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 – RHIhub
  • [https://www.ruralhealthinfo.org/topics/substance-abuse/resources](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/](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/](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?