

Goal #1- Improve access and utilization of Medication for Opioid Use Disorders (MOUD) by engaging people seeking care in high impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment.			
Objective	K.P.Q.	Examples of Indicator	Check if Included in Proposal
<p><b>Objective 1.a</b> – Expand access to MOUD by increasing initiation rates in high impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment.</p> <p><b>Objective 1.b</b> – Provide warm handoffs from high impact settings including emergency departments, primary care, and other health care centers like in-patient or residential treatment to recovery and support services in overdose and withdrawal cases.</p> <p><b>Objective 1.c</b> - Increase the number of providers in high impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment authorized to prescribe MOUD</p>	<p>Are we improving access/utilization/continuation to medication for OUD?</p>	<ul style="list-style-type: none"> <li>• % and # of referrals from high impact settings to MOUD treatment</li> <li>• % of patients with OUD who were treated with buprenorphine/methadone during an emergency department visit after a drug overdose or when have opioid withdrawal</li> <li>• % and # of patients with OUD who filled prescriptions for buprenorphine within 14 days following an emergency department visit for an overdose</li> <li>• Number of providers in the emergency dept. who have received training in the use of buprenorphine or methadone</li> </ul>	

Goal #2- Improve early identification of Opioid Use Disorder (OUD) by implementing universal screening and referrals in high impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment.			
Objective	K.P.Q.	Examples of Indicator	Check if Included in Proposal
<p><b>Objective 2.a.</b> – Increase the number of people who are screened for OUD when seeking other types of medical care.</p> <p><b>Objective 2.b.</b> – Broaden the use of OUD screening tools by increasing the types and number of service settings where it is routinely initiated</p> <p><b>Objective 2.c.</b> – Strengthen secondary prevention of OUD by embedding universal screening tools in high-impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment to detect risky opioid use early and prevent the transition to chronic OUD.</p>	<p>Are we improving the screening and early identification of opioid use disorder?</p> <p>Are we improving access/utilization/continuation to medication for OUD?</p>	<ul style="list-style-type: none"> <li>• # and % of program participants/patients from the emergency department that are screened for OUD using a standardized screening tool</li> <li>• # and % of program participants/patients from in-patient/residential facilities that are screened for OUD using a standardized screening tool</li> <li>• # and % of providers that are trained to utilize standardized screening tools</li> <li>• % / # of organizational or departmental staff that are peer support/peer navigators</li> </ul>	

Goal #3- Incorporate harm reduction and support services into high impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment to people at risk of overdose from OUD or developing OUD.			
Objective	K.P.Q.	Examples of Indicator	Check if Included in Proposal
<p><b>Objective 3.a.</b> – Improve the coordination and continuity of care during transitions from high impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment to community-based programs.</p> <p><b>Objective 3.b.</b> – Improve the coordination and continuity of care during transitions from residential treatment or in-patient hospitals to community-based programs.</p>	<p>Are we improving access/utilization to harm reduction services?</p>	<ul style="list-style-type: none"> <li>• # and % of providers in emergency department who have received training in the use of buprenorphine or methadone</li> <li>• # and % of training for emergency room personnel treating opioid people who use drugs on post-discharge planning, including community referrals for treatment with a medication to treat opioid use disorder, recovery case management, or support services</li> <li>• # of referrals to harm reduction organizations and % of referrals that resulted in appointment attendance</li> </ul>	

Goal #4 - Create a more comprehensive continuum of care in high impact settings including emergency departments, primary care, and other health care centers like in-patient psychiatric or residential treatment for opioid use disorders OUD.			
Objective	K.P.Q.	Examples of Indicator	Check if Included in Proposal
<p><b>Objective 4.a</b> – Improve transitions of care in high impact settings including emergency departments, primary care, and health care clinics like in-patient psychiatric or residential treatment for people receiving treatment for OUD, near-overdose events, or other mental health services</p> <p><b>Objective 4.b.</b> – Enhance coordination within emergency department by strengthening care transitions and increasing warm handoffs to appropriate treatment and support services</p>	<p>Are we improving access/utilization/continuation to medication for OUD?</p> <p>Are we applying a public health approach within our health and human services systems?</p>	<ul style="list-style-type: none"> <li>• # of referrals/linkages from ED to recovery and support services and % of referrals that resulted in appointment attendance</li> <li>• # of patients transitioned to licensed SUD treatment within 30 days following a visit to emergency department for an overdose and of referrals that resulted in appointment attendance</li> <li>• # of patients with OUD who attended a follow up appointment with an outpatient provider within seven days of a visit to an emergency department for an overdose and % of referrals that resulted in appointment attendance</li> <li>• # of organizational or departmental staff that are peer support/peer navigators</li> </ul>	

Goal #5 - Prevent the development of OUD, primarily in children and youth, by addressing risk factors.			
Objective	K.P.Q.	Examples of Indicator	Check if Included in Proposal
<p><b>Objective 5.a.</b> – Prevent OUD among children and youth involved with the justice system or other care systems for children.</p> <p><b>Objective 5.b.</b> – Reduce adverse childhood experiences (ACEs) for children and youth.</p> <p><b>Objective 5.c.</b> – Increase the number of families receiving treatment and support services for children and youth.</p>	<p>Are we preventing people from developing opioid use disorders?</p> <p>Are we applying a public health approach within our health and human services systems?</p>	<ul style="list-style-type: none"> <li>• # of children and youth who are exposed to evidence-based prevention programs</li> <li>• # of eligible children and youth who receive early intervention services</li> </ul>	