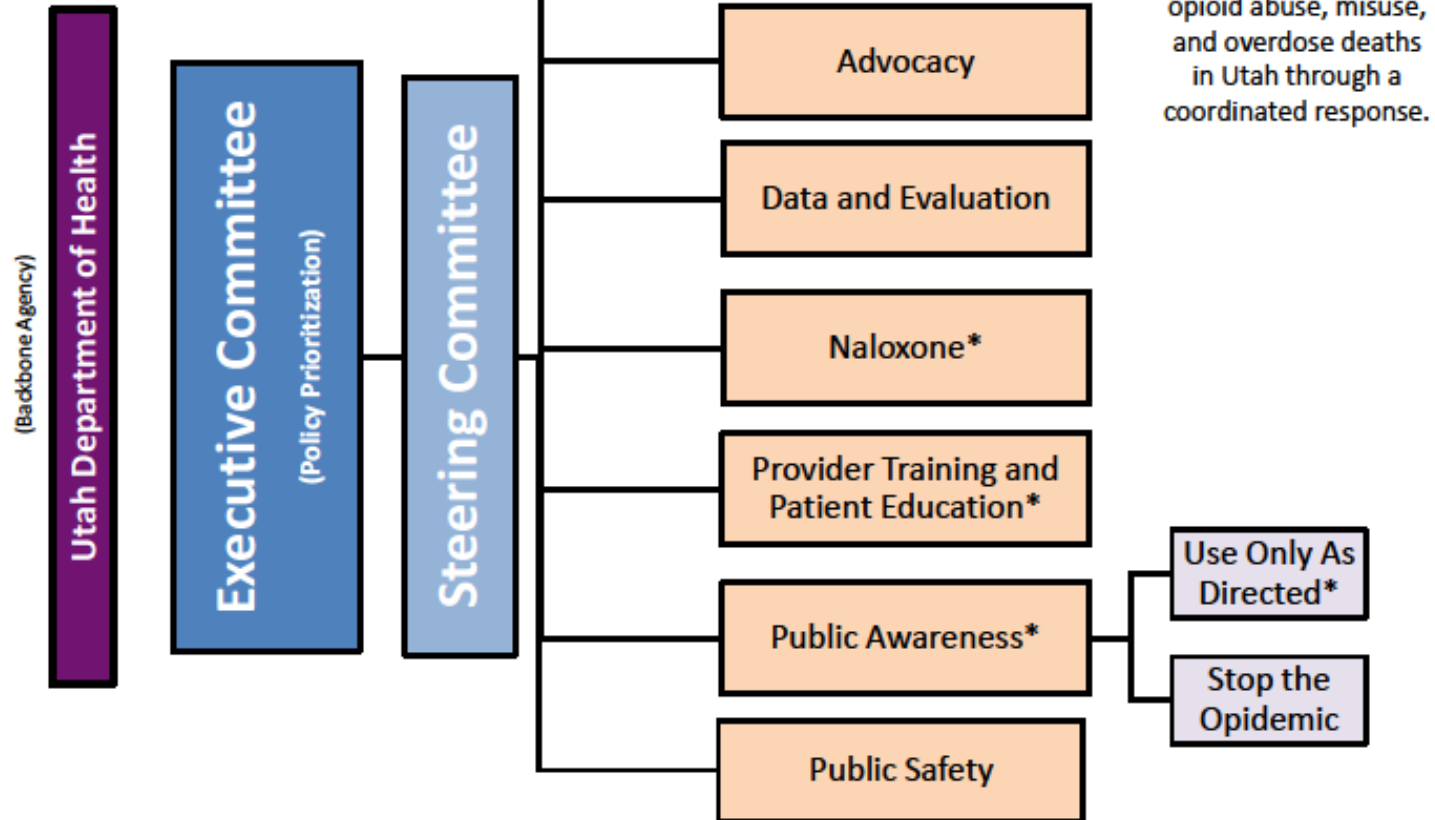


Translating Data to Action Summary Plan



*Efforts align with Intermountain Healthcare's Opioid Community Collaborative Steering Committee.

Translating Data to Action Summary Plan

Logic Model

We will use these resources...

Partner / Stakeholder Expertise from UCOOP

Evaluation Expertise and Guidance

Evidence-based Practices

Federal and state funding

Data

To implement these strategies....

- 1) Increase safe prescribing and dispensing practices
 - 2) Provide educational materialsto high-risk patients
 - 3) Increase provider utilization and education of the controlled substance database
- 1) Identify and explore opportunities to address gaps in current data collection effort
 - 2) Increase frequency of surveillance reports
- 1) Reduce community norms favorable to misuse and abuse
 - 2) Promote existing public awareness messages
 - 3) Develop an opioid abuse, misuse, and overdose prevention social media plans for partner use
- 1) Identify treatment resources, gaps, and barriers and provide recommendations to increase access to treatment
 - 2) Increase the number of MAT training opportunities
 - 3) Explore implementation of community-based treatment ans support services for low level offenders
 - 4) Increase harm reduction strategies

That will result in these products...

- 1) Prescribing guidelines
 - 2) Academic detailing
 - 3) Risk assessments
 - 4) Data dashboards
 - 5) Provider / patient resources
- 1) Local opioid fatality review teams
 - 2) Data reports / maps
 - 3) Naloxone tracking
- 1) Targeted public awareness messages
 - 2) Event calendar
 - 3) Coordinated social media efforts
 - 4) Community toolkits
- 1) Treatment resource guide
 - 2) Community substance abuse navigator
 - 3) MAT trainings
 - 4) LE assisted diversion

And these outcomes...

Short-term	Intermediate	Long-term
Expanded use of opioid prescribing guidelines	Increased use of non-opioid therapies for pain	Decreased drug overdose rates
Enhanced knowledge of risky prescribing practice and risky patient behavior	Decreased rate of high-dose opioid prescribing	Decreased drug overdose ED visit and hospitalization rates
Increased awareness of opioid-related risks	Reduced problematic drug co-prescribing	Increased opioid use disorder treatment
Improved local capacity for obtaining, analyzing, and disseminating data	Decreased use of multiple prescribers and dispensers for opioids	Improved health outcomes in targeted areas
Increased awareness safe storage, safe disposal, opioid risks, overdose signs, and naloxone	Increased use of data to inform and target prevention and intervention efforts	
Increased awareness of community treatment resources and trainings	Increased drop box disposal of prescriptions	
	Increased dispensing of naloxone	
	Increased use of community treatment resources and trainings	
	Increased MAT providers	
	Increased Overdose Outreach Providers	
	Increased use of harm reduction strategies	



Translating Data to Action Summary Plan

Due Date	Activity	Workgroups	Performance Indicator
Goal I: Promote public awareness of safe storage, safe disposal, opioid risks, signs of an overdose, and naloxone.			
Objective 1.1 Target at least three high-burden areas to promote existing public awareness messages by March 2018.			
May 2017	1.1.1 Identify high-burden areas in Utah and map out drop box locations and overdose outreach providers.	Data and Evaluation	Opioid fact sheet with high-burden areas identified, resource mapping of drop box locations and overdose outreach providers, data slide deck for partners
Ongoing	1.1.2 Target public awareness messages in high-burden areas by leveraging community events and disseminating materials.	Public Awareness and Education Advocacy	Number of events, number of materials disseminated, number of attendees
Ongoing	1.1.3 Post and promote community events on coalition website, social media, and through partners.	Public Awareness and Education Advocacy	Number of site visits, social media metrics
Objective 1.2 Develop an opioid abuse, misuse, and overdose prevention social media plan and publish three social media posts each week with targeted boosts in at least three high-burden areas by July 2017.			
May 2017	1.2.1 Identify current social media sites and propose main messages for each site related to target audience.	Public Awareness and Education	Links to social media sites on UCOOP website
June 2017	1.2.2 Develop a three month plan for each site that includes posting / maintenance / evaluation responsibilities and assignments.	Public Awareness and Education	Social media metric baseline data
June 2017	1.2.3 Place all downloadable social media files for partner / public access on UCOOP website, encourage partners use and social media shares	Public Awareness and Education Advocacy	Number of downloads
July 2017	1.2.4 Implement social media plan and target messages in high burden communities.	Public Awareness and Education Advocacy	Social media metrics
Objective 1.3 Reduce community norms favorable to misuse and abuse in at least three high-burden areas through public awareness messages and efforts by March 2018.			
August	1.3.1 Identify risk and protective factors for misuse and	Data and	Prevalence of related indicators



Translating Data to Action Summary Plan

Due Date	Activity	Workgroups	Performance Indicator
2017	abuse of opioids.	Evaluation	from the Prevention Needs Assessment, Youth Risk Behavior Survey, and Behavioral Risk Factor Surveillance System
	1.3.2 Develop community toolkits focusing on risk and protective factors, resources, prevention coalitions and available public awareness messaging.	Data and Evaluation Public Awareness and Education	# of toolkits
Goal II: Increase provider education and training, including tools and resources, to positively change prescribing behavior.			
Objective 2.1 Increase safe prescribing and dispensing practices in health systems in at least three high-burden areas by March 2018.			
May 2017	2.1.1 Identify high-burden areas in Utah and map out health systems.	Data and Evaluation	Opioid fact sheet with high-burden areas identified, resource mapping of Utah Health Systems, data slide deck for partners
March 2018	2.1.2 Promote uptake / adoption of prescribing guidelines in targeted health systems.	Provider and Patient Education	# of health systems adopting prescribing guidelines
March 2018	2.1.3. Provide academic detailing to high risk prescribers in targeted health systems.	Provider and Patient Education	# of providers targeted for academic detailing
	2.1.4. Educate and promote the use of risk assessments in targeted health systems.	Provider and Patient Education	# of risk assessments that identify patients at increased risk of opioid overdose
Objective 2.2 Increase provider utilization and education of the controlled substance database in at least three high-burden areas by March 2018.			
May 2017	2.2.1 Develop risk measures for provider dashboards, patient, community and clinic level reports.	Provider and Patient Education	Risk measures defined and baseline data collected
September 2017	2.2.2 Develop risk measure reports for communities and clinics.	Data and Evaluation	Two risk measure reports developed
September 2017	2.2.3 Develop provider dashboard that alerts providers of patient level outliers using identified risk measures	Data and Evaluation Provider and	Patient dashboard on controlled substance database



Translating Data to Action Summary Plan

Due Date	Activity	Workgroups	Performance Indicator
		Patient Education	
March 2018	2.2.4 Work with the controlled substance database program manager to meet with providers to discuss dashboard use, outlying risk measures by community or clinic and the benefits of using the controlled substance database as clinical tool for informed decision making.	Provider and Patient Education	Number of provider trainings, number of materials disseminated
Objective 2.3 Provide educational materials on opioid risks, signs of an overdose, and naloxone to patients who are at increased risk of opioid overdoses in at least three high-burden areas by March 2018.			
Ongoing	2.3.1. Encourage providers to discuss opioid risks with patients and disseminate appropriate materials.	Provider and Patient Education	# of materials disseminated
Goal III: Increase availability of and access to physical and behavioral health services, treatment, and resources.			
Objective 3.1 Identify treatment resources, gaps, and barriers in three high-burden areas and provide recommendations to increase access to treatment by October 2017.			
May 2017	3.1.1 Identify high-burden areas and map out treatment resources.	Data and Evaluation	Opioid fact sheet with high-burden areas identified, resource mapping of treatment resources, data slide deck for partners
July 2017	3.1.2 Disseminate information on the availability of treatment resources in high-burden areas.	Public Awareness and Education Advocacy	Number of materials disseminated
October 2017	3.1.3 Work with high-burden areas to understand treatment gaps and barriers and develop recommendations to close gaps and address barriers for each community.	Access to Treatment Advocacy	Treatment Resources, Gaps, Barriers, Recommendations Report Developed
October 2017	3.1.4 Explore the implementation of a “substance abuse navigator” to guide individuals to treatment options, referrals, naloxone information, etc.	Access to Treatment Advocacy	Opioid hotline / website / navigation tool
Objective 3.2 Increase the number of medication assisted treatment training opportunities and providers receiving the training in three high-burden communities by March 2018.			
Ongoing	3.2.1 Promote MAT training opportunities in high-burden areas	Public Awareness and Education	MAT training on UCOOP calendar, shared with partners



Translating Data to Action Summary Plan

Due Date	Activity	Workgroups	Performance Indicator
		Advocacy	
August 2017	3.2.2 Educate providers on the benefits and importance of becoming an opioid treatment provider in their communities by developing an informational sheet for providers	Public Awareness and Education Advocacy Access to Treatment	Number of trainings, number of providers
Objective 3.3 Explore implementation of community-based treatment and support services (housing, healthcare, job training, treatment and mental health support) for low level offenders in at least one high burden area by March 2018.			
May 2017	3.3.1 Identify high-burden areas in Utah and map out community-based treatment and support services.	Data and Evaluation	Opioid fact sheet with high-burden areas identified, resource mapping of treatment and support services, data slide deck for partners
July 2017	3.3.2 Work with community stakeholders to identify feasibility of piloting law enforcement assisted diversion program, barriers, and community readiness.	Law Enforcement Advocacy Access to Treatment	Establish Community Public Safety Group
March 2018	3.3.3 Develop an implementation plan and identify potential resources for a law enforcement assisted diversion program with community stakeholders for a high burden area.	Law Enforcement Advocacy Access to Treatment	LEAD Implementation Plan developed
Objective 3.4 Increase harm reduction strategies in three high burden areas by March 2018.			
May 2017	3.3.1 Identify high-burden areas in Utah and map out overdose outreach providers and syringe exchange programs.	Data and Evaluation	Opioid fact sheet with high-burden areas identified, resource mapping of overdose outreach providers and syringe exchange programs, data slide deck for partners
July 2017	3.3.2 Work with community stakeholders to identify potential overdose outreach providers and harm reduction community training opportunities.	Naloxone	Training events on UCOOP calendar



Translating Data to Action Summary Plan

Due Date	Activity	Workgroups	Performance Indicator
July 2017	3.3.3 Work with community stakeholders to identify populations of increased risk of HIV, Hep C, and other infection disease and overdose for targeted harm reduction education and dissemination.	Naloxone	Number of harm reduction trainings, number of syringes and kits disseminated
Ongoing	3.3.4 Identify community trainers to provide harm reduction trainings and dissemination of syringes and naloxone in high burden areas.	Naloxone	Number of harm reduction trainings, number of syringes and kits disseminated
Goal IV: Improve timeliness of data, surveillance, and evaluation efforts.			
Objective 4.1 Identify gaps in current data collection efforts and explore opportunities to address gaps by October 2017.			
May 2017	4.1.1 Develop policies and procedures for Opioid Fatality Review Pilot	Data and Evaluation	Policy and Procedure Manual for Opioid Fatality Review Team
August 2017	4.1.2 Work with community stakeholders to identify feasibility of piloting a local opioid fatality review program, barriers, and community readiness.	Data and Evaluation Law Enforcement Advocacy Access to Treatment Provider and Patient Education	Establish Opioid Fatality Review Team
October 2017	4.1.3 Develop an implementation plan and identify potential resources for an opioid fatality review program with community stakeholders for a high burden area.	Data and Evaluation Law Enforcement Advocacy Access to Treatment Provider and Patient Education	Opioid Fatality Review Community Implementation Plan developed
May 2017	4.1.4 Identify and promote protective factors and increase awareness of risk factors in high-burden areas (PNA, YRBS, BRFSS, other population based surveys)	Data and Evaluation Public Awareness	Report, number of presentations



Translating Data to Action Summary Plan

Due Date	Activity	Workgroups	Performance Indicator
		Advocacy	
May 2017	4.1.5 Establish mechanisms for tracking naloxone distribution and reversals.	Naloxone Data and Evaluation	Number of reversals, number of naloxone kits
Objective 4.2 Increase frequency of surveillance reports in three high-burden areas by March 2018.			
March, June, September 2017 and March 2018	4.2.1 Update number and rate of prescription opioid and heroin deaths quarterly on website and through the Heroin Accountability, Response and Protocol ONDCP work group.	Data and Evaluation Law Enforcement	Data table on UCOOP website ONDCP data presentation
March, June, September 2017 and March 2018	4.2.2 Develop and disseminate quarterly drug monitoring initiative reports to understand and respond to emerging trends that present a danger to public safety and public health each quarter.	Data and Evaluation Law Enforcement	Data reports