

# Action Plan

Addressing Opioid Addiction and Overdose

Saint Louis  
**COUNTY**  
**MISSOURI**



# Letter from the County Executive

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Steve Stenger  
County Executive

The use of heroin and other opioids has reached epidemic proportions – not just in other parts of the country, but right here in the St. Louis region as well. Opioid-related deaths in our area have increased 70% over the past five years.

This is a crisis that is affecting everyone – every part of the county, every age group, and every socioeconomic group. In 2016, the epidemic cost Missourians an estimated \$12.6 billion.

A number of steps have been taken over the last several years. In 2017, St. Louis County created a Prescription Drug Monitoring Program, an important tool for healthcare providers to identify and address potential harmful medication use and assist in patient care. Naloxone was made available to St. Louis County police and other area first responders, resulting in at least 112 overdose reversals in 2017 alone. In 2017, the State of Missouri passed a “Good Samaritan” law that allows people to call 911 to report an overdose without fear of being prosecuted.

Continued aggressive action is needed to deal with the opioid crisis. It has truly become a public health emergency requiring a comprehensive response from many different sectors. This action plan is that comprehensive response with five major areas of focus: education and prevention, harm reduction and rescue, treatment, recovery, and public health analysis. Information about actions that will be taken targeting each of these areas can be found in the pages that follow.

I urge everyone in St. Louis County to learn more about the problem we are facing and what is being done about it. There is a role for everyone in this fight.

Sincerely,

A handwritten signature in black ink, appearing to read 'Steve Stenger'.

Steven V. Stenger  
County Executive, St. Louis County

# Letter from the Director

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Faisal Khan, MBBS, MPH  
Director

One of the essential services of every public health department is to monitor the health status of our community to identify and address problems.

The opioid crisis has reached even beyond the 239 lives that were lost in St. Louis County in 2017. The number of overdoses that are not fatal are substantially higher; nationally the estimate is that there are about 18-20 times more nonfatal overdoses than fatal ones. There has been an estimated 99% increase in the diagnosis of neonatal abstinence syndrome by our hospital partners. There is also an increased risk of transmitting bloodborne pathogens such as Hepatitis C and HIV/AIDS.

Substance use disorders and their complications are chronic medical conditions and should be treated with the care and diligence of any other medical condition.

It is imperative that this region act swiftly and collaboratively on the scope of addiction and overdose in our community. This epidemic is changing the landscape of our community and necessitates changes in the way that we work together on finding comprehensive solutions that are driven by data and focused on what will work in St. Louis.

We must understand and address the trauma of addiction for people and their families. We must also face the inequities in our system that lead to disparities in prevention, education, access to treatment, and the availability of long-term recovery. We must listen to the voice of people in pain and despair and find connections to services, support, and hope.

Sincerely,

A handwritten signature in blue ink that reads "Faisal Khan". The signature is fluid and cursive, written on a light-colored background.

Faisal Khan, MBBS, MPH  
Director, Saint Louis County Department of Public Health

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For questions about this action plan or to find out how you can get involved, please contact Spring Schmidt, Director of Health Promotion and Public Health Research, Saint Louis County Department of Public Health: 314-615-0502 or [sschmidt@stlouisco.com](mailto:sschmidt@stlouisco.com).

# Acknowledgements

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Thank you to the many organizations that helped craft the action plan. Their input and continued commitment to building a healthier community are invaluable.

Behavioral Health Network of Greater St. Louis

Behavioral Health Response

BJC HealthCare

City of St. Louis Department of Health

Drug Enforcement Administration (DEA)

Jefferson County Health Department

Mercy Health System

Missouri Department of Health and Senior Services

Missouri Department of Mental Health

Missouri Hospital Association

Missouri Network for Opiate Reform and Recovery

Missouri Opioid-Heroin Overdose Prevention Education Project (MO-HOPE)

Missouri State Medical Association

National Council on Alcoholism and Drug Abuse (NCADA) – St. Louis Area

St. Charles County Department of Public Health

St. Louis area EMS and Fire Departments

St. Louis Area Business Health Coalition

St. Louis area pharmacies

St. Louis College of Pharmacy

St. Louis Regional Health Commission

Saint Louis County Department of Human Services

Saint Louis County Department of Public Health

Saint Louis County Justice Services

Saint Louis County Office of the Medical Examiner

Saint Louis County Police Department

Saint Louis Integrated Health Network

Saint Louis University

SSM Health

Substance Abuse and Mental Health Services Administration

University of Missouri-St. Louis, Missouri Institute of Mental Health, State Targeted Response team

U.S. Department of Justice, Opioid Community of Practice

Washington University



# THE OPIOID ADDICTION AND OVERDOSE EPIDEMIC: A PUBLIC HEALTH EMERGENCY

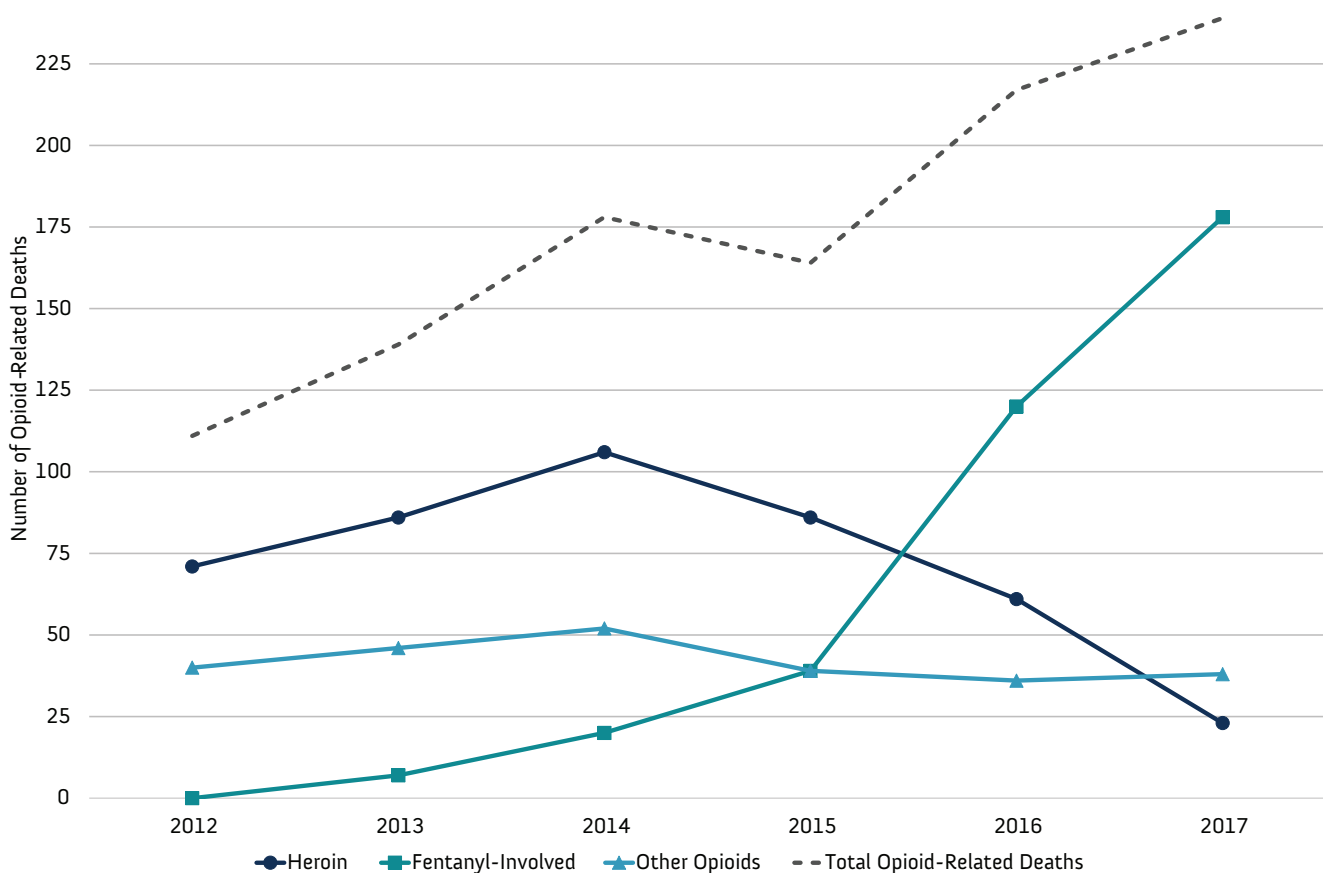
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The opioid addiction and overdose epidemic is having a profound and growing impact on all areas of St. Louis County and the broader St. Louis metropolitan area. St. Louis County Executive Steve Stenger has now declared a public health emergency to intensify efforts to combat the crisis and save lives. This emergency declaration will improve collaboration and coordination among agencies and community members, help overcome legislative and regulatory barriers, and focus attention and resources on needed solutions. There are already many significant efforts underway to address the opioid epidemic in the St. Louis region. With this action plan, we seek to build unity among those efforts by providing a common framework and platform to build on the successes of ongoing efforts.

# What are opioids? Why are they a problem?

Opioids are a type of drug that interacts with receptors in the brain to reduce feelings of pain; they can also cause euphoria. If ingested in large amounts, opioids can cause slowed breathing, unconsciousness, and death. Examples of opioids include the illegal drug heroin, synthetic opioids such as illicitly-produced fentanyl, and pain medications available legally by prescription, such as oxycodone, hydrocodone, tramadol, morphine, fentanyl, and others. While opioids can treat pain, they also carry health risks. People can develop a tolerance (needing higher doses to have the same effect) and dependence (withdrawal symptoms if discontinued). Over time, people who use opioids can develop opioid use disorder. Opioid use disorder, sometimes called opioid addiction, is a medical condition characterized by a problematic pattern of opioid use, interference of social functioning, the development of drug tolerance, and difficulty controlling or reducing use due to withdrawal symptoms<sup>1</sup>.

## Opioid-Related Deaths Occurring in St. Louis County by Drug Type (2012-2017)



Note: Data from the St. Louis County Medical Examiner’s Office. Data represent all deaths occurring in St. Louis County regardless of decedent’s residence. “Heroin” means both heroin only or heroin with other drugs (excluding fentanyl). “Fentanyl-involved” means fentanyl only, fentanyl with other drugs (including other opioids), or fentanyl analogs. “Other opioids” means opioids other than heroin or fentanyl (prescription opioids).

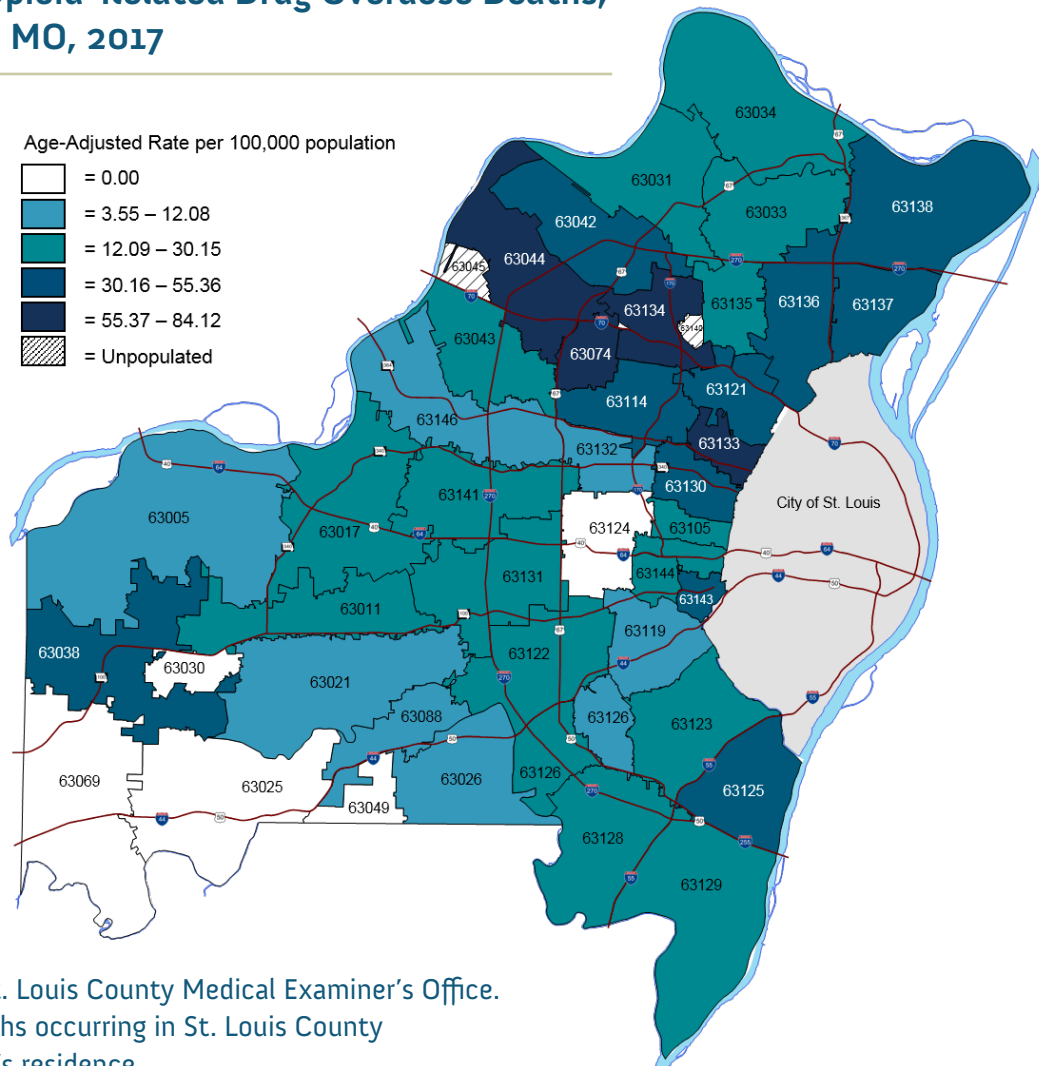
<sup>1</sup> SAMHSA. 2015. Substance Use Disorders. <https://www.samhsa.gov/disorders/substance-use>



There were 239 opioid-related deaths (i.e. fatal overdoses) in St. Louis County in 2017. There were 70 opioid-related deaths in the first quarter of 2018. If this trend continues, the number of opioid-related deaths in 2018 will exceed the number from 2017. Communities throughout St. Louis County have been affected. As the map shows, there were opioid-related overdose deaths in almost every zip code.

Beyond the risk of overdose, opioid addiction has far-reaching consequences on individuals' lives, their immediate social networks, and the broader community. Separation of families, incarceration, housing instability, economic burdens, risky sexual behavior, unemployment, and loss of empowerment are all potential consequences of opioid use disorder<sup>2</sup>. In 2015, about 41,300 Missourians needed treatment for opioid use disorder, but only 11,900 received treatment of any kind<sup>3,4</sup>.

## Occurrences of Opioid-Related Drug Overdose Deaths, St. Louis County, MO, 2017



Note: Data from the St. Louis County Medical Examiner's Office. Data represent all deaths occurring in St. Louis County regardless of decedent's residence.

Complete 2017 data for the City of St. Louis are not yet available. We know that neighboring jurisdictions are also facing a high burden of overdose deaths. Efforts to collaborate with surrounding jurisdictions to share information and build a more regional picture of how the opioid addiction and overdose epidemic affects the area are an important part of this plan.

<sup>2</sup> Galea S & Vlahov D. 2002. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1913691/pdf/pubhealthrep00207-0140.pdf>

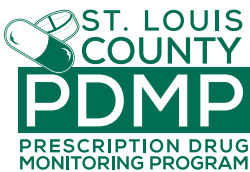
<sup>3</sup> SAMHSA. 2015. National survey of substance abuse treatment services (N-SSATS).

<sup>4</sup> Substance Abuse and Mental Health Services Administration. 2016. National Survey on Drug Use and Health, 2014. Doi.org/10.3886/ICRSR36361.v1.

# Current Efforts

Many organizations are already undertaking significant initiatives to address the epidemic. The action plan builds on these existing efforts to make the community healthier.

## St. Louis County Prescription Drug Monitoring Program (PDMP)



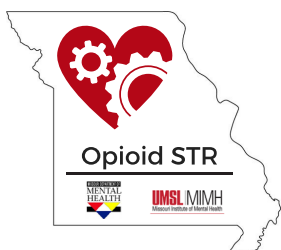
The St. Louis County Prescription Drug Monitoring Program (PDMP), operated by the Saint Louis County Department of Public Health (DPH), monitors the prescribing and dispensing of schedule II-IV controlled substances to assist in the identification and prevention of prescription drug misuse and abuse. The program's goals are to 1) improve controlled substance prescribing by providing critical information regarding a patient's controlled substance prescription history; 2) inform clinical practice by identifying patients at high risk who would benefit from early interventions; and 3) reduce the number of people who misuse, abuse, or overdose while ensuring that patients have access to safe, effective treatment. The program was launched on April 25, 2017. Any Missouri jurisdiction can participate by enacting legislation; as of June 2018, 62 Missouri jurisdictions are participating, and additional jurisdictions join monthly. These 62 jurisdictions cover 80% of the state's population and 92% of Missouri's healthcare providers.

## Opioid Community of Practice



The Saint Louis County Department of Public Health (DPH) received two grants from the U.S. Department of Justice to address the opioid epidemic. One grant supports the establishment of an Opioid Community of Practice which engages researchers and public health entities across the state to design data-driven strategies to reduce opioid misuse and overdose. The Opioid Community of Practice aims to increase collaboration with Missouri communities, form regional data collaboratives, share innovative community-based interventions, and evaluate efforts. As part of the collaborative effort, St. Louis County, the City of St. Louis, Kansas City, Columbia, Springfield, St. Charles County, Clay County, and the Missouri Department of Health and Senior Services are partnering to collect and share regional information.

## Missouri Opioid State Targeted Response (STR) Project



The Missouri Opioid State Targeted Response (STR) project is expanding access to integrated prevention, treatment, and recovery support services for individuals with opioid use disorder throughout the state. The primary focus is on rigorous, multidisciplinary provider training and education on evidence-based treatment services to uninsured individuals with opioid use disorder who present for care within state-funded programs. The Missouri Department of Mental Health is leading the project with administration, implementation, and evaluation activities provided by the Missouri Institute of Mental Health (MIMH) – University of Missouri, St. Louis.

## St. Louis CRUSH Coalition

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The St. Louis CRUSH Coalition (Community Resources United to Stop Heroin) is a community coalition comprised of treatment providers, public health, law enforcement, community-based organizations, universities, and other stakeholders. The coalition works to bring people together to confront the opioid crisis. Initially formed as an effort to alert the public that heroin was making a resurgence, the coalition has become a venue for strengthening interagency cooperation and sharing resources to address community needs.

## First Responders and Naloxone Overdose Rescue

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The Saint Louis County Department of Public Health (DPH) recruits first responder agencies to be trained to administer naloxone (Narcan®), an overdose reversal drug. The Missouri Opioid-Heroin Overdose Prevention Education (MO-HOPE) Project (a partnership between the Missouri Department of Mental Health; the Missouri Institute of Mental Health - University of Missouri, St. Louis; and NCADA) conducts regular trainings. St. Louis County Police began carrying Narcan® in 2016. Along with St. Louis County Police and the North County Police Cooperative, 23 municipal police departments in the county carry naloxone. These entities cover about 80% of the county's population. A total of 222 successful overdose reversals using naloxone have been reported in St. Louis County from mid-2016 to mid-2018.

## Community-Based Prevention

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A number of organizations conduct education and prevention campaigns to help the public understand the risks of opioid use and to prevent young people from experimenting with opioids and other drugs. NCADA, the Alliance for Healthy Communities, the St. Louis College of Pharmacy, and others conduct programming such as the Generation Rx school-based curriculum, community townhalls, and prescription take-back event promotion.

## Health Systems

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Health systems in the region are engaged in a variety of initiatives to address the epidemic. Emergency departments are on the front lines of treating individuals who experience an opioid overdose and are putting systems in place to refer patients to longer-term treatment instead of simply addressing the acute overdose emergency. A growing number of doctors are initiating medication-assisted treatment (MAT) directly in the emergency department, and area BJC, SSM, and Mercy hospitals are participating in Behavioral Health Network's Engaging Patients in Care Coordination (EPICC) Project. The EPICC Project dispatches peer recovery coaches to assess a patient's readiness for treatment and connect them to treatment if interested. Health systems are also paving the way in treating pregnant women with opioid use disorder and infants born with neonatal abstinence syndrome (babies born opioid dependent). Community health centers and specialized treatment programs also play a critical role by providing medical and psychosocial treatment to support patients with opioid use disorder.

## Missouri Department of Health and Senior Services (DHSS)

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Combating the opioid addiction and overdose epidemic is a priority for the Missouri Department of Health and Senior Services (DHSS). Efforts include education, data analysis, and naloxone distribution initiatives, among others. DHSS leads the Missouri Overdose Rescue and Education (MORE) project which aims to reduce opioid overdose deaths through training, education, and distribution of naloxone to areas with limited access. DHSS is also working on improving the timeliness of opioid overdose reporting through the Enhancing State Surveillance of Opioid Involved Morbidity and Mortality (ESOOS) grant.

# Action Plan

The action plan lays out coordinated strategies to combat the opioid addiction and overdose epidemic. The plan aims to:

1. Raise awareness about the opioid addiction and overdose epidemic and share how the community is affected.
2. Prevent people from becoming addicted to opioids.
3. Increase the availability of naloxone (Narcan®) to rescue people experiencing an overdose.
4. Increase the number of people connected to treatment with a focus on high risk populations.
5. Enable people in recovery to transition into stable housing, employment, and family life.

The action plan lays out initiatives in five priority areas:

- **Education and Prevention**
- **Harm Reduction and Rescue**
- **Treatment**
- **Recovery**
- **Public Health Data**

The plan is designed to change based on the evolution of the epidemic itself, newly-released evidence for the effectiveness of different interventions, and future funding opportunities. Throughout the plan, initiatives will be denoted as either:

- Actions to be implemented by Saint Louis County departments with current resources
- Actions to be implemented by partners with current resources
- ✚ Opportunities dependent on legislation, additional funding, and/or new commitments



# EDUCATION AND PREVENTION

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Preventing people from developing opioid use disorder is one of the most effective ways to decrease the number of opioid-related deaths in the long term. Education can help healthcare professionals and the community understand the risks of opioid use and be empowered to prescribe, use, store, and dispose of opioids with safety in mind. These efforts must be paired with support for community members who live with chronic pain and depend on medication to manage their symptoms.

Awareness campaigns can also be implemented to lessen the stigma around opioid use disorder, helping people understand that it is a disease and not a character flaw or moral failing. Ultimately, education and prevention efforts aim to reduce the number of people who begin misusing opioids and encourage people who struggle with unhealthy opioid use to seek help earlier.

A variety of organizations including NCADA, the Alliance for Healthy Communities, and the St. Louis CRUSH coalition promote prevention messages in schools and among the wider population. The St. Louis County Prescription Drug Monitoring Program (PDMP) is another prevention tool, giving healthcare providers information to make safer prescribing choices. The initiatives below aim to strengthen current efforts and reach new audiences with prevention messages.

# GOAL

## Encourage safer opioid prescribing, use, storage, and disposal

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will complete the registration of thousands of new healthcare providers for the Prescription Drug Monitoring Program (PDMP) in partnership with healthcare systems.</li> <li>➤ DPH’s Healthy Homes program will design educational materials on safer storage and disposal to share with families during home visits.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ DPH, the Missouri Hospital Association, the Missouri Opioid State Targeted Response project, and healthcare provider champions will design educational resources for providers on using the Prescription Drug Monitoring Program (PDMP) to identify and help patients at risk of developing an opioid addiction, and on adhering to opioid prescribing guidelines.</li> <li>■ The St. Louis College of Pharmacy, the DEA (Drug Enforcement Administration), NCADA, DPH, and other stakeholders will promote medication take-back days.</li> <li>■ NCADA will continue efforts to educate the public on the harms of substance use.</li> </ul>
	Opportunity	<ul style="list-style-type: none"> <li>✚ Pending SB 718 becoming law, pharmacies and other DEA-approved sites will be able to collect unused controlled medications for disposal. If area pharmacies decide to become collection sites, campaigns will be produced to inform the public.</li> </ul>
2019	County	<ul style="list-style-type: none"> <li>➤ Educational materials for healthcare providers will be disseminated through the Prescription Drug Monitoring Program (PDMP) dissemination network and through other professional organizations.</li> <li>➤ DPH will focus on Prescription Drug Monitoring Program (PDMP) utilization. Prescribing summaries will be released to give healthcare providers the opportunity to see how their levels of prescribing compare to others. Prescribing summaries will be paired with educational materials and resources.</li> <li>➤ DPH’s Healthy Homes program will incorporate education and supplies for safe opioid storage and disposal into their home visits.</li> </ul>
	Opportunity	<ul style="list-style-type: none"> <li>✚ Pharmacies can put in place policies and procedures enabling them to collect unused controlled medications in compliance with DEA regulations.</li> <li>✚ DPH will work to add a staff member to increase capacity for substance use disorder prevention and education.</li> <li>✚ DPH will purchase and distribute medication disposal bags.</li> </ul>
2020 +	Partners	<ul style="list-style-type: none"> <li>■ Educational resources for healthcare providers will be adapted to ensure that provider needs are being met and that new developments in the epidemic are sufficiently addressed.</li> </ul>
	Opportunity	<ul style="list-style-type: none"> <li>✚ Pharmacies may begin collecting unused opioids and other controlled medications for safe disposal. DPH and other organizations working in prevention will disseminate information to the public about utilizing this resource.</li> </ul>

# GOAL

## Reduce the stigma around addiction and promote available resources for treatment and support

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will launch the “Anyone Can” public awareness campaign to decrease stigma and increase the public’s understanding that addiction is a disease, treatment is available, and naloxone can save lives. Displays will appear on Facebook, on the Metro transit system, and on a dedicated website.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ NCADA will continue implementing school-based, community-based, and youth leadership programs and promoting their “Talk About It” public awareness campaign.</li> </ul>
2019	Partners	<ul style="list-style-type: none"> <li>■ The St. Louis CRUSH coalition will plan new strategies to educate the public about opioid addiction and encourage people to seek help if they need it.</li> <li>■ The St. Louis Area Business Health Coalition will develop a communication campaign for employers to use in the workplace to decrease stigma and encourage employees to seek help if they are struggling with a substance use disorder.</li> </ul>
	County	<ul style="list-style-type: none"> <li>➤ Public awareness efforts will continue to be adapted to keep pace with the changing nature of the epidemic and the evolving resource landscape.</li> </ul>
2020+	County	<ul style="list-style-type: none"> <li>➤ Public awareness efforts will continue to be adapted to keep pace with the changing nature of the epidemic and the evolving resource landscape.</li> </ul>

# GOAL

## Promote the implementation of a broad range of evidence-based practices for pain management

2018	Partners	<ul style="list-style-type: none"> <li>■ DPH, the Missouri Hospital Association, the Missouri Opioid State Targeted Response project staff, and healthcare provider champions will design educational resources for healthcare providers on alternative chronic pain management options.</li> <li>■ The Regional Health Commission’s Chronic Pain Initiative will provide patient-centered and patient-informed insights to ensure efforts to decrease the risk of opioid misuse respect the needs and experiences of patients with chronic pain.</li> </ul>
	County	<ul style="list-style-type: none"> <li>➤ Educational materials for healthcare providers will be disseminated through the Prescription Drug Monitoring Program (PDMP) dissemination network and through other professional organizations.</li> </ul>
2020+	Opportunities	<ul style="list-style-type: none"> <li>⊕ DPH will conduct qualitative research with healthcare providers and patients with chronic pain to understand the barriers to delivering safe, effective alternatives to opioids for chronic pain management. DPH will incorporate its findings into provider education efforts.</li> <li>⊕ DPH and area health systems will keep track of advancements in non-opioid pain management and disseminate new information as it becomes available.</li> </ul>



# HARM REDUCTION AND RESCUE

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Prevention efforts are important, but they do not address the health needs of those who have already developed opioid use disorder. Harm reduction efforts seek to reduce the negative health consequences associated with drug use such as overdose and the transmission of bloodborne infections. Harm reduction efforts benefit everyone – people who use drugs, their families, and the broader community.

An important harm reduction tool is naloxone<sup>5</sup>, a safe and effective medication that reverses the effects of an opioid overdose. A statewide standing order allows any pharmacy in Missouri to dispense naloxone without a prescription. DPH, the Missouri Opioid-Heroin Overdose Prevention Education (MO-HOPE) project, the Missouri Overdose Rescue and Education (MORE) grant, the Missouri Opioid State Targeted Response project, and others have already begun increasing access to naloxone and tracking rescues. A total of 112 successful rescues were reported in 2017, and many more likely occurred without being reported.

Other harm-reduction strategies specifically address health risks associated with injection drug use, such as the risk of spreading HIV, viral hepatitis, and other bloodborne diseases due to sharing injection equipment. Syringe services programs, sometimes called syringe exchange programs, have been shown to decrease the spread of these diseases by disposing of used syringes and distributing clean, unused syringes. Engaging people who use drugs in these programs also provides an opportunity to offer health screenings and link them to treatment.

<sup>5</sup> Sometimes referred to as Narcan®, one of its brand names.



# GOAL

## Increase community access to naloxone to decrease the risk of death from opioid overdose

2018	County	<ul style="list-style-type: none"> <li>➤ DPH clinics will co-prescribe naloxone to patients at risk of experiencing an overdose. Special care will be given to ensure that patients who use illicit opioids have access to naloxone, as those patients are at a particularly high risk of experiencing an overdose.</li> <li>➤ Justice Services will initiate the MO Heroes program at the county jail, providing free naloxone to people at risk of overdose upon their release.</li> <li>➤ The Parks Department will train park rangers to administer naloxone and equip all rangers with naloxone while on duty.</li> <li>➤ The Department of Human Services will pursue plans to equip congregate housing, shelters, and homeless street outreach teams with naloxone.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ The Missouri Opioid State Targeted Response project and the St. Louis College of Pharmacy will continue promoting pharmacy-based naloxone distribution.</li> <li>■ The Missouri Opioid-Heroin Overdose Prevention Education (MO-HOPE) project and the Missouri Overdose Rescue and Education (MORE) grant will continue distributing naloxone.</li> </ul>
2019	County	<ul style="list-style-type: none"> <li>➤ The Department of Human Services will utilize existing naloxone distribution programs to equip congregate housing, shelters, and homeless street outreach teams with naloxone.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>✚ DPH will purchase additional naloxone to expand its capacity to distribute to people at risk of overdose.</li> </ul>
2020+	Opportunities	<ul style="list-style-type: none"> <li>✚ Naloxone will be distributed to additional high-risk areas as they are identified based on overdose surveillance.</li> </ul>

# GOAL

## Decrease the health risks associated with injection drug use

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will continue gathering information about the effectiveness of syringe services programs and develop operational plans to be implemented should such programs become legal in Missouri.</li> <li>➤ DPH will disseminate safer-use educational materials to high-risk DPH patients, recovery community centers, and other community partners to help people who inject drugs avoid getting infections or unintentionally overdosing.</li> <li>➤ DPH will continue to educate the public about how HIV and viral hepatitis are transmitted and inform community members how to manage the risk of infection.</li> </ul>
	County	<ul style="list-style-type: none"> <li>➤ DPH will share information about the effectiveness of syringe services programs and put operational plans in place for use if syringe access legislation passes.</li> <li>➤ DPH will continue disseminating safer-use educational materials and adjust messaging to reflect developments in the epidemic as appropriate.</li> </ul>
2019	Opportunities	<ul style="list-style-type: none"> <li>✚ Secure sharps disposal boxes will be installed at DPH facilities, parks, and other community locations to decrease the risk of needle stick injuries and disease transmission.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>✚ DPH and/or community partners will plan to open a syringe services program, if enabling legislation passes. Services to be offered will include syringe disposal, syringe distribution, naloxone distribution, HIV and hepatitis screening, safer-use information dissemination, and referral to substance use disorder treatment services if desired.</li> <li>✚ DPH will conduct community outreach to help the public understand the many benefits of syringe services programs and address potential misconceptions.</li> </ul>
2020+	Opportunities	<ul style="list-style-type: none"> <li>✚ DPH and/or community partners will plan to open a syringe services program, if enabling legislation passes. Services to be offered will include syringe disposal, syringe distribution, naloxone distribution, HIV and hepatitis screening, safer-use information dissemination, and referral to substance use disorder treatment services if desired.</li> <li>✚ DPH will conduct community outreach to help the public understand the many benefits of syringe services programs and address potential misconceptions.</li> </ul>



# TREATMENT

The gold standard treatment for opioid use disorder is medication-assisted treatment (MAT)<sup>6</sup>, which may include buprenorphine products, methadone, or naltrexone. About 41,300 Missourians were suffering from opioid use disorder as of 2015, but only 11,900 received any treatment (29%)<sup>7</sup>; many of those did not receive medication-assisted treatment (MAT). Access is limited due to several factors: inadequate systems to connect those in need to providers, financial barriers, a lack of certified providers, and stigma against medical treatment for addiction. Those in the criminal justice system have particularly limited access. Recently incarcerated people have an overdose death rate about 120 times higher than the general population<sup>8</sup>, so increasing treatment in prisons and jails can save many lives<sup>9</sup>.

It is critical to keep in mind that many people with substance use disorders also suffer from mental health disorders and have often lived through traumatic experiences. Treatment initiatives must take these compound needs into account to achieve optimal health outcomes. A trauma-informed approach that prioritizes principles such as safety, collaboration, empowerment, and responsiveness is important.

Several efforts are underway in the region to expand treatment access. The Missouri Opioid State Targeted Response project funded treatment for more than 1,700 Missourians in its first year. Access to care for pregnant women is being expanded through a partnership between Queen of Peace Center, Chestnut Health Systems, SSM Health Wish Center, St. Mary's Hospital, and BJC. Promising efforts to link people to treatment after an overdose are being implemented in the area: Behavioral Health Network's Engaging Patients in Care Coordination (EPICC) project has linked about 1,000 patients in emergency departments to peer recovery coaches, and the St. Charles County Ambulance District has been running a substance use recovery response team. Even with these efforts, demand for treatment outpaces supply.

<sup>6</sup> Note that the field is moving away from the terminology "medication-assisted treatment" since medication itself is the primary component of treatment. New terms like "medications for OUD treatment", "medications for addiction treatment", and "pharmacotherapy for OUD" are sometimes used. Medication-assisted treatment is used in this document since a single new term has not been agreed upon.

<sup>7</sup> SAMHSA. 2016. National Survey on Drug Use and Health, 2014. [Doi.org/10.3886/ICRSR36361.v1](https://doi.org/10.3886/ICRSR36361.v1).

<sup>8</sup> Binswanger, I.A. et al. 2007. Release from Prison — A High Risk of Death for Former Inmates. *N Engl J Med.* 356(2): 157–165. [doi:10.1056/NEJMsa064115](https://doi.org/10.1056/NEJMsa064115).

<sup>9</sup> In RI, which offers all 3 medications, fatal overdoses after release decreased by 60% in one year. The number needed to treat to prevent one overdose death was only 11. See: Green TC et al. 2018. Postincarceration Fatal Overdoses After Implementing Medications for Addiction Treatment in a Statewide Correctional System. *JAMA Psych.* [doi:10.1001/jamapsychiatry.2017.4614](https://doi.org/10.1001/jamapsychiatry.2017.4614)

# GOAL

## Strengthen linkage to treatment for those who have experienced an opioid overdose

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will promote evidence-based treatment for substance use disorders among providers and work with centralized referral systems across the region to streamline the referral process so individuals with substance use disorder can more easily find available appointments with providers.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ First responders in the region (including fire, EMS, and police) will discuss feasible overdose response models that link people who experience a nonfatal overdose to treatment. This is especially critical for those who are not transported to the hospital. First responders will begin piloting overdose response teams.</li> <li>■ The Regional Health Commission will continue its feasibility study of the Behavioral Health Assessment and Triage Center model being pioneered in Kansas City. An assessment and triage center is a place where people suffering from an acute substance use or mental health crisis can be stabilized and referred to treatment. The model can decrease visits to emergency departments and incarceration.</li> <li>■ Area health systems, including BJC, Mercy, and SSM, will continue linking patients who arrive at an emergency department post-overdose to community-based treatment via Behavioral Health Network’s programs: Engaging Patients in Care Coordination (EPICC) for adults and Youth Emergency Room Enhancement for minors.</li> <li>■ The Missouri Hospital Association and the Missouri Opioid State Targeted Response project will encourage more emergency department physicians to begin medication-assisted treatment (MAT) for patients immediately following an overdose.</li> </ul>
		Partners
2019	Opportunities	<ul style="list-style-type: none"> <li>➤ Additional overdose response teams will be launched in different parts of the region. Potential coordination between first responders and peer recovery coaches, such as those with Behavioral Health Network’s Engaging Patients in Care Coordination (EPICC) project, will be explored.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>➤ Efforts will be made to expand an effective overdose response team model across the region and put in place a sustainable funding structure for such teams.</li> <li>➤ Overdose response teams may consider expanding the services they provide to include partnering with agencies such as Children’s Advocacy Services of Greater St. Louis to address the trauma experienced by children who witness an overdose.</li> </ul>
2020+	Opportunities	<ul style="list-style-type: none"> <li>➤ Efforts will be made to expand an effective overdose response team model across the region and put in place a sustainable funding structure for such teams.</li> <li>➤ Overdose response teams may consider expanding the services they provide to include partnering with agencies such as Children’s Advocacy Services of Greater St. Louis to address the trauma experienced by children who witness an overdose.</li> </ul>

# GOAL

## Increase access to treatment for high-risk groups including those in jail, the homeless, and the uninsured

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will pilot offering medication-assisted treatment (MAT) services in its clinics and build systems for integrating MAT into its existing substance abuse counseling services.</li> <li>➤ DPH will invite federal partners to present funding opportunities to organizations in the St. Louis region seeking resources for expanding treatment.</li> <li>➤ DPH and Justice Services will survey current treatment access for individuals in the criminal justice system and explore the feasibility of expanding access to medication-assisted treatment (MAT). These efforts would build upon current programs that give selected inmates naltrexone injections shortly before release and connect them to community treatment providers.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ DPH and the Regional Health Commission will explore increased funding for substance use disorder treatment for uninsured individuals, including medications for addiction treatment.</li> <li>■ The Missouri Opioid State Targeted Response project, the Missouri Hospital Association, DPH, and other partners will continue encouraging healthcare providers to complete the training required to offer medication-assisted treatment (MAT).</li> <li>■ Missouri Department of Mental Health community treatment providers will continue to provide no-cost, evidenced-based treatment for opioid use disorder for uninsured individuals through the Missouri Opioid State Targeted Response project.</li> <li>■ Queen of Peace Center, Chestnut Health Systems, the SSM Health Wish Center, St. Mary’s Hospital, and BJC will continue addressing the needs of pregnant women with opioid use disorder.</li> </ul>
2019	County	<ul style="list-style-type: none"> <li>➤ DPH and Justice Services will seek funding and technical assistance to prepare for expanded treatment for opioid use disorder in the county jail.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ The Regional Community Health Improvement Plan’s Behavioral Health Action Team will consider forming a dual diagnosis cross-functional team to address the needs of people with both substance use and mental health diagnoses. The group will discuss models such as “Seeking Safety” that integrate treatment for substance use disorders with treatment for post-traumatic stress disorder, recognizing that past experiences of trauma and substance use often co-occur.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>✚ DPH will expand medication-assisted treatment (MAT) services in its clinics with lessons learned from the 2018 pilot in mind, pending adequate funding.</li> <li>✚ The Regional Health Commission will expand access to coverage for substance use disorder treatment, including medications, for uninsured individuals seeking care at community health centers, as funding becomes available.</li> </ul>
2020+	Opportunities	<ul style="list-style-type: none"> <li>✚ DPH will expand medication-assisted treatment (MAT) in the county jail, pending sufficient funding. Efforts will be made to connect people with community-based treatment and recovery support when they are released using the RE-LINK program as a model.</li> </ul>



# RECOVERY

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Opioid use disorder is a chronic condition that requires ongoing management and support. Recovery is a process whereby individuals improve their health and wellness; secure stable housing; find a purpose through school, work, or other activities; and reintegrate into their families and communities. Recovery looks different for everyone. It is important to put in place systems of support that allow people in recovery to chart their own paths and achieve the goals they have set for themselves.

Recovery support initiatives are being strengthened through the work of the Missouri Opioid State Targeted Response project. Initiatives include establishing recovery community centers throughout the state, increasing the number of certified peer support specialists, and funding medication-assisted treatment-friendly recovery housing. Recovery support services have historically been underfunded; for example, as of March 2018, there were less than 90 beds in medication-assisted treatment-friendly recovery houses in the St. Louis region, and employment support is limited.

This plan aims to strengthen investment in recovery initiatives and highlight innovative ways to support community members in the recovery process. These efforts not only help individuals in recovery but also ensure that the regional workforce is strong, thereby promoting community-wide economic development.

# GOAL

## Address recovery housing needs for individuals with opioid addiction

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will investigate barriers to sober living houses accepting residents on medication-assisted treatment (MAT).</li> <li>➤ The Department of Human Services and DPH will investigate the unintended consequences of “housing first” policies, which can leave the treatment and recovery needs of homeless individuals unaddressed. The Department of Human Services will investigate ways to increase the linkage of homeless clients to treatment and recovery services within the constraints of the “housing first” model.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ The Missouri Department of Mental Health will continue funding stays in medication-assisted treatment-friendly recovery housing for those in need through the Missouri Opioid State Targeted Response project.</li> </ul>
2019	County	<ul style="list-style-type: none"> <li>➤ DPH will work with its partners to increase access to recovery housing that accepts residents who utilize medication-assisted treatment (MAT).</li> <li>➤ The Department of Human Services will explore opportunities to disseminate information about accessing substance use disorder treatment to recently housed people in need.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>+</li> <li>➤ The Department of Human Services will consider initiatives to coordinate needed recovery resources for people using Homeless Services, pending necessary funding.</li> </ul>

# GOAL

## Improve the ability of individuals in recovery to obtain and maintain employment

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will review county personnel policies to assess whether appropriate support is given to employees with opioid use and other substance use disorders.</li> <li>➤ DPH will work with business leaders and community members affected by addiction to investigate the level of treatment and recovery support available in the workplace.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ DPH and the St. Louis Area Business Health Coalition will co-host a meeting with business leaders to discuss the impact of opioid addiction in the workplace and consider how businesses can offer optimal treatment and recovery support to maintain a healthy workforce.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>⊕ The Department of Human Services will pursue funding opportunities to address how Workforce Development’s programming can be targeted to benefit those in recovery from opioid use and other substance use disorders.</li> <li>⊕ Recovery support providers may consider building the competencies of peer recovery specialists to assist in linkage to employment or referring clients to the Department of Human Services’ Workforce Development program.</li> </ul>
2019	County	<ul style="list-style-type: none"> <li>➤ The Department of Human Services’ Workforce Development program plans to use new funding from the U.S. Department of Labor to incentivize their sub-contractors to provide training to workers impacted by opioid use disorder in need of employment support.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ DPH will continue engaging with the St. Louis Area Business Health Coalition and workers to prepare model policies for preventing opioid addiction and fostering treatment and recovery-friendly workplaces. DPH will highlight promising models of workplace support such as Belden’s “Pathways to Employment” program.</li> </ul>
2020+	County	<ul style="list-style-type: none"> <li>➤ DPH will monitor research on the effectiveness of different recovery supports and use this evidence to promote the most effective practices in the community.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>⊕ The Missouri Department of Mental Health will continue to fund certified peer recovery specialists, resulting in more capacity and availability.</li> </ul>





# PUBLIC HEALTH DATA

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Public health surveillance is the collection, analysis, use, and sharing of data to shape public health practice. Surveillance is critical to responding to the opioid addiction and overdose epidemic because it helps pinpoint how large the problem is, who is affected, and how trends are changing over time.

Data related to the epidemic come from several sources, including the St. Louis County Prescription Drug Monitoring Program (PDMP), the Office of the Medical Examiner, the Hospital Industry Data Institute, the Missouri Opioid-Heroin Overdose Prevention Education (MO-HOPE) project's overdose field report, the CDC's National Syndromic Surveillance System, and the Missouri Department of Health and Senior Services. Information may not always be local, comprehensive, or timely; however, the Opioid Community of Practice (a learning collaborative led by DPH with participation from public health agencies across the state) is bringing partners together to tackle these surveillance challenges.

The gaps that most impede efforts to target public health efforts are the lack of comprehensive, timely nonfatal overdose data and the difficulty of identifying predictive risk factors due to challenges linking multiple data sources.

# GOAL

## Improve the timeliness and completeness of data to monitor trends and target interventions

2018	County	<ul style="list-style-type: none"> <li>➤ DPH will work with partners to create a case definition for opioid overdose and design a process for reporting nonfatal overdoses.</li> <li>➤ DPH will conduct outreach to health systems and other key partners to ask for their support in reporting nonfatal overdoses.</li> <li>➤ DPH will reach out to area police, fire, and EMS departments to recruit them to participate in overdose surveillance. DPH proposes to link first responder, hospitalization, and medical examiner data to obtain a comprehensive understanding of overdose events in the area. Overdose surveillance data across jurisdictions will support the efforts of public safety and public health to mobilize a response to an overdose spike.</li> </ul>
	County	<ul style="list-style-type: none"> <li>➤ DPH will expand outreach to police, fire, and EMS departments to ask for their collaboration on overdose surveillance.</li> <li>➤ DPH will monitor ongoing national conversations about the surveillance of neonatal abstinence syndrome and consider how local surveillance may be enhanced based on improvements in tracking at the national level.</li> </ul>
2019	Partners	<ul style="list-style-type: none"> <li>■ As action plan implementation progresses and the Opioid Community of Practice works on improving data reporting standards, partners across the region will work to align overdose death reporting to form a more comprehensive regional picture of the burden of overdose mortality.</li> </ul>
	Opportunities	<ul style="list-style-type: none"> <li>➤ DPH will put in place mechanisms to combine existing overdose tracking systems and streamline overdose reporting. Consolidating and streamlining overdose reporting will create the most comprehensive picture of the burden of opioid overdoses in the region. The comprehensive tracking system will help identify changes in overdose burden and help direct resources to areas in need.</li> <li>➤ DPH will seek funding to expand capacity to track new hepatitis cases.</li> </ul>
2020+	County	<ul style="list-style-type: none"> <li>➤ DPH and partners who use the overdose surveillance system for overdose response efforts will assess the effectiveness of the system and undergo quality improvement processes as appropriate.</li> </ul>
	Partners	<ul style="list-style-type: none"> <li>■ Area health systems and DPH will work together to assess whether local neonatal abstinence syndrome surveillance systems can be strengthened.</li> </ul>
2020+	Opportunities	<ul style="list-style-type: none"> <li>➤ DPH will build capacity to engage in more thorough hepatitis surveillance and case investigations to better track how the disease is spreading and ensure that those who contract hepatitis are linked to harm reduction and treatment resources.</li> </ul>

# GOAL

## Investigate common characteristics of overdose victims to identify predictive risk factors

2018	Opportunities	<ul style="list-style-type: none"><li>+ DPH will build capacity for reviewing opioid fatalities, including acquiring higher-capacity data processing systems.</li></ul>
2019	Opportunities	<ul style="list-style-type: none"><li>+ DPH will add a staff member and begin linking different data sources to overdose deaths. These efforts will identify associations between overdose deaths and different risk factors, such as incarceration, previous overdoses, prior opioid prescriptions, etc. This process will allow DPH to better pinpoint opportunities for intervention.</li></ul>
2020+	Opportunities	<ul style="list-style-type: none"><li>+ DPH will continue to link different data sources to overdose deaths. As DPH pinpoints the most important risk factors, it will begin designing more targeted interventions to tackle those risk factors.</li></ul>

# GOAL

## Keep the public apprised of the state of the epidemic and county's response

2018	County	<ul style="list-style-type: none"><li>➤ The Office of the County Executive and DPH will build a website to disseminate information about the opioid addiction and overdose epidemic and the emergency response.</li></ul>
2019	County	<ul style="list-style-type: none"><li>➤ DPH will update the website regularly with progress on action plan activities, news related to upcoming initiatives, and opioid-related health outcomes.</li></ul>
2020+	County	<ul style="list-style-type: none"><li>➤ The Office of the County Executive and DPH will ensure that the website continues to be a hub for up-to-date information, resources, and interaction.</li></ul>

# Monitoring Action Plan Progress

Information about the emergency response can be found on the website [www.stlouisco.com/recover](http://www.stlouisco.com/recover). Saint Louis County will set up a data dashboard during the initial months of implementation to keep the public informed of progress on the plan's initiatives. The dashboard will also include broader indicators that the Department of Public Health monitors to understand how the community's health is being affected.

## COMMUNITY HEALTH IMPACT METRICS

15.5

Average Day Supply of Opioids Prescribed

St. Louis County  
Q1 2018

### Average Day Supply of Opioids Prescribed

- Data from the St. Louis County Prescription Drug Monitoring Program (PDMP).
- Average day supply is the average length of an opioid prescription provided to St. Louis County residents.
- A lower number is better. Lower average day supply for opioid prescriptions lessens the chance of a person becoming dependent or developing opioid use disorder. Long-term opioid use often begins with the treatment of acute (short-term) pain. For acute (short-term) pain, recommendations are to start with the lowest dose and smallest quantity (day supply). Prescribing opioids for 3 days or less is recommended as a starting point.

67

Naloxone Reversals Reported (YTD)

St. Louis County  
Jan - June 2018

### Naloxone Reversals Reported (YTD)

- Data from the Missouri Opioid-Heroin Overdose Prevention Education (MO-HOPE) field report.
- Naloxone can reverse an opioid overdose. Naloxone reversals are the number of times naloxone has been used to rescue someone from an opioid overdose in St. Louis County as reported voluntarily through the MO-HOPE field report.
- MO-HOPE provides overdose education, naloxone training and naloxone to those at risk of experiencing or witnessing an overdose event. MO-HOPE has developed a field report that can be used to report the usage of naloxone to rescue someone from an opioid overdose. Reporting the overdose event is voluntary and does not include personal identifying information. This number is an underestimate of the actual burden of opioid overdoses in the area as reporting is voluntary.

?

Nonfatal Overdoses / Month

### Nonfatal Overdoses / Month

- Data to be collected as part of the action plan activities by partnering with health systems and first responders.
- Data will represent the number of nonfatal opioid overdoses occurring within St. Louis County. Persons experiencing a nonfatal overdose have an increased risk of fatal overdose. The number of nonfatal overdoses, in combination with fatal overdoses (opioid-related deaths), will provide a more complete understanding of the opioid epidemic in St. Louis County and can be used to evaluate resource capacity within the area.

85

Opioid-Related Deaths (YTD)

Occurrences in St. Louis County  
Jan-Apr 2018

### Opioid-Related Deaths (YTD)

- Data from the St. Louis County Medical Examiner's Office.
- The number of opioid-related deaths represents those occurring in St. Louis County regardless of decedent's residence.
- Opioid-related deaths mean deaths where heroin, fentanyl, or other opioids (prescription opioids) were involved.

# ACTION PLAN PROGRESS METRICS

10.7%

PDMP Patient Searches /  
Prescriptions Dispensed  
Q1 2018

## PDMP Patient Searches / Prescriptions Dispensed

- Data from the St. Louis County Prescription Drug Monitoring Program (PDMP).
- This represents utilization of the PDMP by healthcare providers. The value is the percent of controlled substance prescriptions filled where a healthcare provider has also reviewed a patient's prescription history (patient searches).
- The St. Louis County Prescription Drug Monitoring Program (PDMP) monitors the prescribing and dispensing of schedule II-IV controlled substances which include prescription opioids, benzodiazepines, and stimulants. The PDMP is a clinical tool for healthcare providers to review their patient's prescription history as part of patient care.

6,510

Naloxone Kits Distributed  
MO-HOPE project  
Dec. 2016-June 2018

## Naloxone Kits Distributed

- Data from the Missouri Opioid-Heroin Overdose Prevention Education (MO-HOPE) project.
- Naloxone can reverse an opioid overdose, and naloxone kits are distributed by the MO-HOPE project.
- MO-HOPE provides overdose education, naloxone training, and naloxone to those at risk of experiencing or witnessing an overdose event. The number of naloxone kits distributed gives an understanding of naloxone availability and accessibility for overdose reversal and rescue in the community.

0

Overdose Response Teams  
Established

## Overdose Response Teams Established

- Data to be collected as part of the action plan activities by partnering with first responders and peer recovery coaches.
- Overdose response teams will aim to link people who experience a nonfatal overdose to treatment. Some hospitals have implemented programs to link people that come to the emergency department after an opioid overdose with treatment. Partnering with first responders is important to reach those who are not transported to the hospital after an overdose.

0

Agencies Reporting Nonfatal  
Overdoses

## Agencies Reporting Nonfatal Overdoses

- Data to be collected as part of the action plan activities by partnering with health systems and first responders.
- Persons experiencing a nonfatal overdose have an increased risk of fatal overdose. Data will represent the number of agencies that have partnered with DPH to provide information on nonfatal overdose events in the St. Louis area.
- The number of nonfatal overdoses, in combination with fatal overdoses (opioid-related deaths), will provide a more complete understanding of the opioid epidemic in St. Louis County and can be used to evaluate resource capacity within the area.

98

Medication-Assisted Treatment  
(MAT) Providers  
St. Louis County

## Medication-Assisted Treatment (MAT) Providers

- Data from the Substance Abuse and Mental Health Services Administration (SAMHSA).
- Medication-assisted treatment providers are able to treat opioid use disorder with buprenorphine in St. Louis County. Buprenorphine is the most common medication used to treat opioid use disorder and requires specific education and training by the Substance Abuse and Mental Health Services Administration (SAMHSA).

# Conclusion

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This action plan was designed to provide a comprehensive and effective response to the opioid addiction and overdose epidemic affecting the St. Louis area. It recognizes the many excellent efforts already underway, integrates them into a regional initiative, and builds on those efforts to scale up the response to a level proportionate to the crisis.

This plan aims to educate people about the scope of the problem, prevent the misuse of opioids and other substances, reduce the risks faced by those with opioid use disorder, save lives by directly intervening after overdoses, and encourage treatment and recovery. These efforts will be supported by a more robust public health data system to measure, analyze, and respond to what is happening in our community.

Everyone has a role to play. Working together, we can help our residents and our community respond and recover from the opioid epidemic.





Saint Louis  
**COUNTY**  
MISSOURI

# Action Plan

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[www.stlouisco.com/recover](http://www.stlouisco.com/recover)