The Iowa Department of Public Health (IDPH) offers the Opioid Update to share information about opioid use and Iowa’s efforts to address the national opioid epidemic. Please feel free to submit topics to Julie Jones at julie.jones@idph.iowa.gov.

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**Department Efforts**

**Update: State Targeted Response (STR) Grant**

IDPH is negotiating State Targeted Response (STR) Grant contracts for the 23 IDPH-funded substance use disorder treatment provider network. Providers will complete community assessment and strategic planning processes this fall and will begin implementation of their action plans to expand capacity for Medication Assisted Treatment and build “opioid-informed” communities.

In an opioid-informed community, stakeholders:

- are aware of current opioid-related risks and problems in their communities,
- prioritize education, prevention, treatment (including MAT), and recovery from opioid use disorders, and
- agree to implement a plan of action to address both the current opioid crisis and underlying factors that may contribute to the crisis.

For more information on the STR Grant, contact Monica Wilke-Brown at monica.wilke-brown@idph.iowa.gov.

**Update: Naloxone Availability for Law Enforcement**

As mentioned in the last edition of the Opioid Update, IDPH and the Department of Administrative Services (DAS) have created a Master Agreement that authorizes public agencies to purchase Naloxone at a reduced rate of $75.

Because some law enforcement agencies do not have access to the required medical provider needed to purchase Naloxone through the master agreement, IDPH’s State Medical Director, Dr. Patricia Quinlisk, has agreed to authorize the purchase of Naloxone for law enforcement agencies that meet criteria. Since announcing this opportunity, five different Iowa law enforcement agencies have submitted requests to purchase Naloxone through the master agreement.

To submit an application to DAS, contact Kathy Harper at kathy.harper2@iowa.gov. For any other questions, contact Kevin Gabbert at kevin.gabbert@idph.iowa.gov.
White House Panel Recommends Declaring National Emergency on Opioids

On August 10, President Trump stated the opioid crisis would be declared a national emergency. When a national emergency declaration is made, it is usually conducted pursuant to one of two federal acts.

- The **Robert T. Stafford (Stafford Act)** Disaster Relief and Emergency Assistance Act of 1998 provides legal authority for the Federal Emergency Management Agency (FEMA) to coordinate administration of technical, financial, logistical and other assistance to states during disasters and emergencies such as hurricanes and tornadoes.

- The **Public Health Service Act** provides legal authority for the U.S. Department of Health and Human Services (DHHS) to respond to public health emergencies by determining that a public health emergency exists, leading federal public health and medical response to public health emergencies, and assisting states in their response activities. Determination of a public health emergency triggers emergency powers that permit the federal government to assist state and local governments, suspend or modify certain legal requirements, and expend available funds to address the emergency.

At this time, the President has not identified which Act will be pursued. It is likely that any national emergency plan could result in release of disaster relief funds, additional resources for law enforcement, and expansion of prevention and treatment services.

Online Training on Opioid Therapies and Medication Assisted Treatment

The Providers’ Clinical Support System (PCSS) offers training to clinicians to prevent, diagnose, and treat opioid use disorder. If you haven’t had the opportunity to familiarize yourself with PCSS, please do so by visiting the website of [The Providers’ Clinical Support System](#).