to implement the Emergency Department Provider Toolkit in five hospitals across the state and provide technical assistance to participating pilot sites.

Key Outcomes & Metrics

- ✓ More than 2,000 individuals have been provided treatment cost assistance as part of their Medication for Opioid Use Disorder treatment among partnering MOUD providers through State Opioid Response funding, managed by DSS.

An average of 550 new patients initiated treatment for opioid use disorder in each of the two previous federal fiscal years (FFY21 and FFY22).
- ✓ Since launching the service in October 2018, the Treatment Resource Hotline has received more than 1,600 phone calls. On average, the needs of 50 individuals are navigated through this resource on a monthly basis.

6. Improve treatment engagement and retention through care coordination and follow-up services, peer and family support services, recovery housing, case management, and other recovery support services.

Accomplishments

[Recovery Support Services](#) are available statewide and focused on improving the health and wellness of individuals through treatment engagement and retention in care. Peer recovery support services are available to provide effective, science-based peer coaching for people living with addiction, including their loved ones. South Dakota's peer support models that of SAMHSA, utilizing Peer Support Workers, or individuals who have been successful in the recovery process. Peer support services are available via office-based and virtual coaching sessions. In February 2020, one of the contracted MOUD providers, Project Recovery, integrated peer recovery support services within their clinic.

Established MOUD-friendly recovery homes in partnership with Oxford House, Inc. across South Dakota, and supported the already established houses in the state through the formation of an Oxford House State Chapter.

Provided intensive case management for pregnant and postpartum women impacted by OUD and/or stimulant use disorder. Positive outcomes from the recovery support services received through this program led to substantial increase in pregnant women receiving integrated services, treatment, maternal health resources, legal services, transportation services, life skills education, housing assistance services, employment and job training services, case management services, and parenting services. These services and resources improve birth outcomes, reduce the risk and adverse complications of prenatal substance exposure for both mothers and newborns, and help families stay together.

Current Activities & Future Plans

Recovery support services will be continued in partnership with several key providers:

- Helpline Center, through continued availability of care coordination and follow-up services.
- Oxford House, Inc., through expanded access to MOUD-friendly recovery housing, focusing next on the communities of Eagle Butte, Pierre, and Yankton.
- Face It TOGETHER and Project Recovery, through continued access to recovery cost assistance for peer coaching services available statewide through office-based and virtual pathways.
- Bethany Christian Services, through continuation of the ReNew program (Recovering Mothers with Newborns) which integrates evidence-based models across formal systems of care to engage expectant mothers and their newborns to attain positive, life-changing behavior.

In addition, as part of the State Opioid Response III Grant Program, DSS will develop and implement an evidence-based contingency management program to improve retention in care for individuals receiving treatment cost assistance.

Key Outcomes & Metrics

- ✓ Face It TOGETHER provided peer recovery coaching to more than 100 individuals impacted by opioid or stimulant use using State Opioid Response recovery cost assistance in FFY22.
- ✓ Project Recovery integrated peer recovery support coaching services into its continuum of care beginning February 2020. In a typical month, 95% of Project Recovery's clients receive at least 15 minutes of peer coaching as part of their treatment plan.



- ✓ As of September 30, 2022, Oxford House has implemented and manages, through a peer-led model, 10 houses with a total capacity of 87 beds in Minnehaha, Pennington, and Brown Counties. Of note, two homes – one in Sioux Falls and one in Rapid City – are homes for women and their children.
- ✓ In FFY22, more than 50 pregnant or postpartum women impacted by opioid or stimulant use received intensive case management services through the ReNew Program in partnership with Bethany Christian Services. This fiscal year marked the first program graduates in South Dakota, representing women who successfully completed all program requirements through their pregnancy and one year postpartum.

Goal Area 3: Reducing Illicit Supply

7. Increase access to safe medication storage and disposal through drug-take programs, and at-home medication storage and disposal.

Accomplishments

Since 2017, the South Dakota Board of Pharmacy has placed 84 permanent drug take-back receptacles in retail pharmacies and hospitals across South Dakota and enrolled an additional five locations that already had their own receptacles to the South Dakota PharmaDrop Program. This brings the total number of locations managed through the program to 89. A comprehensive list of permanent drug take-back sites can be found on [AvoidOpioidSD.com](https://www.avoidopioid.com).

Expanded access to [safe medication storage and disposal](#) by adding the option to order free DisposeRx packets for at-home disposal and free medication lock boxes to [AvoidOpioidSD.com](https://www.avoidopioid.com). Marketing and promotion in partnership with the Avoid Opioid SD campaign significantly increased public awareness of this resource and distribution upon request.

Current Activities & Future Plans

In partnership with DSS, the South Dakota Board of Pharmacy will continue to maintain the drug-take back receptacles placed through the program by supporting the costs of disposal and reloads.

DSS will continue to offer free DisposeRx packets and medication lock boxes, as well as supporting take-back events throughout the state.

Key Outcomes & Metrics

- ✓ Since program inception in 2017 through September 2022, the PharmaDrop Program has returned a total of 32,791 pounds of drugs for destruction.
- ✓ Since launching the DisposeRx service in January 2020, more than 1,400 packets have been mailed out upon request or distributed to individuals at no cost for safe medication disposal.
- ✓ Since launching the lock box service in July 2020, more than 3,500 boxes have been mailed out at no cost for individuals to safely secure their medications.
- ✓ The DEA National Take-Back day on April 30, 2022, yielded extremely successful outcomes for South Dakota. There were 1,168 pounds of medication collected for destruction through participating law enforcement locations. This was in addition to the 1,166 pounds collected through the PharmaDrop Program that same month.



Goal Area 4: Response to Opioid Misuse and Abuse

8. Enhance overdose education and naloxone distribution across South Dakota through expanded training and continued, coordinated distribution.

Accomplishments

[Overdose Education and Naloxone Distribution \(OEND\)](#) has focused on equipping first responders with the knowledge and medication to appropriately assess and respond to instances of opioid overdose.

Extended the statewide standing order for naloxone for another two-year period, effective through September 2024, allowing all pharmacies to dispense naloxone to anyone at risk of an opioid-related overdose or those in a position to assist someone at risk including family members, friends, or close third party. Individuals can access naloxone at participating pharmacies statewide with funding assistance available. The goal of the statewide standing order is to prevent overdose deaths from opioids.

Developed and launched a [free, online, interactive training](#) for overdose education and naloxone distribution that anyone in South Dakota can access on demand.

Expanded the OEND program to provide free NARCAN® to South Dakota organizations that serve clients who may be at risk of an opioid-related overdose.

Current Activities & Future Plans

Continue OEND for emergency responders and collecting ongoing evaluation of naloxone distribution efforts including administrations, patient status, and provider information.

Current efforts for the statewide standing order are focused on increasing awareness, both to pharmacies to encourage enrollment and to the public to educate them on this available option.

Develop an overdose follow-up program to provide non-clinical assistance, recovery supports, and appropriate referrals for additional care as needed to individuals who have been reversed from an opioid overdose.

Refine and implement the Naloxone distribution and saturation plan developed as part of the State Opioid Response program, aimed at equipping counties most vulnerable for opioid overdose with life-saving overdose reversal medication.

Key Outcomes & Metrics

- ✓ Since December 2017, a total of 950 individuals at risk of an opioid-overdose related death have had an improved response in their condition following administration of NARCAN® by EMS personnel.
- ✓ 67 pharmacies have enrolled to participate in the statewide standing order. A comprehensive map of participating pharmacies can be found at <https://www.avoidopioidsd.com/take-action/reverse-overdose/find-a-naloxone-pharmacy/>.
- ✓ 146 individuals have completed the online training for overdose education and naloxone distribution.
- ✓ More than 1,000 individuals were impacted through targeted training, survey education, and video showing through multiple events in partnership with University of South Dakota Addiction Counseling & Prevention Department.



Appendix A: Opioid Abuse Advisory Committee Members (as of 10/1/2022)

Lori Martinec, South Dakota Department of Health, Chair

Becky Heisinger, South Dakota Association of Healthcare Organizations

Sara DeCoteau, Sisseton Wahpeton Oyate of the Lake Traverse Reservation

Margaret Hansen, South Dakota Board of Medical & Osteopathic Examiners

Amy Hartman, Volunteers of America – Dakotas

Tiffany Wolfgang, South Dakota Department of Social Services

Tom Deadrick, Attorney General's Office Representative

Kristen Carter, South Dakota Pharmacists Association

Dayle Knutson, Great Plains Indian Health Services

Kari Shanard-Koenders, South Dakota Board of Pharmacy
Representative Taylor Rehfeldt, Sioux Falls

Dr. Erin Miller, South Dakota State University, College of Pharmacy & Allied Health Professions

Tosa Two Heart, Great Plains Tribal Leaders Health Board

Dr. Jennifer Ball, PharmD, BCACP, BCGP, South Dakota State University, Center for Family Medicine

Brian Mueller, Pennington County Sheriff's Office

Jill Franken, Sioux Falls

Susan Kornder, Northeastern Mental Health Center

Mary Beth Fishback, Brookings Behavioral Health and Wellness

Jason Jones, Pierre Police Department

Jason Foote, Yankton Police Department

Dr. John Rounds, PT, Pierre Physical Therapy & Rehabilitation

Dr. Melanie Weiss, OD, Weiss Eyecare Clinic



Appendix B: Partners to Date

Aberdeen Area Chamber of Commerce
Avera Health
Bethany Christian Services
Boys and Girls Club of America – South Dakota Alliance
Cardwell C. Nuckols, MD
Center for Family Medicine
Center for the Prevention of Child Maltreatment at University of South Dakota
Community HealthCare Association of the Dakotas
Dakota State University
Face It TOGETHER
Imagine Agency, LLC (Hot Pink, Ink)
KAT Marketing (GoodHealthTV®)
Lewis & Clark Behavioral Health Services, Inc.
Minnehaha County Jail
Mount Marty University
National Association of Social Workers – South Dakota Chapter
Opioid Response Network
Oxford House Inc.
Prevention Resource Centers and Community-Based Prevention Coalitions
Project Recovery & Addiction Recovery Centers of the Black Hills
Sage Project Consultants, LLC
SLM Consulting, LLC
South Dakota Association of Addiction & Prevention Professionals
South Dakota Association of Healthcare Organizations
South Dakota Association of Nurse Anesthetists
South Dakota Dental Association
South Dakota Psychological Association
South Dakota State Medical Association
South Dakota State University
Southeast Technical College
The Helpline Center
University of South Dakota



Appendix C: Archived or Completed Strategies

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

Integrated into strategies 4 and 5, and no longer identified as a separate initiative.

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

Integrated into strategies 1 and 2, with the intent to support the full continuum of care in alignment with allowable costs per the federal funding terms and conditions.



Appendix D: Opioid Settlement Participating Local Governments

The list of Participating Local Governments is subject to change as DSS is currently collecting signatures to the required MOA. The first settlement payment will not be received until the MOA is fully executed.

Participating Local Governments (66)	Non-Participating Local Governments (13)
Aberdeen City	Bennett County
Aurora County	Buffalo County
Beadle County	Day County
Bon Homme County	Douglas County
Box Elder City	Haakon County
Brandon City	Hamlin County
Brookings City	Hyde County
Brookings County	Kingsbury County
Brown County	Lyman County
Brule County	Marshall County
Butte County	Miner County
Campbell County	Moody County
Charles Mix County	Stanley County
Clark County	
Clay County	
Codington County	
Corson County	
Custer County	
Davison County	
Deuel County	
Dewey County	
Edmunds County	
Fall River County	
Faulk County	
Grant County	
Gregory County	
Hand County	
Hanson County	
Harding County	
Hughes County	
Huron City	
Hutchinson County	
Jackson County	
Jerauld County	
Jones County	
Lake County	
Lawrence County	
Lincoln County	
McCook County	
McPherson County	
Meade County	
Mellette County	
Minnehaha County	
Mitchell City	
Oglala Lakota County	
Pennington County	
Perkins County	
Pierre City	
Potter County	
Rapid City	
Roberts County	
Sanborn County	
Sioux Falls City	
Spearfish City	
Spink County	
Sully County	
Todd County	
Tripp County	
Turner County	
Union County	
Vermillion City	
Walworth County	
Watertown City	
Yankton City	
Yankton County	
Ziebach County	