

State Offices of Rural Health and RCORP Funding

Region D Partnership Meeting
June 6, 2019

Rural Communities Opioid Response Program

Types of funding:

- Planning grants (FY18, FY19)
- Implementation grants (FY19, FY20)
- Rural Centers of Excellence on Substance Use Disorders (FY19)
- Medication Assisted Treatment Expansion (FY19)

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 - RHCs, CAHs, Health Center Look-Alike, Other small rural hospital (49 beds or less), Tribe or tribal organization

How can SORHs engage?

Consortium requirement

- Planning grants (FY18, FY19), Implementation grants (FY19, FY20)
- 4-member consortium
 - At least 2 in HRSA-designated rural county or census tract
- Can be consortium lead applicant (fiscal agent) or member

How can SORHs engage?

Informally

- Share information with stakeholders
- Provide support for applications, including providing data and resources for accessing necessary information
- Provide letters of support
- Make connections between stakeholders
- Follow progress of grant and offer support as needed

State Office of Rural Health (SORH) Grant

Core Functions:

1. Collection and Dissemination of Information
2. Provision of Technical Assistance
3. Coordination of Rural Health Activities

Current SORH RCORP Experiences

- Michigan
- Virginia
- North Dakota
- Texas
- South Carolina

Note: FORHP expansion from opioids to substance use
JBS International technical assistance

Virginia

- **Consortium members:** Virginia State Office of Rural Health; Appalachian Substance Abuse Coalition (ASAC); Ballad Health; Stone Mountain Health Systems; Wise County Sherriff Office; Healthy Appalachia Institute at UVA Wise; Lenowisco and Cumberland Plateau Health Districts; Cumberland Mountain Community Services Board
- **Focus:** Strengthen and develop structure of ASAC; establish 501(c)(3)
- **Challenges:** Community doubts about whether the consortium really understands their needs
- **Successes:** Working closely with consortium members to ensure all voices are being heard

North Dakota

- **Consortium members:** (19 members) SORH; public health; QIO; ND Rural Health Association; tribal treatment program; other treatment center; SACCHO; PCO; Ryan White & HIV Prevention; ND EMS Association; Mental Health Technology Transfer Center (MHTTC – serves ND, SD, MT, WY, UT, CO); ND Health Information Network; School of Medicine, Family and Community Medicine Department; ND Rural Development, USDA; Lutheran Social Services
- **Focus:** Entire state, initial information gathering on all projects/programs related to OUD; 3 Work Groups: Peer Support Specialists; Tiered System of SUD/OUD Services; Rural Toolkit/Survey to Identify Rural Community Capacity for addressing SUD/OUD
- **Challenges:** Deciding where to narrow focus geographically
- **Successes:** Collecting information on all past and current OUD work; close work with Department of Human Services to align with their vision

Texas

- **Consortium members:** SORH/Texas Department of Agriculture; UT Austin Dell Medical School (Departments of Population Health and Psychiatry); CHI St. Joseph Health Madison and Burleson Hospitals
- **Focus:** Needs assessment due to weak statewide data (especially rural); care continuum; community driven planning, particularly around prevention and treatment services
- **Challenges:** IRB/research delays; stigma within the community, including providers; availability of quality data; near complete lack of substance use resources and efforts in target communities
- **Successes:** Community Advisory Councils (CACs); buy in from key community leaders and members; growing awareness around community needs/gaps

Opioid and SUD Resources

- Rural Health Information Hub – RHlhub
 - <https://www.ruralhealthinfo.org/topics/substance-abuse/resources>
 - Resources and publications
 - Chart gallery
 - News and events (webinars, trainings, ...)
- NORC Walsh Center for Rural Health Analysis & USDA Rural Development
 - Opioid misuse tool: <https://opioidmisusetool.norc.org/>
 - Interactive data visualization of county-level drug overdose mortality rates
 - Integrated with data including unemployment rate, poverty rate, and disability status
- Rural Health Research Gateway
 - <https://www.ruralhealthresearch.org/>
 - Examples of available research publications:
 - “Rural-Urban Differences in Opioid-Affected Pregnancies and Births,”
 - “Non-Medical Opioid Use among Rural and Urban Pregnant Women, 2007-2014”
 - “Barriers Rural Physicians Face Prescribing Buprenorphine for Opioid Use Disorder”
 - “Impact of the Opioid Crisis on Rural Emergency Departments”

Opioid and SUD Resources

- Substance Abuse and Mental Health Services Administration – SAMHSA
 - <https://www.samhsa.gov/>
 - Treatment; Practitioner training; Data; Programs
 - “Road to Recovery” series: <https://recoverymonth.gov/road-to-recovery>
- National Institute on Drug Abuse – NIDA
 - <https://www.drugabuse.gov/>
 - Drugs of Abuse: Opioids, methamphetamine, heroin, prescription medications, fentanyl
 - Drug facts; Science of Addiction; Policy briefs; Research reports
- Centers for Disease Control and Prevention – CDC
 - Opioid Basics: <https://www.cdc.gov/drugoverdose/opioids/index.html>
 - Categorized by type: prescription opioids, heroin, fentanyl
 - Understanding the Epidemic
 - Commonly Used Terms: <https://www.cdc.gov/drugoverdose/opioids/terms.html>

Discussion

- What would help your office feel better positioned to get involved?
- Are there specific barriers your **state/region** has faced in accessing these funds?
- Are there specific barriers your **office** has faced in accessing these funds?
- Are any SORHs currently engaged in OUD/SUD work and wondering how to benefit from these funds?
- New SORH Planning grantees – where are you heading?