



Northern New England-Practice Transformation Network (NNE- PTN)  
Community Opioid Overdose Response (COOR) ECHO Program  
NEWSLETTER

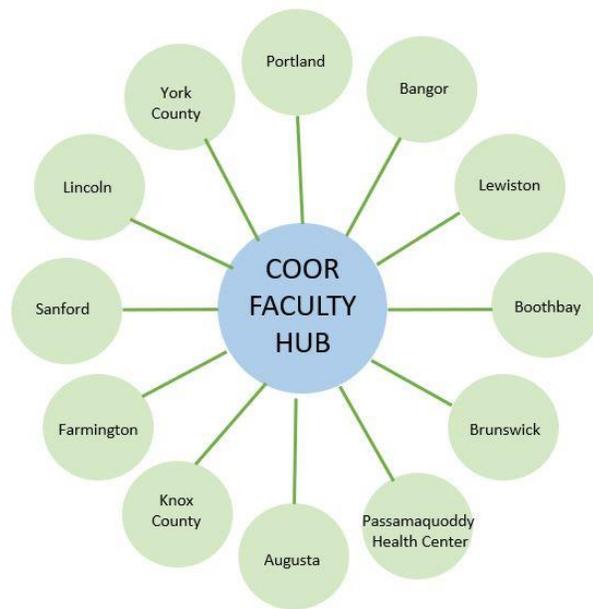
News, Events, and Opportunities

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February 2019

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We encourage you to share this newsletter with your communities to learn more about our Community Opioid Overdose Response (COOR) ECHO occurring with 12 communities across Maine.



The COOR ECHO project brings together leaders of key sectors within 12 local communities across Maine to work together to reduce opioid overdose deaths. The program leverages the resources and expertise of the Northern New England Practice Transformation Network (NNE-PTN) and the ECHO model to provide case-based, video-supported collaborative learning opportunities to work within and across communities to reduce opioid overdose deaths. It expands Project ECHO model from the traditional clinical model to a community-based, systems-oriented model, and builds on successful models from other regions to decrease opioid overdose deaths using a community-oriented approach.

The four focus areas of the COOR ECHO are:

- Collecting timely, local data on drug/opioid overdose deaths
- Improving OUD treatment capacity using rapid-access, low-barrier approaches
- Improving naloxone distribution
- Creating linkages with the SUD/OUD recovery community

To help you communicate your work on this effort, QC has created a COOR ECHO infographic. Please download and view our new [COOR ECHO infographic](#) and feel free to spread the word!

To learn more about the NNE-PTN COOR ECHO please visit:

## COOR ECHO Sessions

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### **COOR ECHO Session #5: Wednesday, February 20th 10:30am- 12noon**

- **Faculty presenter: Jesse Harvey**, CIPSS, RCA "Connecting with the Recovery Community to Reduce Drug Deaths"
  - **Community case presentation:** Maine General Medical Center, Brianne Karstens
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## Governor Mills Administration News

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### **Governor Mills appoints Gordon Smith as Maine's first Director of Opioid Response**

Governor Mills keeping her promise to address Maine's opioid epidemic. On January 24th, Governor Mills has named Gordon Smith, the current director of the Maine Medical Association (MMA), to take charge of the fight against opioid drugs. "He will work closely with members of medical communities, medical providers, treatment experts, law enforcement, educators, and members of the community to figure out what is working and what is not," Mills said.

Smith is a lawyer and has managed the MMA for almost 40 years. He says Maine needs to significantly expand drug treatment, and that more people need to understand the value of treating the addiction with other drugs, like methadone and suboxone. He stepped down from his position at the MMA on January 31 and has assumed the position of Opioid Response Director effective February 1st. He can be reached at [Gordon.smith@maine.gov](mailto:Gordon.smith@maine.gov)

To read more about Gordon Smith and this presse announcement, click the following link: [OpioidRespDir Announcement](#)

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### **Governor Mills 10 Point Opioid Plan**

From Gov Mill's webpage: In 2017, 952 drug-affected infants were born in Maine, according to the Department of Health and Human Services. In the last decade, 7,708 babies were born affected by drugs, 1,024 in 2016 alone, representing approximately 8 percent of all live births in Maine.

At least one person a day dies of a drug overdose, increasingly from heroin and fentanyl.

Two-thirds of the 368 drugged-driving traffic stops in 2016 tested positive for opioids, according to the Maine Health and Environmental Testing Lab: Analysis Maine Rural Drug and Alcohol Research Program at the University of Maine.

In 2015 an estimated 15,000 people received treatment for substance-use disorder in Maine, while another 25,000 could not get treatment because of a lack of capacity or lack of insurance.

There is no silver bullet to this complex problem, which is not simply a public safety or law enforcement matter, but a full-blown public health crisis that leaves thousands of children without a parent, communities devastated, employers without a healthy workforce, and families torn apart.

[Gov Janet Mills 10 Point Opioid Plan](#)

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## Educational Opportunities

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**Eric Haram, LADC**  
**SUD/ODU trainings**  
**February 2019**

**QC webinar: Friday, 2/8/2019, 12-1:00pm** - Evidenced-based Methods for Trauma-informed Care in the Treatment of SUD/ODU, presenter, Eric Haram, LADC

**Objectives:**

- \* Understand widespread impact of trauma and potential paths for recovery
- \* Recognize signs and symptoms of trauma in clients, families, staff, and others involved with the system of care
- \* Understand one or more specific evidence-based BH/SUD counseling methods that incorporate effective trauma-informed treatment methods
- \* Fully integrate knowledge about trauma into policies, procedures, and practices
- \* Seek to actively resist re-traumatization

Registration

link: [https://zoom.us/webinar/register/WN\\_ilaGtImJTOiWSgccmNOo\\_w](https://zoom.us/webinar/register/WN_ilaGtImJTOiWSgccmNOo_w)

**QC webinar: Friday, 2/15/2019, 12-1:00pm** - Addressing Substance Use Risk: Communicating Positive Substance Use Risk Screening Results, presenter Eric Haram, LADC

Contact [afox@mainequalitycounts.org](mailto:afox@mainequalitycounts.org) for information

**QC webinar: Friday, 2/22/2019, 12-1:00pm** - Improving Engagement and Continuation in SUD Treatment: Evidence-Based Practices for Assessment and Counseling, presenter Eric Haram, LADC

Contact [afox@mainequalitycounts.org](mailto:afox@mainequalitycounts.org) for information

These free, web-based trainings will offer a certificate of attendance (CME will not be available) for all individuals who view the live training. Links to the 2nd and 3rd trainings will be provided as soon as available and or by contacting [afox@mainequalitycounts.org](mailto:afox@mainequalitycounts.org)

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**Medications For Opioid Use Disorder: A Toolkit For Improving Practice  
TIP 63, Part 2  
QC webinar: Tuesday, February 6th - Noon to 1pm**

Please join us for the final part of this two-part QC "Caring for ME" webinar series that will introduce SAMHSA's recently-developed national guidelines, "TIP-63, Guidelines on the Use of Medications for Opioid Use Disorder" (also known as Medications for Addiction Treatment, or MAT). In the face of the still-growing epidemic of opioid use and overdose deaths, more clinicians are stepping up to offer medications for OUD in a range of practice settings, but often face questions about the specifics of treatment. These national guidelines offer evidence-based standards of care and are a "must-have" tool for clinicians providing these medications.

**OBJECTIVES:**

- Understand SAMHSAs goals, purpose for developing TIP63, Medications for OUD
- Describe general principles, approach to use of medications for OUD
- Understand indications, goals, key treatment principles for using methadone for OUD treatment

Speaker:  
Michelle Lofwall, MD, DFASAM

[To Register](#)

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**Half-and-Half Course for Buprenorphine Waiver Training**

The Integrated Medication Assisted Therapy (IMAT) Team is offering training for those interested in obtaining their waiver to prescribe buprenorphine for the treatment of opioid use disorder. To obtain the waiver to prescribe, physicians are required to take 8 hours of training.

MMC is offering the Half-and-Half format (3.75 hours of on-your-own-training and 4.25 hours of face-to-face training with an instructor).

At the end of the course, you will have earned a total of 8 AMA PRA Category 1 Credit(s)<sup>™</sup>. Physicians will be able to submit an application for the waiver. Advanced Practice Professionals will need to complete an additional 16 hours of on-line training to submit an application.

When: Wednesday, February 13, 2019 from 1 PM - 5:30 PM  
Where: Maine Medical Center; Dana Center, classroom #7  
8 AMA PRA Category 1 Credit(s)<sup>™</sup> available

Registration:

To register, please contact Cheryl Harris [charris@mainehealth.org](mailto:charris@mainehealth.org)

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### **ASAM: The Fundamentals of Addiction Medicine**

The ASAM Fundamentals of Addiction Medicine 40-Hour CME Program is an innovative educational program empowering primary care and other providers to diagnose and treat patients at risk for or with addiction.

- Over 40 CME hours of on-demand 24/7, interactive, case-based learning which addresses how to recognize, screen, treat and refer patients with addiction
- Translates the science of addiction medicine into transformative, positive outcomes for patients
- A program that provides the fundamental knowledge of addiction and allows participants to select topics based on interests and the needs of patients
- Designed for busy providers with content available in a variety of formats including online, on-demand 24/7, live, live video

Participants will learn to:

- Help patients that are already in your practice and be a part of the solution to the one of the nation's deadliest epidemics
- Increase knowledge, skills and confidence for providers who may have received little or no addiction education during their medical training
- Learn how to integrate addiction medicine and payment models into your existing practice
- Connect with a community of colleagues and mentors for additional support with complex patients
- Experience content created specifically for primary care and other providers based on extensive needs-assessment.
- Learn core competencies and knowledge needed to identify, treat, and refer patients with addiction to specialists when needed

When: Ongoing

Where: Online learning module

40-hour CME Program, [click here for details](#)

Cost:

- Regular ASAM member - \$695
- Student/Associate ASMA member - \$495
- Non-member - \$895

Registration:

[Click here to register.](#)

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**Harvard Medical School: Opioid Use Disorder Education Program  
(OUDEP) -  
3 course series**

Three courses make up the Opioid Use Disorder Education Program (OUDEP).  
The courses are as follows:

1. Understanding Addiction: Focuses on the fundamentals regarding the nature of addiction including the epidemiology of opioid use disorder, the chronic nature of OUD, the differences between dependence and use disorders, and

the neurobiology behind addiction. It also looks at the changing perceptions and current stigmas surrounding opioid use disorders.

Registration:

You must have a Harvard Medical School CME Online account. [Click here to register](#) and learn more.

2. Identification, Counseling, and Treatment of OUD: Focuses on best practices and treatment of OUD with different medications in addition to psychosocial approaches. It also addresses co-occurring psychiatric disorders as well as preventing and treating overdose.

Registration:

You must have a Harvard Medical School CME Online account. [Click here to register](#) and learn more.

3. Collaborative Care Approaches for the Management of OUD: Focuses on strategies that include provider roles and regulatory requirements, patient evaluation and education, and transitioning between medications. It also addresses potential misuse, relapse, and safer use, as well as caring for pregnant women and other special populations with OUD.

Registration:

You must have a Harvard Medical School CME Online account. [Click here to register](#) and learn more.

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## Resources

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### **New National Health Service Corps (NHSC) Substance Use Disorder Workforce Loan Repayment Program**

To combat the nation's opioid crisis, HRSA launched the NHSC Substance Use Disorder Workforce Loan Repayment Program (SUD Workforce LRP). The

most effective treatment for opioid addiction is a comprehensive approach that incorporates medication and behavioral health counseling. The program supports the recruitment and retention of health professionals needed in underserved areas to expand access to SUD treatment and prevent overdose deaths.

Applications will be accepted until February 21, 7:30 p.m. ET

For More Information, regarding this program: <https://nhsc.hrsa.gov/loan-repayment/nhsc-sud-workforce-loan-repayment-program.html>

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### **Maine Drug Announces the Launch of tip411**

Maine Drug Enforcement Agency investigations many times start with a tip from the public and now the agency has a new way for citizens to forward those tips, and do so anonymously.

MDEA Director Roy McKinney said the agency gets an average of two dozen tips a month from concerned Maine citizens about suspected drug activity and many of those tips results in seizures of drugs and arrests.

Developed by tip411, the Maine DEA app is available for download free via the Google Play Store, iTunes App Store, or by visiting the MDEA's website at [www.maine.gov/dps/mdea](http://www.maine.gov/dps/mdea).

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### **Online Learning Module: New Rules for Naloxone Dispensing, approved by the Maine Board of Pharmacy**

Naloxone Access: A Practical Guideline for Pharmacists  
Produced by the College of Psychiatric and Neurologic Pharmacists  
To view [click here](#)

When: Ongoing

Where: Online learning modules

Cost: Free

8 CME Credits available for each of the 3 courses

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## COMMUNITY COALITION "SPOTLIGHT"

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### Health Access Network (HAN)



As a Federally Qualified Health Center, HAN's leadership and staff are dedicated to the communities they serve, to treating each individual as a whole person without financial or social discrimination, and to remaining responsive and nimble to community needs and to changing times in health care. This is reflected not only in the growth of the organization over the years, but also in the growth of its programs and services, including primary care, behavioral health, dental services, walk-in care, occupational health, prenatal care, podiatry, care coordination, patient assistance/outreach and enrollment, lab, radiology and substance use treatment. Serving more than 12,000 patients annually across four counties.

**Compassion, Innovation, Integrity, and Excellence.** For 15 years, Health Access Network (HAN) has worked with these words in mind to provide high quality services to families across the counties of Penobscot, Piscataquis, Washington, and Aroostook.

HAN began providing limited Medication Assisted Therapy (MAT) in 2014. The organization's focus on this much needed program has only grown since its inception, and expanding this service has been identified as a key strategic priority in the years ahead. HAN currently has four clinicians with DATA waivers - the most the organization has ever had - and by May 2019 anticipates having six clinicians with DATA waivers. In order to address the growth of the program and the unmet needs that still exist in the community,

HAN is currently revamping its MAT efforts, which includes revisiting everything from patient flow and screening techniques to data collection and staffing models.

These efforts do not exist in a vacuum and the Greater Lincoln Area is fortunate to have engaged and active community members. HAN proudly serves on a local coalition, Save-A-Life, which is a substance abuse task force comprised of concerned citizens, pastors, medical and behavioral health professionals, and educators from the community. This group is a community catalyst dedicated to increasing awareness, education and engagement in addressing the substance use disorder epidemic and in reducing stigma for those living with these disorders.

In looking ahead, Health Access Network will continue to bring compassion, innovation, integrity, and excellence to this program, while looking to borrow inspiration and experience from its sister communities in the COOR ECHO initiative.

For more information on their community and school opioid initiatives, contact Chris Muffett at [cmuffett@hanfqhc.org](mailto:cmuffett@hanfqhc.org).

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## ARTICLES

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### **Opioid Death By The Numbers (CNN)**

#### **Odds of dying from accidental opioid overdose in the US surpass those of dying in car accident**

For the first time on record the odds of accidentally dying from an opioid overdose in the United States are now greater than those of dying in an automobile accident.

The grim finding comes from the National Safety Council which analyzed preventable injury and fatality statistics from 2017.

The NSC also found the lifetime odds of death for this form of overdose were greater than the risk of death from falls, pedestrian incidents, drowning and fire.

Mass drug overdose in California kills 1 person and leaves 12 more hospitalized. Examining a variety of federal and state data the NSC found the lifetime odds of dying from an accidental opioid overdose were 1 in 96. For motor vehicle accidents the odds were 1 in 103 and 1 in 114 for falls. The lifetime odds of suicide were greater, at 1 in 88.

The NSC highlights, however, that the odds given are statistical averages over the whole US population and do not necessarily reflect the chances of death for a particular person from a particular external cause. In addition they are lifetime odds, based on dividing the one-year odds by the life expectancy of a person born in 2017.

[To read this article, click here.](#)

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**"Don't Give up on them': 5 Years After a Brunswick Man Loses His Fight with Addiction, a Mother reflects on Maine's battle with the Opioid epidemic"**  
**Hannah LaClaire**

BRUNSWICK - P. Lynn Ouellette can't help but laugh when she remembers the time her son tried to convince her that pumpkin bread should be a vegetable. He was so adamant, so persuasive, she almost agreed with him.

Growing up, Brendan was a charmer, she recalled, smiling at the way her little boy would point and wink at strangers on the street or go over to the neighbors' house for a visit before they were even awake. He was the kind of kid who took the motor out of his mom's electric mixer because he had other plans for it.

And while she smiles when she thinks about her exuberant boy, who was somehow too big for every room, those memories are accompanied by waves of grief. Brendan died from an accidental heroin overdose 5 years ago, just a month shy of his 23rd birthday.

[To read this article, click here](#)

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**Kennebunk Police Department Moves from Cuffing to 'Coaching'  
as Drug Epidemic Rages on  
Zach Blanchard**

The Kennebunk Police Department announced it is launching a new program aimed at combating the drug crisis by "coaching" those struggling with addiction.

The Recovery Coach training will arm officers with the tools necessary to connect with those individuals, get them the help they need and support them throughout the process.

[To read this article, click here.](#)

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**After Surgery in Germany, I Wanted Vicodin, Not Herbal Tea  
Firoozeh Dumas**

MUNICH - I recently had a hysterectomy here in Munich, where we moved from California four years ago for my husband's job. Even though his job ended a year ago, we decided to stay while he tries to start a business. Thanks to the German health care system, our insurance remained in force. This, however, is not a story about the benefits of universal health care.

Thanks to modern medicine, my hysterectomy was performed laparoscopically, without an overnight hospital stay. My only concern about this early release was pain management. The fibroids that necessitated the surgery were particularly large and painful, and the procedure would be more complicated.

I brought up the subject of painkillers with my gynecologist weeks before my surgery. She said that I would be given ibuprofen. "Is that it?" I asked. "That's what I take if I have a headache. The removal of an organ certainly deserves more."

[To read this article, click here.](#)

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## OTHER

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### Documentary:

#### "Recovery Boys"

Recovery Boys follows four residents (Jeff, Rush, Adam, and Ryan) during their time at Jacob's Ladder and shortly after completing the program. The documentary shows the reality of the addiction epidemic from a personal perspective - highlighting the residents' individual struggles and the struggles of their loved ones.

It is beautifully shot, edited, and produced by West Virginia natives Elaine McMillion Sheldon and Kerrin James Sheldon.

There will be a viewing of this documentary on Sunday, Feb. 10, at Boothbay Region High School auditorium, 236 Townsend Ave. in Boothbay Harbor.

You can view the entire documentary on Netflix, here: [netflix.com/recoveryboys](https://netflix.com/recoveryboys)

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## COOR E-Newsletter survey feedback opportunity

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### **Northern New England-Practice Transformation Network (NNE- PTN) Community Opioid Overdose Response (COOR) ECHO Program E-Newsletter Feedback Survey**

The team at Maine Quality Counts has been putting together a monthly e-newsletter for COOR ECHO participants. We are looking for feedback from all of the COOR community to help us improve this newsletter to better meet the needs of COOR ECHO.

Please complete this short, 6-question survey.

[Click here to complete the survey.](#)

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## COOR Faculty Information

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### COOR FACULTY

Please click the following link to learn more information regarding the COOR Faculty team. To read the COOR faculty Bios, [click here](#).

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## Our Contact Information

### NNE-PTN Community Opioid Overdose Response (COOR) Project ECHO

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For more information on other programs, visit: [Maine Quality Counts Website](#)

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