

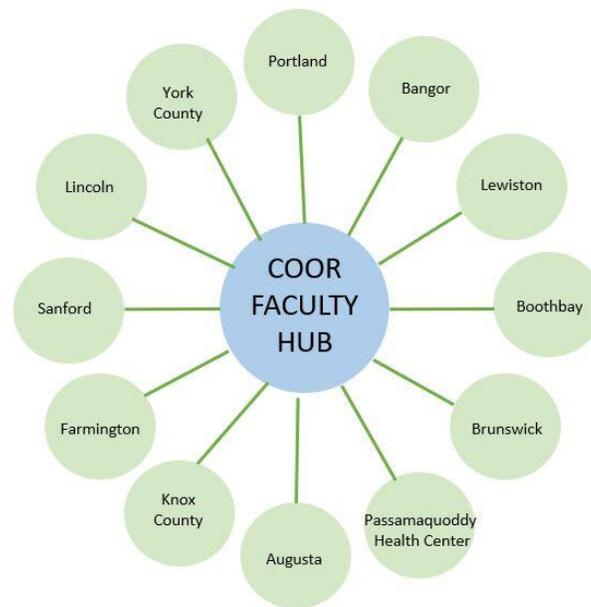


Northern New England-Practice Transformation Network (NNE- PTN)
Community Opioid Overdose Response (COOR) ECHO Program
NEWSLETTER

News, Events, and Opportunities

March 2019

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:

www.mainequalitycounts.org

COOR ECHO Sessions

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

- **Faculty presenter:** Eric Haram, LADC - Connecting People to Rapid Access, Low-barrier SUD/ODU Treatment.
- **Community case presentation:** UNE Coastal Healthy Communities Coalition; Laura Overton

Governor Mills Administration News

Governor Mills Signs Executive Order Directing Immediate Action to Combat Opioid Epidemic

Mills announces she will sign Financial Order to purchase and distribute lifesaving, anti-overdose medication and train hundreds more Recovery Coaches

Augusta, MAINE - Governor Janet Mills today signed an Executive Order directing her Administration to take immediate steps to combat the opioid crisis. The Order outlines the initial actions that will be taken by the Administration, as overseen by Gordon Smith, the Director of Opioid Response, to prevent overdose deaths, increase treatment and recovery efforts, and bolster prevention efforts - all of which will be done in a manner to reduce the stigma associated with substance use disorders. The Order will supplement the vigorous

efforts of law enforcement at all levels to stem the tide of drug trafficking into Maine.

In support of the Executive Order, Governor Mills announced that she will also sign a financial order directing the Office of Substance Abuse and Mental Health Services (SAMHS) to purchase 35,000 units of the life-saving, anti-overdose medication naloxone using available federal and state funds and distribute it to health entities across the state. The order also directs the use of SAMHS funds to train 250 Recovery Coaches and to fund a full-time recovery coach in 10 emergency departments across the state to facilitate the movement of more people into treatment programs. Both actions can immediately help save lives.

To read Executive Order, Click this

<https://www.maine.gov/governor/mills/news/governor-mills-signs-executive-order-directing-immediate-action-combat-opioid-epidemic-2019-02>

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](#)

Naloxone Survey Form

The State of Maine under the Mills Administration is offering a new form to fill out and an organization is able to receive naran kits and naloxone. The target start for this program is April 1. The distribution will be by the city of Portland and the University of Maine.

Feel free to share this information with others. The goal is to get as much naran/naloxone to as many locations as possible as quickly as possible.

Below is the link to print this new form.

<https://www.maine.gov/dhhs/samhs/forms.shtml>

Once completed, please either fax this form back to (207) -287- 9152 or email it to SAMHSAdmin.DHHS@maine.gov

Educational Opportunities

**Maine Behavioral Health Workforce Development Collaborative:
"Reducing Stigma When Working With People Who Use Drugs "
Presented by Maddy Magnuson
Health Equity Alliance
Friday, April 26, 2019 ~ Augusta**

Inherent in the way we talk about things is how we think of those same things. When we use words like "clean" we necessarily imply that the opposite is "dirty." Substance Use Disorder continues to be a highly stigmatized medical condition despite the many advancements in neurobiology and a fuller understanding of

social and environmental determinants of health. In spite of these many advancements, people with a Substance Use Disorder continue to report high rates of discrimination from medical providers, denial of services from government entities, and continued targeting by law enforcement. The ramifications of stigma in care environments are manifold and further compound the opioid crisis. During this workshop participants will explore personal biases related to drug use and the way that these emerge in language, the ramifications of stigma against people who use drugs and how to create and affirming environment that will enhance care for people who use drugs.

Participants who successfully complete this workshop will:

- Explore personal biases related to drug use.
- Understand the history of stigma connected to drug use in cultural context
- Understand diversity in drug use
- Explore the reasons people use drugs
- Explore cultivation of an affirming environment

Friday, April 26, 2019

12:30 PM - 4:30 PM

Check-in begins at 11:45 AM

Light Lunch will be served during check in period

Augusta Civic Center, 76 Community Drive, Augusta

\$45 Registration Fee

Light lunch, workshop attendance and continuing education credit included.

Save \$10 if you PAY by April 24, 2019- Early Bird fee \$35

4.0 Continuing Education Credits -For more information on credits offered

*Please Note: if you arrive late or leave early, you MUST sign out to receive a certificate and AdCare will need to adjust your certificate to reflect time.

Certificates will be available at the end of the day, please pick them up at the registration table as a way to confirm your attendance.

[For More Information and to Register](#)

Rx Drug Abuse & Heroin Summit - April 22-25 in Atlanta, Georgia:

The Rx Drug Abuse & Heroin Summit convenes a national collaboration of stakeholders from Federal to family to discuss what's working in opioid overdose prevention and treatment. Be part of the international discussion on addressing the opioid crisis at the 2019 Rx Drug Abuse & Heroin Summit April 22-25, 2019 in Atlanta, Georgia.

[For more information and to register](#)

Funding Opportunity

New Rural Communities Opioid Response Program Funding Opportunity

HRSA's Federal Office of Rural Health Policy has released the Notice of Funding Opportunity for a new Rural Communities Opioid Response Program (RCORP) initiative called RCORP-Implementation (HRSA-19-082). HRSA plans to award approximately 75 grants to rural communities as part of this funding opportunity.

You can review the [funding opportunity at grants.gov](#).

Successful RCORP-Implementation award recipients will receive up to \$1 million for a three-year period of performance to enhance and expand substance use disorder (SUD), including opioid use disorder (OUD), service delivery in high-risk rural communities. Award recipients will implement a set of core SUD/OUD prevention, treatment, and recovery activities that align with the U.S.

Department of Health and Human Services' (HHS) [Five-Point Strategy to Combat the Opioid Crisis](#) (PDF - 76 KB).

[To Read the press release](#)

Resources

**California Improvement Network (CIN) Toolkit: Three Strategies to Help
Primary Care Teams Treat Substance Use Disorders -
Proven strategies, best practices, and tools to expand care team capability
By
Crystal Eubanks, Senior Manager of Practice Transformation, California
Quality Collaborative**

This toolkit identifies the 3 developmental phases of MAT implementation and the strategies, actions that are needed.

- Phase 1: Starts with a small, specialized "MAT Care Team" consisting of at least two MAT prescribers who can be either internal to the practice or "contracted with an external addiction specialist provider in the community or via telemedicine"
- Phase 2: Then expand to "Engage Other PCPs", where "stabilized patients are transitioned back to PCPs" who are X-waivered.
- Phase 3: Transition to engage a broader set of primary care clinicians that offer MAT in the practice for "treatment of mild-to-moderate addiction", who then refer back to the "Internal SUD Specialty Team" for patients who need more support. [To view this toolkit, click here](#)

**National Institute on Drug Abuse
Revised January 2019**

Every day, more than 130 people in the United States die after overdosing on opioids.¹ The misuse of and addiction to opioids-including prescription pain relievers, heroin, and synthetic opioids such as fentanyl-is a serious national crisis that affects public health as well as social and economic welfare. The Centers for Disease Control and Prevention estimates that the total "economic burden" of prescription opioid misuse alone in the United States is \$78.5 billion a year, including the costs of healthcare, lost productivity, addiction treatment, and criminal justice involvement.

[To read more, click here.](#)

Interactive map to locate Naloxone

This interactive map, enables people to find places where Naloxone is offered in their area.

Find Naloxone near me:

<https://opioidepidemic.maps.arcgis.com/apps/webappviewer/index.html?id=153b0c32fefc432eae6a0e8439b9f56b>

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

COMMUNITY COALITION "SPOTLIGHT"

Maine General Medical Center Partners for Recovery Project

The Partners for Recovery (PFR) project will reduce the impact of OUD by strengthening and expanding partnerships, increasing treatment capacity and implementing systems related to screening and referral for OUD. The PFR project will address the opioid epidemic by examining the underlying stigmas of OUD that impact both individuals accessing services and the availability of treatment providers. PFR is an innovative project bringing together families, community leaders, law enforcement, peer recovery programs, social service

organizations, behavioral health professionals and medical providers to integrate and enhance current OUD initiatives that co-exist across the Central District, but that are disconnected. Integration will result in healthcare and behavioral health professionals, law enforcement, and peer recovery programs consistently screening and referring individuals with OUD to appropriate services using a single centralized referral "Hub". This Hub will track all treatment and support services available locally to individuals and family members with OUD, including peer recovery programs as well as Medication Assisted Treatment (MAT) providers. The project will provide ongoing healthcare professional training to increase and maintain a competent network of providers, to meet the needs of this rural population as a result of the growing opioid epidemic. The project will also support healthcare systems to implement workflow changes that enhance screening of OUD and care coordination. Workflows for opioid overdose risk screening and prescribing of naloxone, the drug that reverses opioid overdose, will be implemented in clinical healthcare and substance use treatment settings.

To view slides of this: [Please click here.](#)

ARTICLES

**Kennebec Journal Article -
"Maine Millennial: Recovery Shouldn't Depend on Luck
When the Columnist Faced Addiction, She was Fortunate to be
Surrounded by Support and Forgiveness"
by Victoria Hugo- Vidal**

Sometimes I wonder how close I might have come to opioid addiction. One night in the fall of 2015 - when the epidemic was starting to filter into our collective minds - I went to the emergency room after experiencing severe lower abdominal pain and was, after several hours, diagnosed with a ruptured ovarian cyst. Painful, but (for me) ultimately harmless. I got a dose of painkillers at the hospital, which made me feel warm and fuzzy and then, a few hours later, extremely nauseated. I spent the car ride home with my head hanging out of the window like a dog, because the cold air made me feel better.

The hospital sent me home with a full bottle of hydrocodone.
[To read this article, click here.](#)

**Boston Herald Article -
"Ex-pharma CEO Pleads Guilty to Kickbacks to Doctors for Opioid
Prescriptions"
By Jonathan Ng**

A former pharmaceutical chief executive pleaded guilty to playing a part in a sophisticated scheme to give kickbacks to doctors who prescribed his company's fentanyl-based opioid drugs - a move one top lawyer said is one step toward the goal of cutting down the corrupt greed that's "alive and well in the pharma business."

Michael Babich, the former CEO at Insys Therapeutics, pleaded guilty in federal court in Boston on Wednesday for his role in a nationwide scheme to bribe physicians to prescribe the company's oral-spray painkillers meant for cancer patients facing extreme pain.

"It is very important that companies like Insys be held responsible for corrupting the medical community, as well as endangering and sometimes killing innocent patients," said attorney Mike Moore, who's leading some efforts to sue pharmaceutical companies two decades after securing a massive settlement against tobacco companies.

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

OTHER

**Maine Public Radio, "Gordon Smith: Maine's New Opioid Response
Director Discusses His Priorities and Plans"**

On February 19th. Gordon Smith was interviewed on Maine Calling about his priorities and plans as the Opioid Response Director.

As Maine's first director of opioid response, Gordon Smith is tasked with coordinating state efforts to combat the opioid epidemic. Smith will be Mills' point person for coordinating interagency efforts to address Maine's opioid crisis, which continues to claim an average of more than one life every day.

[To Listen to this Interview, click here](#)

COOR E-Newsletter survey feedback opportunity

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.](#)

COOR Faculty Information

COOR FACULTY

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

Our Contact Information

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

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