

### SUPPLEMENTAL INFORMATION: SUBSTANCE USE DISORDER

#### Recommended Evidence-based and/or Promising Strategies

The National Health Institute on Drug Abuse and the U.S. Department of Health and Human Services reports five priorities to help combat the opioid epidemic.<sup>1</sup> These are:

1. improving access to treatment and recovery services
2. promoting use of overdose-reversing drugs
3. strengthening the understanding of the epidemic through better public health surveillance
4. providing support for cutting-edge research on pain and addiction; and
5. advancing better practices for pain management.

The U.S. Centers for Disease Control and Prevention (CDC) recommends promising strategies to prevent drug use and overdose through several different methods. First, it is recommended to use prescription monitoring programs.<sup>2</sup> These programs are state-managed databases that track and record prescription-controlled substances such as opioid medications. It is also recommended for health care providers to use alternative health resources for pain management in substitution for controlled substances, which have been found to be addictive.<sup>2</sup> Second, in regard to opioid related drug usage, it is recommended to promote access to naloxone.<sup>2</sup> The CDC also notes policies that allow support and access to clean syringes.<sup>2</sup> It has been evident that needle exchange programs are effective to reduce prevalence and incidence of HIV and hepatitis C among intravenous drug users.

For tobacco use and smoking, the CDC reports that involvement in these activities causes serious diseases and tobacco dependency. The CDC reports promotion of smoking cessation for both adults and children. It is especially noted to promote tobacco prevention among youth to decrease smoking rates and improve quality of life. Interventions such as tobacco price increases, high impact anti-tobacco mass media campaigns, and smoke-free laws can be effective. There is evidence that increasing tobacco prices would

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<sup>1</sup> U.S. Department of Health and Human Services. (nd). *Strategy to Combat Opioid Abuse, Misuse, and Overdose*. Retrieved December 14, 2020 from <https://www.hhs.gov/opioids/sites/default/files/2018-09/opioid-fivepoint-strategy-20180917-508compliant.pdf>

<sup>2</sup> Center for Disease Control. (2016, August 5). *The HI-5 Interventions*. Retrieved August 2, 2020 from <https://www.cdc.gov/policy/hst/hi5/interventions/index.html#7>

decrease the number of younger individuals smoking and decrease tobacco use for adults ages 30 and older, as well as decrease the overall use and demand of tobacco.

Recommendations to address vaping emerged as a gap since the last Delaware State Health Needs Assessment was conducted in 2017. The CDC recommends evidence-based population-level strategies to reduce e-cigarette use among young people, such as including e-cigarettes in smoke-free indoor air policies, restricting young peoples' access to e-cigarettes in retail settings, licensing retailers, implementing price policies, and developing educational initiatives targeting young people.<sup>3</sup> The CDC also encourages states and communities to implement strategies to curb e-cigarette advertising and marketing that are appealing to young people, and to implement strategies to reduce access to flavored tobacco products by young people.<sup>1</sup>

### SHIP Recommendations to Address Substance Use Disorders

1. Reduce substance use
2. Reduce tobacco and tobacco-substitute use

### Evidence-based and Promising Strategies

- Prescription monitoring programs
- Use alternative health resources for pain management
- Promote access to Naloxone
- Support and access to clean syringes
- Promotion of smoking cessation
- Including e-cigarettes in smoke-free indoor air policies
- Restricting young peoples' access to e-cigarettes in retail settings
- Licensing e-cigarette retailers
- Implementing e-cigarette price policies
- Developing e-cigarette educational initiatives targeting young people
- Curb e-cigarette advertising and marketing that appeals to young people
- Reduce access to flavored tobacco products by young people

<sup>3</sup> Surgeon General's Advisory on E-cigarette Use Among Youth (2019). Accessed October 19, 2020 at [https://www.cdc.gov/tobacco/basic\\_information/e-cigarettes/surgeon-general-advisory/index.html](https://www.cdc.gov/tobacco/basic_information/e-cigarettes/surgeon-general-advisory/index.html)

### Stakeholder Input

Delaware State Health Improvement Plan (SHIP) stakeholders participated in a roundtable discussion related to substance use disorder at the SHIP Annual Meeting in October 2019. Their feedback was consistent with expert recommendations and was more specific than the broader SHIP recommendations. Included in the roundtable discussions was a focus on continued monitoring of Delaware's prescribing practices and the use of data to locate providers not practicing safe prescribing. They suggested enhancements to include mandated reporting of providers with abnormal (e.g. large amounts, long-acting/extended release, high-dosage) prescribing practices. In terms of improving access to treatment and recovery, stakeholders shared the need to have more providers (i.e. NP's, PA's) to offer Medication-Assisted Treatment (MAT) independently.

Stakeholders also stressed the need to focus efforts on addressing and preventing youth substance use, and to keep children in mind when identifying and implementing comprehensive strategies. Inclusion of young people in planning efforts and data collection, such as youth focus groups, was underscored. Strengthening efforts that work alongside programs to address truancy was also suggested due to the relationship between school absenteeism and substance use. Likewise, stakeholders advocated for more family support services, including training to educate families and support systems on youth substance use prevention.

SHIP stakeholders commended Delaware's efforts to share and disseminate resources, such as the [HelpisHereDelaware.com](http://HelpisHereDelaware.com) website and campaign. They suggested continued efforts to reach and saturate communities across the state. Once a participant stated, "Inundate us with information." While awareness and information on resources is needed, stakeholders also asked for recovery counts and more success stories to highlight that recovery is possible and to send a message of hope.

### SHIP 2019-2020 Activities to Address Substance Use

SHIP stakeholders concerned about substance use disorder were engaged in a variety of efforts that aligned with the above recommendations during the past year. Information from the high impact stakeholder group (i.e. Addiction Action Committee (AAC), Behavioral Health Consortium (BHC)) and other relevant stakeholders were derived from meetings, websites, and other resources. Highlights of these activities are

presented below. Given the nature of our data collection, this list should not be considered exhaustive and we welcome feedback to ensure a more complete picture of SHIP-related activities.

**SR** = SHIP Recommendation

**EBP** = Evidence-based strategies and/or promising practices

### Reduce Substance Use - **SR**

Both the State Targeted Response (STR) grant and the State Opioid Response (SOR) grant federal funds are being used in Delaware to improve the state's treatment and recovery systems. The overarching intent of the STR and SOR projects is to improve the entire continuum of care for those with Opioid Use Disorder: prevention, access/gateway, treatment, and recovery. Goals relate to improving prevention efforts; increasing access to treatment through the development of new referral pipelines; increasing treatment capacity (specifically for medication-assisted treatment [MAT]); improving wraparound services; and developing/using data systems for action. STR/SOR funding supports systems improvements that benefit individuals of all ages, and genders across all counties in the state, with an enhanced focus on youth/young adults and detainees leaving the Delaware Department of Correction. The Delaware Department of Health and Social Services (DHSS), Division of Substance Abuse and Mental Health is also providing funding to the Delaware Department of Education to support local education agencies and charter schools implement a multi-tier system of support for behavioral health.

The CDC awarded an Overdose Data to Action grant (OD2A) to DPH (September, 2019) to help reduce fatal drug overdoses in Delaware. The purpose of the three-year grant is to support Delaware's comprehensive and interdisciplinary approach to the opioid crisis in Delaware. The state will receive \$5.8 million each year for the three-year period. Delaware's newly created Office of Health Crisis Response, which is currently dedicated to addressing the opioid crisis, is responsible for managing the grant and working with partner agencies to implement activities geared toward reducing drug overdose deaths in the state. The main components of the OD2A grant are surveillance and prevention.

### Prescription Monitoring - **EBP**

The Delaware Division of Professional Regulation (DPR) began enabling electronic health record (EHR) integration of prescription monitoring program (PMP) data to ensure safer prescribing practices across the state. Previously, prescribers and pharmacists had to log in to separate systems to query patient data, which takes valuable time away from patient care and interaction. This integration simplifies the process by allowing providers to view PMP Aware and Narxcare data directly within their normal workflow without taking any actions. If a provider wishes to see more detail, they simply click on the link provided for instant access. Thanks to funding from the CDC, DPR is covering all integration fees between state health systems and the vendor through August 2022. The goal is to ensure adoption across the state to meet state policies and mandates regarding controlled substances. All major Delaware pharmacies have integrated the PMP into the pharmacy processing system and nearly all major health care systems in Delaware have integrated their EHRs with the PMP.

A two-part Safe Prescribing webinar was also developed this year and approved for Continuing Medical Education (CMEs) and linked to [HelpsHereDE.com](https://www.helpshere.de.com). All practitioners who apply for a Delaware controlled substance registration (CSR) must complete a mandatory two-hour, two-part course pertaining to safe prescribing and distributing of controlled substances, treatment of pain, and recognizing and treating opioid use disorder. This is the only approved course for meeting the CSR renewal requirement.

As reported in the Delaware SHIP 2019 Annual report, when [SB 34](#) was signed into law in 2019, the Prescription Opioid Impact Fund was created to collect prescription opioid impact fees paid by pharmaceutical manufacturers. The fund allows DHSS to award grants and contracts based on recommendations by SHIP stakeholders (i.e. BHC, the AAC, and the Overdose System of Care Committee). Draft recommendations reviewed at committee meetings in the summer of 2019 included the following:

- harm reduction (i.e. purchasing additional naloxone, revising materials to include nasal spray)
- crisis (i.e. stabilization and withdrawal management pilot, relaunching integrated crisis model in each county)
- quality treatment (i.e. purchasing additional lockboxes for medication, providing clients with equipment and services necessary for telehealth, assisting providers in purchasing HIPAA compliant software, retention payments for providers)

- social determinants (i.e. funding assistance for those with SUD: childcare, food, housing, transportation, employment, education, training); and
- special populations (i.e. focused outreach efforts to individuals with SUD: criminal justice involved, youth in transition, individuals with developmental disabilities community, single parents, communities of color). The final recommendations and report to the Governor were not available at the time this SHIP report went to publication.

### **Use of Alternative Health Resources for Pain Management - EBP**

After the Centers for Medicare & Medicaid Services conducted evidence reviews and examined the coverage policies of private payers, a decision was finalized in January 2020 to cover acupuncture for Medicare patients with chronic low back pain. Before this final National Coverage Determination reconsideration, acupuncture was nationally non-covered by Medicare. In Delaware, AAC's Non-Opioid Pain Management Subcommittee has been working on a pilot slated to start on July 1, 2020 for Medicaid and State Employee Managed Care Organizations to participate in reimbursement of acupuncture and massage therapy treatment for low back chronic pain based on medical necessity. These efforts complement an extensive [toolkit](#) on non-opioid pain management alternatives developed by the subcommittee. The toolkit helps providers suggest safe, proven alternative therapies first that have fewer risks, such as acupuncture, yoga, and massage. The toolkit also helps providers enroll patients and their caregivers in free, six-week session self-management programs facilitated by trained volunteers. Since the arrival of COVID-19, the Chronic Pain Self-Management Program has been offered virtually.

### **Promote Naloxone Access - EBP**

Naloxone is a lifesaving medication that can reverse an opioid overdose. Naloxone can be purchased, without a prescription, at participating pharmacies throughout Delaware. It is also available at statewide distribution and training events that continue to be held in communities across Delaware. [HelpsHereDE.com](#) helps Delawareans navigate and locate naloxone distribution sites. An outreach campaign included digital ads (e.g., Facebook, Instagram), stickers for syringe exchange bags, a quarter page print ad, and a radio public service announcement.

Community response teams met in November 2019 to practice a sentinel event. A sentinel event occurs when an area has experienced a spike in drug overdose deaths or some other unexpected issue that warrants a response. Each county has a team made up of community members who are trained in how to administer naloxone and can train others on its use.

Other stakeholder activities as part of Delaware's naloxone distribution included monthly naloxone distributions hosted by the BHC's Access and Treatment Subcommittee, partnering with emergency departments to distribute naloxone, working with DOC to distribute naloxone to inmates upon discharge, and partnering with state and community-based agencies and nonprofits hosting COVID-19 relief, testing, and food distribution events.

### **Support and Access to Clean Syringes - EBP**

The Syringe Services Program (SSP) operated by Brandywine Counseling & Community Services (BCCS) continues to operate statewide. The program operates from BCCS' Treatment Centers and mobile Community Services van that travels to strategic locations throughout Delaware. In October 2019, BCCS announced an increase in SSP locations and services, including additional sites in Kent and Sussex counties. At the sites, used syringes can be exchanged for sterile ones. Additional services are provided at the sites, such as naloxone distribution and test strips, which detect whether drugs are laced with fentanyl. Cocaine laced with fentanyl, a powerful synthetic opioid that is similar to morphine but 80 to 100 times more potent, is emerging as another leading cause of overdose deaths in Delaware. The AAC is working on a fentanyl campaign to raise awareness of this danger.

### **Smoking Cessation - EBP**

DPH offers the Delaware Quitline (1-866-409-1858) to help smokers who are ready to kick the habit. Effective November 2019, the age requirements of the Delaware Quitline were lowered so now those age 13 years and up can use the Quitline. Trained tobacco specialists staffing the Quitline assess needs and explore best options. Their services include counseling, guidebooks, and for eligible low-income callers, vouchers to purchase stop-smoking aids such as nicotine patches or gum.

Twenty-five schools across the state are participating in the Kick Butts Generation (KBG) program (grades 4-12). KBG members received training to address e-cigarettes. The Not on Tobacco Use program, a cessation program that helps young people quit the product, has also been enhanced to address e-cigarettes. The American Lung Association has a new “In-Depth” program which provides an alternative to suspending kids who are caught vaping on school grounds. In-Depth is a free interactive program that teaches students about nicotine dependence, establishing healthy alternatives, and how to kick the unhealthy addiction. Teachers can be trained online on In-Depth to implement the program at their schools.

The Great American Smokeout sponsored by the American Cancer Society was held on November 21 and training for health care professionals that wanted to become coaches in the community occurred in fall 2019.

### **E-cigarettes and Vaping - EBP**

DPH developed a new commercial called “The Voice” which informs the public that some vape pods contain as much nicotine as a pack of cigarettes. DPH’s Tobacco Prevention and Control Program also developed and launched an online toolkit on vaping awareness and prevention for schools, parents, providers, and community members.

In terms of limiting access to e-cigarettes in retail settings, Delaware Alcohol and Tobacco Enforcement (DATE) utilized Delaware School Survey data (and corresponding heat maps developed by the Center for Drug and Health Studies at the University of Delaware) to identify areas of elevated vape use in schools. DATE then conducted vape compliance checks with retailers in those areas.

In February 2020, Delaware announced joining a multistate investigation of Juul Labs, Inc.™, the controversial e-cigarette company. The 39-state coalition will investigate Juul’s marketing and sales practices, including whether the company targeted minors and made misleading claims about nicotine content in its products.