



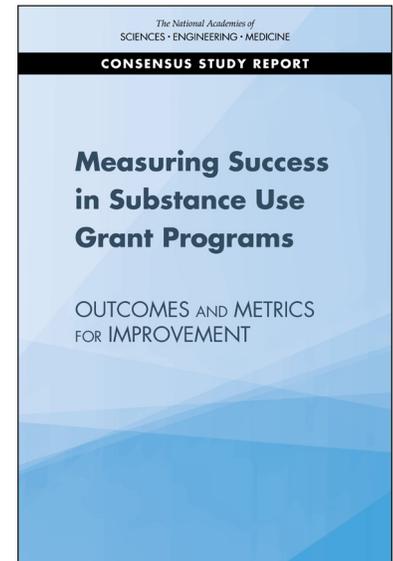
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Measuring Success in Substance Use Grant Programs: Outcomes and Metrics for Improvement

The opioid epidemic, now several decades in the making, continues to cause pain and suffering for millions of Americans. Each year, thousands of individuals die from overdose, and thousands more grieve these losses. Opioid use disorder (OUD) can lead to a complete interruption of day-to-day activities, such as caring for one's family, maintaining a job or career, or keeping track of basic necessities such as healthcare and finances.

Recognizing the impact of the opioid epidemic, the United States Congress authorized and appropriated funding to fight the opioid epidemic through the Department of Health and Human Services (HHS) in 2016. Among other initiatives, the Comprehensive Addiction and Recovery Act (CARA) gave the Substance Abuse and Mental Health Services Administration (SAMHSA) authority and support to implement new grant programs focused on preventing overdose and treating individuals with OUD, including for high-risk populations, such as pregnant women.

At the same time, Congress requested that the National Academies of Sciences, Engineering, and Medicine conduct a three-part evaluation of the grant programs: First Responder Training (FR-CARA); Improving Access to Overdose Treatment (OD Treatment Access); Building Communities of Recovery (BCOR); and Pregnant and Postpartum Women Pilot (PPW-PLT). This Consensus Study Report—the first report in the series—provides recommendations to SAMHSA on the grant programs' outcomes and metrics.



RECOMMENDATIONS FOR IMPROVING ACCESS TO OVERDOSE TREATMENT AND FIRST RESPONDER TRAINING PROGRAMS

The goal of SAMHSA's OD Treatment Access program is to expand access to FDA-approved drugs or devices for the emergency treatment of opioid overdose. Specifically, the grant program

- provides support for organizations or prescribers to develop best practices for prescribing and co-prescribing these drugs and devices;
- facilitates training for community stakeholders about drug overdose and overdose reversal drugs; and
- ensures that patients who have experienced a drug overdose are connected with appropriate treatment.

Similarly, the FR-CARA program aims to train first responders and community members to administer opioid overdose reversal drugs and devices when necessary and to facilitate connections to treatment. This includes education and provision of resources to first responders and community members, as well as establishing processes, protocols, and mechanisms for connecting people to addiction treatment and recovery communities. Under this program, first responders include firefighters, law enforcement, paramedics, emergency medical technicians, or other legally organized and recognized volunteer organizations that respond to adverse opioid-related incidents.

The committee made several recommendations about key issues related to the OD Treatment Access and FR-CARA programs, including to:

- Improve education and outreach efforts
- Collect additional data to improve service delivery
- Improve data collection efforts on evidence-based treatments
- Increase connections with harm-reduction services for survivors of overdose
- Collect insurance coverage and housing status data
- Collect granular geographic information about overdoses
- Monitor and prevent compassion fatigue among first responders
- Train family members to administer lifesaving drugs in case of overdose

For more information on these programs and a full list of recommendations related to these programs, see Chapter 2 of the report.

RECOMMENDATIONS FOR BUILDING COMMUNITIES OF RECOVERY AND PREGNANT AND POSTPARTUM WOMEN PILOT

SAMHSA's BCOR program is intended to bolster community support systems for substance use disorder. Specifically, the program is focused on supporting "the development, enhancement, expansion, and delivery of recovery support services as well as promotion of and education about recovery." Activities supported under this program include building connections between different recovery resources and networks, reducing stigma associated with drug and alcohol use, providing educational programming and outreach related to drug and alcohol use and recovery, providing peer mentorship and coaching, and linking to other service providers.

Much like BCOR, SAMHSA's overall goal for the PPW-PLT program is to reduce use of alcohol and other drugs, increase engagement and retention in treatment, and increase use of medications to treat drug addiction for pregnant and postpartum women. Among other objectives, PPW-PLT identifies the following goals for its services:

- Support family-based services for pregnant and postpartum women with substance use disorders, include OUD
- Help state substance abuse agencies address the continuum of care, including services provided to women in nonresidential-based settings
- Promote a coordinated, effective and efficient state system managed by state substance abuse agencies by encouraging new approaches and models of service delivery

The committee made several recommendations about key issues related to the Building Communities of Recovery program and Pregnant and Postpartum Women pilot, including:

- collect more granular data about history of exposure to traumatic events and PTSD among clients of the programs
- improve data collection efforts on evidence-based treatments
- use new methods and tools for evaluating the effectiveness of treatment
- collect well-defined data on the frequency and severity of overdose events
- collect more granular data on current and past alcohol and drug use
- collect data about living arrangement safety and perceptions of safety
- assess and improve client job skills and readiness
- collect metrics of system-level changes to CARA-funded programs
- bolster peer recovery services
- collect data on PPW participation, family resources, timing of care, and treatment effectiveness

For more information on these programs and a full list of recommendations related to these programs, see Chapter 3 of the report.

CONCLUSION

Drug overdose events and overdose deaths are a national crisis. Health systems and community infrastructures have struggled to adequately respond over a range of prevention, treatment, retention/recovery, and dissemination strategies. Recognizing that the grantees under each of these programs may be limited in resources or staff, the committee's recommendations in this report represent practical, feasible steps toward reducing the harm associated with opioids and increasing engagement and retention in lifesaving treatments.

Committee on the Review of Specific Programs in the Comprehensive Addiction and Recovery Act

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To read the full report, please visit
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