

AttC_OD2AS_Partners Portal PM Module Screenshots

Form Approved

OMB NO: 0920-1282

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Public reporting burden of this collection of information is estimated to average 35 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/Information Collection Review Office, 1600 Clifton Road, NE, MS D-74, Atlanta, GA 30333; Attn: PRA (0920-1282).

Task Details

Program	OD2A States
Task	Year 1 Performance Measures
Description	Complete and submit the OD2A States Year 1 Performance Measures online
Due Date	12/1/2024 - 119 days remaining

Year 1 Performance Measures

Excel Reporting Tool

Excel Reporting Tool Upload

+

Performance Measures


i Please click on the links below to enter data for the one qualitative performance measure as well as all contextual questions and data quality questions for all performance measures.


Performance Measure	Last Edited	Completion
Health Equity Impact (HE_Impact) <i>Impactful practices for improving access to care and treatment for PWUD who are historically underserved by overdose prevention program</i>		0%
Health Equity Activities (HE_Activities) <i>Number of health equity focused overdose prevention activities implemented with OD2A funding</i>		0%
Harm Reduction Encounters (HR_Encounters) <i>Number of harm reduction service encounters at organizations funded or supported by OD2A</i>		0%

Harm Reduction Naloxone (HR_Naloxone)	0%
<i>Number of naloxone doses distributed by OD2A-funded or supported organizations</i>	
Linkage to Care Navigators (LTC_Navigators)	0%
<i>Number of navigators who link PWUD to care and harm reduction services via warm handoffs</i>	
Linkage to Care Referrals (LTC_Referrals)	0%
<i>Number of referrals to care and harm reduction services</i>	
Healthcare Settings Training (HS_Training)	0%
<i>Number of clinicians who received training on implementing the "2022 CDC Clinical Practice Guideline for Prescribing Opioids for Pain"</i>	
Healthcare Settings Substance Use Disorder Protocols (HS_SUD_Protocols)	0%
<i>Number of health/clinical settings implementing or improving protocols and/or policies for evidence-based substance use disorder (SUD) treatment or referrals.</i>	

Submit

Submit OD2A States Year 1 Performance Measures

 You have not marked all sections as completed and ready to submit. Please visit any strategies which are not showing 100% completion and inspect all editable tabs.

 A successful upload of the Excel Reporting Tool is required prior to submission.

 Each time you submit, the following people will be notified by email.

1. Your CDC Jurisdiction Team
2. State of Alaska Department of Health OD2A States team members who have access to the Partner's Portal

Health Equity Impact

Add Impactful Practice Report

OD2A Year 1 Performance Measures

[Back to Strategy Details](#)

Please provide a brief description of the implemented and/or tailored impactful practice using the following fields.

* = required field

Do you have any impactful practices to report? *

Yes No

Save

Cancel

Add Impactful Practice

OD2A Year 1 Performance Measures

[Back to Strategy Details](#)

Please provide a brief description of the implemented and/or tailored impactful practice using the following fields.

* = required field

Name of Impactful Practice *

(100 character max)

Provide a brief description of the implemented and/or tailored (adapted to specific cultural, linguistic, environmental, or social needs of populations) evidence-based intervention or innovative practice (including setting and whether navigators were included if applicable) and how these compare to previous efforts.

(3000 character max)

How has access to care or treatment been improved, and what new/existing community assets were leveraged?

(2000 character max)

Identify the specific populations disproportionately affected by overdose and underserved with care and treatment programs who are impacted by efforts (if tracked).

This list of populations is based on what is currently in your work plan. Please make any necessary additions or edits in the work plan.

Other (Write-in): Person who recently experienced an overdose ;

Urban populations;

Black/African American; All Ethnicities;

(Optional) Provide any other outcomes that were improved through delivery of the impactful practice.

Provides the option to expand beyond access to care and include any other outcomes, for example, retention in care, decreased opioid use. If there is nothing to report, please type N/A.

(500 character max)

Save

Cancel

Add Contextual Questions

OD2A Year 1 Performance Measures

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i Please respond to all questions below for the Health Equity Impact performance measure (impactful practices for improving access to care and treatment for PWUD who are historically underserved by overdose prevention programs).

* = required field

What barriers prevent achieving equitable access to care and treatment for SUD?

(2000 character max)

What facilitators support achieving equitable access to care and treatment for SUD?

(2000 character max)

Save

Cancel

Add Data Quality

OD2A Year 1 Performance Measures

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i Please respond to all questions below for the Health Equity Impact performance measure (impactful practices for improving access to care and treatment for PWUD who are historically underserved by overdose prevention programs).

* = required field

Describe any issues or concerns that impact the quality of the data shared (e.g., data completeness, data accuracy, facilitators/barriers for collection and reporting).

(2000 character max)

Save

Cancel

Health Equity Activities

Add Contextual Questions

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Health Equity Activities performance measure (number of health equity focused overdose prevention activities implemented with OD2A funding).

* = required field

Please describe the activities in this performance measure, for whom they were intended, and how the activities were implemented and/or tailored (e.g., linguistically, culturally) for racially, ethnically, and linguistically diverse populations.

(8000 character max)

Rich text editor toolbar: Undo, Clear, Bold, Italic, Underline, Bulleted List, Numbered List, Indent, Outdent, Link, Unlink, Image.

Text area for describing activities.

Hint

[Save](#) [Cancel](#)

Add Data Quality

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Health Equity Activities performance measure (number of health equity focused overdose prevention activities implemented with OD2A funding).

* = required field

Describe any issues or concerns that impact the quality of the data shared (e.g., data completeness, data accuracy, facilitators/barriers for collection and reporting).

(2000 character max)

Text area for describing data quality issues.

[Save](#) [Cancel](#)

Harm Reduction Encounters

Add Contextual Questions

OD2A Year 1 Performance Measures

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i Please respond to all questions below for the Harm Reduction Encounters performance measure (number of harm reduction service encounters at organizations funded or supported by OD2A).

* = required field

What are the barriers for people accessing harm reduction services in your jurisdiction?

(2000 character max)

What are the facilitators for people accessing harm reduction services in your jurisdiction?

(2000 character max)

What types of services are included?

(1000 character max)

Please estimate the proportion of harm reduction service encounters that occurred:

i Enter 0.00 for any categories for which there have been no harm reduction service encounters.

XX.X% at brick and mortar locations

(4 digits max)

XX.X% via mobile-based outreach services

(4 digits max)

XX.X % via mail-based delivery

(4 digits max)

XX.X% other (please specify)

(4 digits max)

Save

Cancel

Add Data Quality

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Harm Reduction Encounters performance measure (number of harm reduction service encounters at organizations funded or supported by OD2A).

* = required field

Describe any issues or concerns that impact the quality of the data shared (e.g., data completeness, data accuracy, facilitators/barriers for collection and reporting).

(2000 character max)

How many OD2A-funded organizations are included in the data submitted?

(3 digits max)

Save

Cancel

Harm Reduction Naloxone

Add Contextual Questions

OD2A Year 1 Performance Measures

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i Please respond to all questions below for the Harm Reduction Naloxone performance measure (number of naloxone doses distributed by OD2A-funded or supported organizations).

* = required field

What are barriers to accessing or receiving naloxone?

(2000 character max)

What are facilitators to accessing or receiving naloxone?

(2000 character max)

How did you use OD2A funds to distribute naloxone (e.g., staffing to distribute, vending machines)?

(1000 character max)

(Optional) Describe mechanisms used to distribute naloxone (e.g., mail-in, handoffs).

i If there is nothing to report, please type N/A.

(1000 character max)

Save **Cancel**

Add Data Quality

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Harm Reduction Naloxone performance measure (number of naloxone doses distributed by OD2A-funded or supported organizations).

* = required field

If you selected "other" type of organizations in the reporting tool, please describe.

If there is nothing to report, please type N/A.
(1000 character max)

Describe any issues or concerns that impact the quality of the data shared (e.g., data completeness, data accuracy, facilitators/barriers for collection and reporting).

(2000 character max)

Save

Cancel

Add Contextual Questions

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Linkage to Care Referrals performance measure (number of referrals to care and harm reduction services).

* = required field

Types of Referrals

(Optional) If you have other OD2A-funded or supported referrals beyond referrals to MOUD, behavioral treatment only (without MOUD), and harm reduction services, please describe the "other" types of referrals

If there is nothing to report, please type N/A.
(1000 character max)

Reporting Partners

Approximately, what % of healthcare facilities (e.g., hospitals, emergency departments, and other clinical settings) reported data to your jurisdiction for this performance measure? (If % not available, report total number of healthcare facilities that reported) *

% Healthcare Facilities # Healthcare Facilities

Approximately, what % of EMS agencies reported data to your jurisdiction for this performance measure? (If % not available, report total number of EMS agencies that reported).

% EMS Agencies # EMS Agencies

Approximately, what % of carceral settings (e.g., prisons and jails), reported data to your jurisdiction for this performance measure? (If % not available, report total number of carceral settings that reported).

% Carceral Settings # Carceral Settings

Approximately, what % of harm reduction settings (e.g., SSPs) reported data to your jurisdiction for this performance measure? (If % not available, report total number of carceral settings that reported).

% Harm Reduction Settings # Harm Reduction Settings

Add Data Quality

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Linkage to Care Navigators performance measure (number of navigators who link PWUD to care and harm reduction services via warm handoffs).

* = required field

Describe any issues or concerns that impact the quality of the data shared (e.g., data completeness, data accuracy, facilitators/barriers for collection and reporting).

(2000 character max)

Healthcare Settings Training

Add Contextual Questions

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Healthcare Settings Training performance measure (Number of clinicians who received training on implementing the "2022 CDC Clinical Practice Guideline for Prescribing Opioids for Pain").

* = required field

Describe the trainings including the title, number offered, length, who conducted them, and where the training occurred.

(1000 character max)

(Optional) What populations are served by the clinicians who were trained?

(4000 character max)

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What are barriers to effectively training clinicians on the "2022 CDC Clinical Practice Guideline"?

(2000 character max)

What are facilitators to effectively training clinicians on the "2022 CDC Clinical Practice Guideline"?

(2000 character max)

Save Cancel

Add Data Quality

OD2A Year 1 Performance Measures

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i Please respond to all questions below for the Healthcare Settings Training performance measure (Number of clinicians who received training on implementing the "2022 CDC Clinical Practice Guideline for Prescribing Opioids for Pain").

* = required field

Describe any issues or concerns that impact the quality of the data shared (e.g., data completeness, data accuracy, facilitators/barriers for collection and reporting).

(2000 character max)

Save

Cancel

Add Contextual Questions

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Healthcare Settings SUD Protocols performance measure (number of health/clinical settings implementing or improving protocols and/or policies for evidence-based SUD treatment or referrals).

* = required field

Describe how access to MOUD for healthcare settings has changed since implementing policies or protocols.

(2000 character max)

Describe the partnerships for SUD referral with the health settings included in this indicator. What steps were taken to develop and build the partnerships for SUD referrals?

(3000 character max)

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[Save](#) [Cancel](#)

Add Data Quality

OD2A Year 1 Performance Measures

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Please respond to all questions below for the Healthcare Settings SUD Protocols performance measure (number of health/clinical settings implementing or improving protocols and/or policies for evidence-based SUD treatment or referrals).

* = required field

What types of health settings are included in the reported data?

(1000 character max)

Describe any issues or concerns that impact the quality of the data shared (e.g., data completeness, data accuracy, facilitators/barriers for collection and reporting).

(2000 character max)

[Save](#) [Cancel](#)

