



COP - RCORP

Communities of Practice for Rural Communities Opioid Response Program

Consortium Meeting

January 28, 2020--1:00-2:30pm

ZOOM: <https://zoom.us/j/406141526>

Phone only: Dial (646) 876-9923; enter meeting ID: 406 141 526

1:00-1:05

Welcome, roll call and attendance

Matt Courser

OU: Holly, Laura, Nicole, Carrie. PIRE: Matt, April, Casey. Ashtabula: Miriam, Patricia. Fairfield: Josh. Sandusky: Stacey, Charlotte. Seneca: Nicole, Robin. Washington: Hilles Hughes

1:05-1:15

Telling our story—COP-RCORP as an innovation

Matt Courser

Discussion on what is unique/different about this consortium. Ashtabula: We've done collaboration work before, but the collaboration is different where we have technical guidance but also a shared collaboration. We look at each other as experts. The collaboration between counties -able to share back and forth on an equal playing field. Seneca: It's awesome to see the counties able to work together and collaborate on strategies. The technical assistance we've received is awesome. We don't get that in every project we work on. Sandusky: I like that we have this wraparound approach. We are treading in territory where we don't lead, so it's helpful to have support.

Reactions to Public Health Practice vignette. Washington – I think this will be helpful when I talk to other people about how we are involved in this project. Ashtabula – I'm a little disturbed that AJP doesn't think substance use disorder is a public health problem. OUD issues are inside our county CHIP as a public health concern. It's good information and we should publish it wherever we can. PIRE – To clarify, the editor didn't think it was not important, just that we should publish in something specific to rural health where it may have more impact. Fairfield – I thought you made a good argument of the significance to public health. Sandusky – Thank you to you guys for putting us in a position where we're able to learn at a level with PIRE and OU.

1:15-1:25

COP-RCORP Workplan Review and Y1 priorities

Matt Courser

Our focus is getting to action and making progress on the activities we identified as priorities for Year 1 when we met in November. Reviewed workplan, including building in local priorities.

1:25-1:35

Tracking progress on COP-RCORP Year 1 priorities

Holly Raffle

Conversation on tracking process and tracking tool. Sandusky – I liked it and it was easy to know what to write where. Seneca – I don't think we had any difficulty using the form. OU – Has the tool been useful for communicating with your local consortium. Sandusky – I was able to go to one of our public health nurses and touch base with her on her activity (like a check-in mechanism). Washington – we use it to provide structure to our subgroups and keep everyone on track. Fairfield – It's been helpful in terms of checking our own progress and keeping us on track. (Fairfield) – Toni worked with the tool, so not sure how she utilized it or what her process is with this tool. OU – we encourage you to make this meaningful to you and not just a compulsory form to fill out.

1:35-1:45

February 2020 COP-RCORP Community update: Naloxone

Holly Raffle & COP-RCORP Members

Conversation on sharing process. For February, please prepare a 5-minute update on local consortium's progress on Naloxone Distribution. Send slides to Carrie by 2/18/2020. Communities felt comfortable with this ask. OU clarified that if there is no work to report, you can report your planning process.

HRSA confirmed that as long as we are meeting the requirements, communities can free up funds to meet other pressing issues in the community, such as methamphetamine use. As long as we are addressing stigma against MAT, we can look at stigma in other areas (foster care, general treatment, etc).

1:45-2:05 Operationalizing RCORP Core Activities through workgroups Laura Milazzo, Carrie Burggraf, April Schweinhart, & COP-RCORP Members

Laura outlined the prioritized collaborative activities and outcomes for CLAS standards and provided a brief overview of what CLAS standards are. PIRE presented the website tools and where resources will be located. OU reviewed the logistics and scope of the workgroup. Kick-off early February, complete a self-assessment, engage OhioMHAS, meet every-other week via Zoom, and completing assignments in between meetings. Will have a co-created deliverable by the end of March, based on group discussion.

Conversation on workgroup. Fairfield – We wanted someone from the Board, someone who can provide a treatment perspective, and a health department perspective. Sandusky – we chose people who are already familiar with CLAS standards and have done work on developing policy surrounding CLAS standards.

We have not yet identified a date/time that works for everyone in the workgroup. We are putting forward some additional dates/times to consider. Scheduling leads agreed to find a good time. **Please return your availability by noon on Thursday so that we can get this scheduled.**

2:05-2:15 RCORP-I performance measures: update and timeline Nicole Yandell & COP-RCORP Members

Seneca introduced the HRSA performance measures and the timeline for the March submission. Reporting for Year 1 is due March 31st and September 30th.

2:15-2:20 RCORP-I Performance measures: Considerations for MOAs and subKs Matt Courser

Matt outlined requirements for reporting on subcontracts/MOAs with service providers using HRSA dollars.

2:20-2:30 Wrap-up, support needs, next steps Reverse site visit attendance; utilization of JBS TA resources Matt Courser & COP-RCORP Members

PIRE will report to NHSC program the feedback communities provided regarding a lack of outreach by the NHSC program. There will be opportunities this spring to apply. We're hopeful we can bring them in for an event.

Is anyone from the consortium planning to attend the reverse site visit in March? No one currently. If you decide to attend, please let us know.

Any feedback on JBS TA resources/tools? Fairfield – I have not used them. Would like access. PIRE pulled up the JBS TA portal where the webinars are archived.

Handouts:

1. Project workplan
2. AJPB Public Health Practice Vignette
3. Slide deck

Concrete Action Steps:

1. Review your organization's other OUD/SUD funding (federal, state, local) and notify Matt and Holly of changes
2. Think about your consortium's next steps on workforce development and sustainability
3. Consider how your consortium's work impacts the affordability and accessibility of OUD/SUD services in your community.

Suggested Deadline Reminders:

1. By February 25, 2020: Naloxone/harm reduction slide update due to your TA provider

Next Meeting: February 25, 2020, from 1:00pm until 2:30pm