



**A Public Health Approach to Addressing
the Opioid Epidemic and Substance Use
Disorders in Public Housing Rural
Communities**

National Center for Health in Public Housing

February 27, 2020

National Center for Health in Public Housing



Training and
Technical
Assistance



Research and
Evaluation



Outreach and
Collaboration

Increase access, quality of health care, and improve health
outcomes

DISCLAIMER



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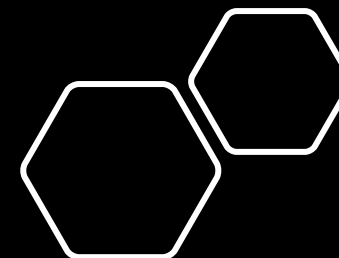
CHAT



RAISE HAND



Q&A



LEARNING OBJECTIVES

1

Discuss the impact of the opioid epidemic and substance use disorders in rural/public housing communities

2

Review federal and local efforts to address the opioid crisis in rural/public housing communities through prevention, intervention and treatment service and supports

3

Identify best practices to address substance use disorders in rural/public housing communities

AGENDA

Fraser Byrne, MPA, Federal Office of Rural Health Policy, HRSA

Hector Santos, MD, FAAP, MHS, Director of Behavioral Health Services, COSSMA Health Center

Frank Vega, Director of Behavioral Health Services, ARcare

Elizabeth Fleming, LCSW, LCADC, SAP, ARcare



Federal Office of Rural Health Policy

Fraser Byrne, MPA

Public Health Analyst, Office of the Associate Administrator

Vision: Healthy Communities, Healthy People



Federal Office of Rural Health Policy

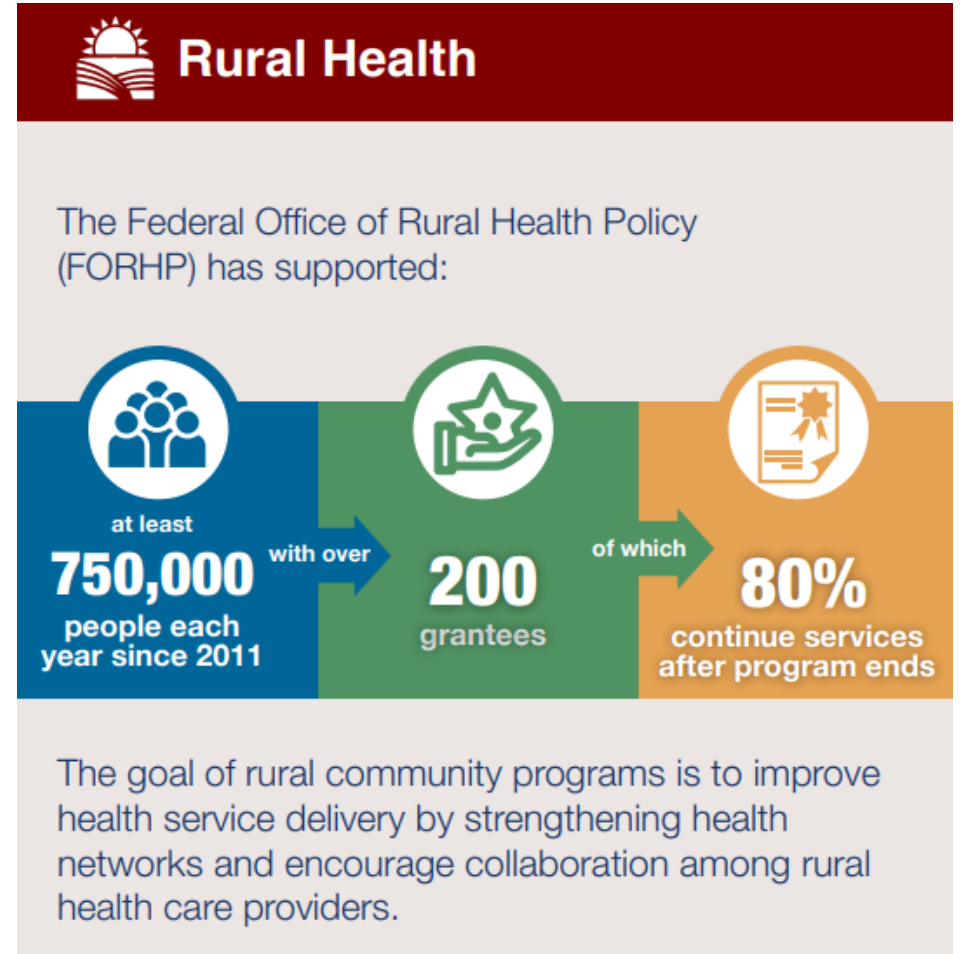
U.S. Department of Health and Human Services

Quick Background

- Part of HRSA & HHS
- Policy and Research Role
- Administer Grant Programs
- Technical Assistance
- “Voice for Rural”

Mission

Collaborate with rural communities and partners to support programs and shape policy that will improve health in rural America.



Rural Realities and Challenges in Addressing SUD/ODU

Though opioid abuse and opioid-related death has been on the rise nationally, rural communities are disproportionately affected

In 2017 the rate of drug overdose deaths from opioids was higher in rural counties than urban

Rural residents are most likely to be prescribed, and overdose on, prescription painkillers

Rural residents with opioid use disorder tend to be younger, less wealthy and educated, and more uninsured or underinsured than urban users

More than 60% of rural counties lack a single physician that can prescribe buprenorphine, and less than 10% of Opioid Treatment Programs are in rural areas



RCORP Impact to Date

\$157 million

Dollars supporting rural communities since FY 2018

1,117

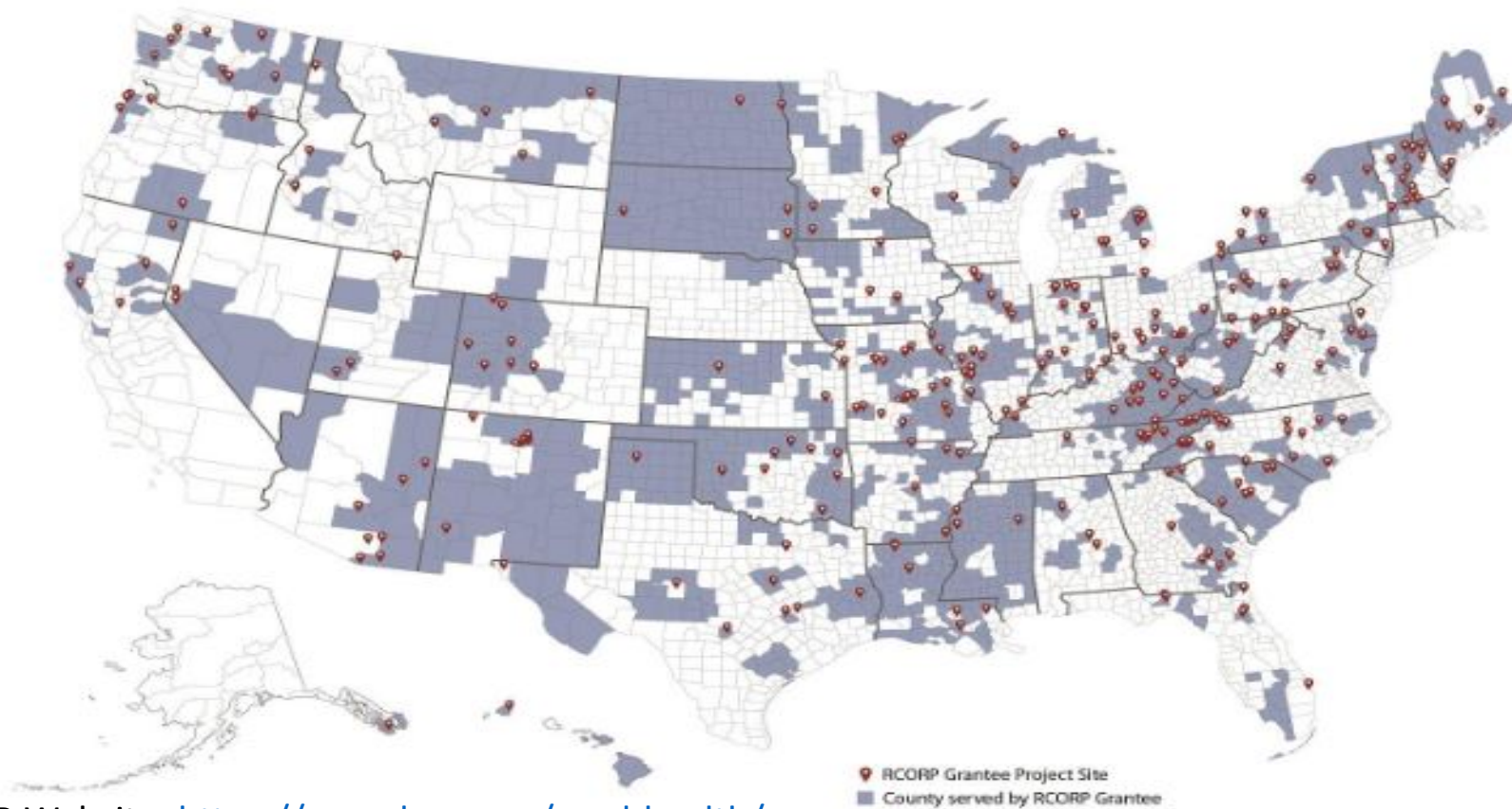
Number of rural counties served by RCORP to date

47

Number of states receiving RCORP funding to date

307

Consortia working in rural communities



RCORP Website: <https://www.hrsa.gov/rural-health/rcorp>



RCORP Grant Programs

	RCORP-Planning	RCORP-Implementation	RCORP-MAT Expansion
Goal	To strengthen the capacity of multi-sector consortiums to address opioid use disorder prevention, treatment, and recovery.	To strengthen opioid use disorder service delivery by implementing a set of core prevention, treatment, and recovery activities that align with HHS's Five-Point Strategy to Combat the Opioid Crisis	To enhance access to medication-assisted treatment within small rural clinic and hospital settings.
Years	1 year	3 years	3 years
Award amount	\$200K	\$1 million	Up to \$725K
# Awards	95 (FY18) and 20 (FY19) <i>50 (projected-FY20)</i>	80 (FY19) <i>89 (projected-FY20)</i>	12 (FY19)
Eligibility	Domestic public or private, non-profit or for-profit, entities. Additional applicant and consortium specifications as described in NOFO. All services must exclusively target rural areas.		

Apply Now: FY20 RCORP-Implementation Grant

- **RCORP-Implementation HRSA-20-031 is now open! Applications due April 24** via [Grants.gov](https://www.grants.gov).
- **Funding:** \$1 million total, across three years
- **Core activities and consortia:** Award recipients will implement core SUD/ODU prevention, treatment, and recovery activities. HRSA requires that applicants be part of broad, multi-sectoral consortia. Applicants must include rural consortia partners and serve rural communities.
- **Polysubstance:** The primary focus of the grant is OUD. However, recognizing that many individuals with OUD are polysubstance users, or have other co-occurring conditions, consortia may address other SUD-related needs of the target population.
- **Sustainability:** HRSA expects that consortia funded by RCORP-Implementation will sustain services during and beyond the period of performance. Award recipients will complete a detailed plan for sustaining their consortium and SUD/ODU services.



RCORP Cooperative Agreements

	RCORP-Technical Assistance	RCORP-Evaluation	RCORP-Centers of Excellence
Goal	To assist rural consortiums with addressing opioid use disorder prevention, treatment, and recovery service and workforce needs.	To evaluate the impact of RCORP initiatives through data collection and analysis, and to develop evaluation tools and resources for rural communities.	To support the dissemination of best practices related to the treatment for and prevention of SUDs within rural communities, with a focus on the current opioid crisis, and the development of methods to address future SUD epidemics.
Period of performance	4 years	4 years	3 years
Award amount	\$6 million per year	\$3 million per year	\$6.7 million
Award recipient	JBS International, Inc.	JBS International, Inc., in partnership with Oregon Health & Science University	Fletcher Group (Stockbridge, GA); University of Rochester (Rochester, NY); University of Vermont (Burlington, VT)

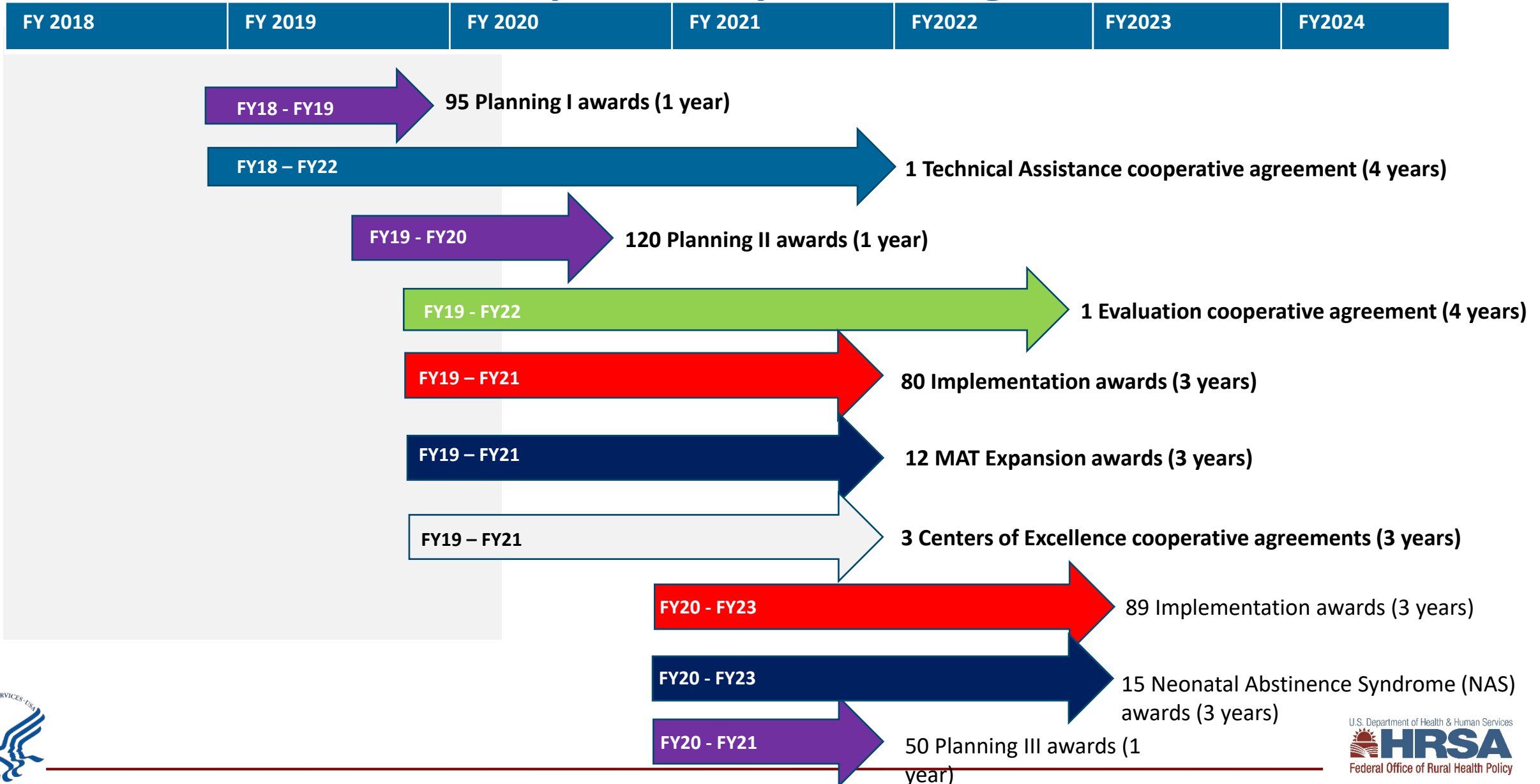
RCORP-Rural Centers of Excellence in Substance Abuse

Focus Area 2: Recovery Housing

- **Focus Area:** Best practices in recovery housing programs for SUD, particularly OUD, intervention among low-income, high-risk individuals in rural communities.
- **COE Activities:**
 - Assist with evidence-based prevention, treatment, and risk reduction with a focus on recovery housing;
 - Provide technical assistance to rural communities for the establishment of recovery housing programs;
 - Assist with establishing treatment and recovery housing options for low-income and high-risk individuals; and
 - Develop infrastructure for promoting and evaluating recovery housing programs.
- **Background:** Fletcher Group, Inc administers the *Recovery KY* program, a peer-driven and professionally supervised long-term recovery program featuring 18 facilities each serving 100 or more residents for up to two years. Evaluations of Recovery KY demonstrate effective recovery outcomes for residents, including decreases in opioid use and homelessness.
- **Award Target Area:** Fletcher Group, Inc. and University of Kentucky are targeting 101 rural counties in Kentucky, Georgia, West Virginia, Ohio, Idaho, Montana, Oregon, and Washington. But TA is available as requested beyond these target areas!
- **Website:** <https://www.hrsa.gov/rural-health/rcorp/rcoe>. To request technical assistance from the Fletcher Group, please contact [Ernie Fletcher, MD](#) and [Dave Johnson](#).



Rural Communities Opioid Response Program Timeline



Contact Information

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Learn more about RCORP:

Webpage: <https://www.hrsa.gov/rural-health/rcorp>

Email: ruralopioidresponse@hrsa.gov



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A top-down view of a medical professional's desk. The desk is dark blue and holds various medical supplies: surgical instruments (scissors, forceps, scalpels) on the left; a syringe in a tray, a stethoscope, and a clear IV bag on the right; a clipboard with a grid and a hand writing on it in the center; a smartphone at the bottom; and several pill containers and a tray of colorful pills scattered around. The text is overlaid on this scene.

COSSMA, INC. (FQHC)

HÉCTOR, O. SANTOS REYES, MD, MHS

Medically Assisted Treatment (MAT)



COSSMA, INC. OUR MISSION

“We are a leading non-profit social entrepreneur organization that provides integrated healthcare services and social support of excellence centered on the patient and community”

OUR SERVICES



Medical Services

- General and family medicine
- Pediatrics
- Dental medicine
- Physical Therapy
- Endocrinology
- Rheumatology
- Podiatry
- Pharmacy services
- Clinical Laboratory
- Vaccination
- Allergy / Immunology
- Pediatric neurology
- Home Visits



Mental Health

- Clinical Psychologists
- Psychological counselor
- Psychiatry (Adults and Child psychiatry)
- Clinics Social Workers
- Substance Abuse Counselors
- Psychiatric Nurse Case Manager
- Community Outreach staff
- Peer counseling
- Recovery support staff

COSSMA

Service Area Map



OUR CLINICS



cosssma

...somos servicio, somos salud



Humacao



Cidra



San Lorenzo



Yabucoa



Naguabo



Las Piedras



Aibonito





Opioid epidemic in Puerto Rico and what COSSMA is doing to address it.

COSSMA

Opioid Epidemic in Puerto Rico and what COSSMA is Doing to Address it

- Our outreach personnel and peer counselor visit areas of high drug trafficking and offer our services.
- We offer peer counselling
- Our addiction counsellors all have masters degrees in addiction counselling and are licensed in this discipline.
- We provide psychological services to all of our MAT patients.
- Psychiatric services are available for those that need them
- Our services are integrated with physical health and we encourage our MAT participants to have their PCP within our own facilities.
- Mental health and physical health services are integrated all under the same roof.

MAT (Medical Assisted Treatment)

- TREATMENT OF OPIOID SUD's with Buprenorphine
 - Toxicology testing on all visits including Fentanyl testing.
 - PMP in place
 - Monitoring of opioid prescriptions by our providers, particularly in the management of chronic pain issues.
 - Induction to Treatment in our facilities.
 - HIV treatment in our ATRÉVETE program
 - Hepatitis C patients receive treatment through CLETS services (PRMC)
 - Make effort to eliminate barriers to treatment
 - Offer transportation services
 - Medications are free of charge (Through HRSA grant)
 - Coordinate treatment with PCP

THANK YOU!



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Cossma, Inc.
(787) 739 – 8182 ext. 1200



cossma.org





Impact on Our Communities

Elizabeth Fleming, LCSW, LCADC, SAP

KentuckyCare

RCORP- Implementation Program Coordinator

Western Kentucky Opioid Response Consortium

The Consortium core members include: KentuckyCare, Baptist Health-Paducah, Four Rivers Behavioral Health, and the Paducah Public School System. While there are many other stakeholders that are a part of the group, these four organizations are committed to providing leadership, leveraging funds and resources, and initiating change in the communities.

Core Measures Table

#	MEASURE	BASELINE
1	Total Population in the Project's Service Area	196,263 (2017)
2	Number of Individuals Screened for SUD/ODU in the Last Year	4,300
3	Number of non-fatal opioid overdoses in Project Service Area	275 (2018)
4	Number of fatal opioid overdoses in the Project Service Area	24 (2017)
5	Number of health care providers within the Project Service Area who have completed the necessary training and received a WAIVER to provide MAT.	MD/DO= 7 (current) APRN/PA= 2 (current)



Professional Trainings

- ▶ MAT for Opioid Addiction: Lessons Learned in Western Kentucky and KentuckyCare
 - ▶ 59 Attendees were present with 28 being MD/DO.
- ▶ Addiction and Compulsive Behavior Symposium



Symposium addresses childhood 'ACEs'

BY KELLY FARRELL
Healthcare Reporter

Adverse childhood experiences and toxic stress are of grave concern to Dr. Patrick Withrow, outreach director for Baptist Health Paducah.

"I absolutely agree this is a major public health crisis," he said, on toxic stress. Withrow and other panelists addressed a crowded Barnes Auditorium Saturday morning at Carson-Moye Heart Center about "ACEs," toxic stress, prevention and awareness. Their panel was part of the 13th annual Addiction & Compulsive Behaviors Symposium that tackled various issues over several hours, including addiction and vaping related problems.

Around 133 people, including physicians, nurses, educators, counselors and other professionals, attended the symposium and watched a screening of the 2016 documentary by James Redford, "Resilience." The film highlighted the CDC-Kaiser Permanente Adverse Childhood Experiences (ACE) research study, toxic stress and its impact on developing brains of children. It informed viewers that stress can occur when children experience adversity or traumatic events, such as abuse, neglect and domestic violence, without enough adult support.

The ACE questionnaire features several questions, which many attendees filled out, and asks people if they've experienced different types of abuse and neglect before 18 years of age. It also questions if someone had

a household member with depression or mental illness, as well as if they had a household member go to prison.

"Resilience" reports ACEs are common and the higher the ACE score, the higher the risk factor for developing health or social problems later, but just one caring adult in a child's life can be a buffer for these experiences. Toxic stress is linked to heart disease, chronic diseases, risky behaviors, depression, lower life expectancy and other issues.

"It's not something you're born with," said pediatrician Dr. Jack Shonkoff, director for Center on the Developing Child at Harvard University, in his film. "It's something that's built over time."

After the screening, Withrow joined Janie Criner, executive director of Child Watch, Morgan Elementary

School principal Dr. Mark Fenske and licensed clinical social worker Maria Miranda-Straub for follow-up discussion and questions.

"We were taught in medical school to worry about hypertension, diabetes, obesity—all these things, as sort of a secondary prevention of the diseases," Withrow said. "That here's the psychological and mental health to all these diseases, which starts in kindergarten. It starts early, early on and, if we can control toxic stress, we can get rid of a lot of these risk factors before they have time to manifest themselves in the individual."

He thinks it would also save money in health care costs and be more effective in dealing with diseases rather than waiting until it starts.

One audience member later asked about community

education on ACEs, to which Miranda-Straub described as being a long-term educational or public advocacy campaign.

"Think about those public health campaigns that have worked," she said. "Even in Kentucky, most restaurants don't let you smoke there anymore, right? That's success. So this is the same work. How is it that we teach that in the schools? Really early."

"Because when kids come home and tell you, 'You're going to die, Dad, if you keep smoking,' or 'I can't believe you don't have your seat belt on,' because they saw all those dummies going across the car (in a mock auto accident)—then that community begins to change."

■ U.S. health officials link childhood trauma to adult stress. **AP**

- 133 Attendees with the following breakdown:
 - 13 Alcohol and Drug Counselors, 6 Licensed Professional Counselors, 1 Psychologist, 3 Physical Therapist, 20 Education Professionals, 18 General Audience, 16 Social Workers, 6 LMFT, 33 Physicians, 17 unspecified.



Naloxone Education

- ▶ Continued Stigma around Naloxone distribution.
 - ▶ According to the Opioid Taskforce Community Assessment 2019, “Only **47%** of respondents **agreed or strongly agreed** that Narcan should be administered to every individual experiencing an overdose, every time.
- ▶ Since October 2019: 75 Narcan Kits have been distributed to the service area.
 - ▶ General Public that attended training at local Recovery Community Center.
 - ▶ Local Fire Department
 - ▶ Faith-based Treatment Facility
 - ▶ Coroner
 - ▶ Local Syringe Exchange due to funding not available in the month of December.



What's Next

- ▶ You Could Save a Life Training
- ▶ Substance Use Disorder Treatment "A Village of Care" Training
- ▶ Nalaxone Saves Lives and Anti-Stigma Awareness Campaign
- ▶ Evidenced-Based Curriculum in the schools



Substance Use Disorder Treatment
"A Village of Care"
April 30
8:30 a.m. - 3:30 p.m.
Four Rivers Behavioral Health

This workshop is designed to further the goal of creating a Recovery Oriented System of Care for our community. If you are interested in learning more about addiction, recovery, the role of trauma and how you can best serve and provide resources for substance exposed infants, mothers and families you should attend!

Class Schedule/Presenters

8:30 a.m. - 10:00 a.m.	Elizabeth Fleming, KentuckyCares <i>Medically Assisted Treatment</i>
10:00 a.m. - 10:15 a.m.	Break
10:15 a.m. - 11:15 a.m.	Morgan Deymer, Baptist Health NICU <i>Neonatal Abstinence Syndrome</i>
11:15 a.m. - 11:45 a.m.	Sarah Andrus, Service Region Administrative Associate <i>Reporting, Laws and Plan of Safe Care</i>
11:45 a.m. - 12:00 p.m.	Break/Lunch Pickup
12:00 p.m. - 1:30 p.m.	Wendy Lay, FRBH Ashlee Brockwell, FRBH <i>Early Childhood Care</i>
1:30 p.m. - 1:45 p.m.	Break
1:45 p.m. - 2:15 p.m.	Chastity Smith, FRBH Peer Support Specialist Kasey Teasley, FRBH Peer Support Specialist <i>Personal Story, Recovery Resources</i>
2:15 p.m. - 3:15 p.m.	Allison Clark, FRBH Cynthia Turner, FRBH <i>HANDS First Steps KYMoms MATR</i>

No Fee to Attend
Breakfast and Lunch Provided
CEU's Pending

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425 Broadway
Paducah, KY 42001
270.442.7121
866.442.7121
Crisis: 800.592.3980
www.4RBH.org

FREE TRAINING

YOU COULD SAVE A LIFE

LEARN HOW TO IDENTIFY AN OVERDOSE WITH NARCAN TRAINING



When & Where

Friday, February 28
2:30 p.m. - 5:30 p.m.
McCracken County Public Library

What

Information sessions on how to identify a drug overdose and how to administer NARCAN will be held every 20 minutes. Area providers of treatment resources and referrals will be available to answer questions and offer support.

Who Should Attend

Family Members
Friends
People in Recovery or Active Addiction
Recovery Professionals

Presented by:
Purchase Area Health Connections
KentuckyCare
The McCracken County Coroner
Four Rivers Behavioral Health
McCracken County ASAP
Four Rivers Behavioral Health's
Regional Prevention Center

Fentanyl testing strips also will be available. Fentanyl can be mixed into many street drugs like cocaine and heroin, or put in pill form to resemble other drugs, like Xanax - because of this, if you or someone you love is in recovery and experience a relapse you are at high risk for overdose. Fentanyl testing strips can alert you to the presence of this dangerous additive.




Q&A

- If you would like to ask the presenter a question, please submit it through the questions box on your control panel.
- If you are dialed in through your telephone and would like to verbally ask the presenter a question, use the “raise hand” icon on your control panel and your line will be unmuted.

- Symposium Registration
- Call for Abstracts and Posters
- Sponsorship Opportunities
are now available

June 18 – 19, 2020

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Thank you

