

STATE OF INDIANA
GOVERNOR ERIC J. HOLCOMB
JIM MCCLELLAND, EXECUTIVE DIRECTOR FOR DRUG PREVENTION,
TREATMENT, AND ENFORCEMENT

A Strategic Approach to Addressing Substance Abuse in Indiana

Vision

By accomplishing our mission, we will help people improve their lives and build stronger, healthier communities.

Mission

With an initial focus on opioids, develop and implement a data-driven system focused on substance abuse prevention, early intervention, treatment, recovery, and enforcement that substantially reduces the prevalence of substance use disorder (SUD) in Indiana and helps those with SUD achieve recovery and become or return to being productive, contributing members of their communities.

Overall Approach

We will coordinate, align, and focus the resources of Indiana state government and leverage the resources of other public sector entities and other sectors - including businesses, higher education institutions, health care systems, philanthropies, and not-for-profit organizations - to respond to the current opioid crisis and enhance the potential for timely responses to future crises resulting from substance abuse and addictions.

Toward that end, we will develop and implement complementary public health and public safety strategies that:

- Recognize substance use disorder as a chronic disease and incorporate prevention, treatment, and recovery systems accordingly, and
- Are designed to reduce the supply of and demand for illicit substances.

Guiding Principles

- We will have a bias toward action and a strong sense of urgency.
- Systems we create – for government, for persons with SUD and their families, and for providers of services - will be data-driven, resilient, agile, and adaptable – evolving as learning increases and as the external environment changes.
- We will strive to incorporate innovation and continuous improvement to make optimal use of all resources to improve outcomes and impact.
- We will give preference to evidence-based programs and practices, while leaving room for promising innovative approaches.

- Where possible, we will give preference to locally-driven and implemented holistic, multidisciplinary approaches with and for persons with substance use disorders and their families.

Key High-level Outcome and Impact Indicators

- Number of persons with overdoses admitted to hospitals or emergency departments
- Deaths from overdoses
- Opioid prescription rates
- Number of babies born with Neonatal Abstinence Syndrome
- Percent of persons with substance use disorder who are in recovery and able to become or return to being productive, contributing members of their communities. (Note: Method of approximating this percentage to be determined.)

Executive Director for Drug Prevention, Treatment, and Enforcement

The Executive Director for Drug Prevention, Treatment, and Enforcement will:

- Provide overall leadership to accomplish the mission.
- Support, coordinate, and align the relevant work of various state agencies that directly or indirectly are involved in or affect substance abuse prevention, early detection and intervention, treatment and recovery, public safety and law enforcement efforts.
- Attract and leverage resources from entities outside state government to enhance the accomplishment of the mission.
- Encourage and support community-based collaborations aimed at prevention, treatment, recovery and enforcement.

Services will include:

- Leading the development and periodic review of strategic directions.
- Leading efforts to enhance the availability of accurate, timely data and actionable information to enhance the accomplishment of the mission.
- Identifying grant opportunities and coordinating responses.
- Attracting resources from other sectors to enhance accomplishment of the mission.
- Helping develop public policy to support and optimize accomplishment of the mission.
- Leading the development of a public awareness and education efforts to reduce stigma and help accomplish the mission.
- Developing and maintaining a highly user-friendly website with current information on a wide variety of relevant topics.
- Identifying and disseminating information on or providing links to effective programs and services.

- Arranging value chain and process improvement services to make best use of all resources to increase impact.

The Executive director of Drug Abuse Prevention, Treatment, and Enforcement, reports directly to the Governor of Indiana.

Major Strategies

1. Reduce the incidence of substance use disorder
 - a. Reduce the number of people who start using an addictive substance
 - i. Encourage the use of alternative pain management treatments and therapies and hospital-driven post-operative pain management protocols.
 - ii. Support improved, relevant education and training of prescribers and patients regarding pain medications and potential for addiction.
 - iii. Develop and implement a multi-year public awareness and education campaign regarding stigma, addiction, and recovery.
 - iv. Increase awareness of high Adverse Childhood Experience (ACE) scores as a risk factor, along with other risk and protective factors.
 - v. Identify and support the implementation of age-appropriate evidence-based addictive substance use and misuse prevention programs for children and youth. Encourage school-based programs that support positive peer relationships and social competence and evidence-based family strengthening programs. Monitor rates of alcohol and drug use among persons under age 18.
 - vi. Encourage increased opportunities (e.g. after-school, education, training, employment) - especially for high-risk populations and in high-risk areas.
 - vii. Promote healthy families.
 - b. Reduce the number of persons who become addicted to a legally prescribed substance.
 - i. Encourage implementation across disciplines throughout the state of new evidence-informed prescribing practices that reduce the duration and number of doses of opioid pain medication.
 - ii. Encourage education and awareness efforts regarding safe use of legally prescribed substances.
 - iii. Continue to make INSPECT, Indiana's prescription monitoring program (PDMP) more user-friendly and integrate it with electronic health record (EHR) systems. Support initiatives that encourage integration with all Indiana hospital systems, health information exchanges (HIE) and pharmacy dispensing software (PDS) systems. Encourage the use of INSPECT to inform clinical decision-making

and support interventions with patients who may be abusing or misusing prescription medications contributing to the overdose epidemic.

- iv. Encourage and support increased availability and awareness of “take back” opportunities.
- c. Reduce the supply of illicit drugs
 - i. Support and encourage targeted law enforcement work focused on the supply chain for illicit substances, including interdiction efforts, reducing the drug supply chain, reducing impaired driving and pharmacy robberies.
 - ii. Support realignment of state law enforcement resources, as necessary, to better detect, disrupt, and dismantle drug trafficking organizations.
 - iii. Assist in coordination of efforts with local, state, and federal agencies, including coordinated approaches with neighboring states.
- 2. Reduce additional harm that can result from substance abuse
 - a. Increase survival rate of those who overdose
 - i. Expand access to and training in use of naloxone.
 - ii. Strive to connect those who overdose with treatment as soon as possible.
 - b. Encourage increased accessibility for persons addicted to intravenous drug use to syringe services programs to reduce the spread of infectious diseases such as HIV and HCV and to provide treatment information. Where possible, syringe services programs should be located close to treatment centers, and it is important that those who use such programs be able to do so without stigma or fear of arrest or prosecution.
- 3. Improve treatment of persons with SUD
 - a. Intervene as early as possible, ideally connecting individuals to treatment no later than the time of first arrest, first overdose, or first expression of a desire for help.
 - i. When treatment is not immediately available, encourage and support services that connect persons to a counselor/coach/other caring person who will stay in close touch with the individual at least until treatment is available.
 - ii. Encourage and support initiatives that provide counselors in emergency departments to establish a relationship with persons who have overdosed and work to get them into treatment, or, where possible, begin treatment on-site.
 - b. Greatly improve access to effective, affordable treatment, with a preference for medication-assisted treatment (MAT)

- i. Add and/or expand treatment programs.
 - ii. Obtain waiver to enable Medicaid to pay for residential treatment and recovery supports for SUD.
 - iii. Seek ways to augment the professional addiction treatment workforce, including increased use of trained paramedics, EMS workers, and peer recovery coaches.
 - 1. Support development of a program to train paramedics to provide follow up services for persons with SUD who have been released from treatment and who live in underserved areas.
 - 2. Explore increased training and licensure of recovery coaches.
 - 3. Review licensing requirements and payment policies based on licensure to determine if changes in public policy are needed.
 - iv. Develop one or more pilot “hub and spokes” networks to provide a full array of services for a multi-county region. Rigorously evaluate and replicate positive and promising practices that fit the assets and needs of communities and their residents.
 - v. Encourage and support increased use of drug courts, diversion programs, and evidence-based treatment options for offenders with SUD. Identify, and seek to replicate, innovative practices being developed and used by local courts and local jails.
 - vi. Encourage and support expansion and improvement of substance abuse treatment services within the corrections system, particularly at the time of entry.
 - vii. Encourage and support stronger relationships between drug courts and corrections with community mental health centers or other addiction treatment providers to enhance the potential for successful re-entry into the community and reduce recidivism and the frequency of relapses.
 - viii. Support community-based recovery and long term wrap-around services, including recovery housing, to help persons in recovery become or return to being productive, contributing members of their communities. Seek to eliminate punitive policies that terminate services for people who relapse.
 - ix. Increase the use of technology (e.g. telemedicine) to improve access to treatment services.
 - x. Use mobile teams to increase service availability.
4. Develop and augment the ability of the Executive Director for Drug Prevention, Treatment, and Enforcement to serve its stakeholders, including persons with SUD and their families, providers of services, and units of government.

- a. Develop robust systems to gather data from disparate sources and convert it into useful, actionable information for decision-making. Develop dashboards that enhance the ability to track progress and quickly identify problems. Develop a capability to use predictive analytics to help reduce the incidence and severity of future substance abuse problems and to identify where increases or shifts in resources would be advisable.
 - b. Utilize the Healthy Hoosiers Foundation to facilitate the development of funds for appropriate purposes aligned with the goals of this strategic approach.
 - c. Explore potential project opportunities for graduate students in Public Health, Informatics, Social Work, and other disciplines.
5. Support and enhance substantial community-based collaborations aimed at prevention, treatment, and recovery. Encourage and support strengthening the infrastructure of communities (including county public health departments) to increase the capacity of communities to implement evidence-based prevention and treatment programs.
- a. Encourage and support community-based coalitions aimed at prevention, treatment, and recovery. Encourage significant involvement of community-based organizations, Purdue Extension, chambers of commerce and other organizations from the public, for-profit, and not-for-profit sectors.
 - b. Encourage improving the conditions within Indiana communities to strengthen equitable access to the social determinants of health to include, for example: improving economic and employment opportunities, improving literacy, increasing access to nutritional foods, improving access to quality education and skills training, etc.
 - c. Encourage and support strengthening the scope and capacity of the local public health department in each Indiana county and encourage each county health department to achieve national accreditation status. Encourage and support the substantial engagement of local health departments in opioid addiction treatment and prevention services, and strongly encourage health departments and hospitals to work together collaboratively.
 - d. Support workforce development initiatives to help ensure that communities have access to trained health professionals who engage in clinically appropriate addiction treatment and prevention services.