

# **RCORP-Overdose Response**

## **Grantee Directory**

### **2023 Cohort**

**Developed by JBS International, Inc.**

**October 2023**

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**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Alabama
<b>Organization Type:</b>	Behavioral Health Provider, Substance Use Disorder Treatment Provider
<b>Website:</b>	<a href="https://altapointe.org/">https://altapointe.org/</a>
<b>Address:</b>	351 West 3rd Street, Sylacauga, AL 35150

**Grantee Points of Contact:**

<b>Project Director:</b>	Debra Campbell, <a href="mailto:dcampbell@altapointe.org">dcampbell@altapointe.org</a>
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**Target Service Area(s):**

County, State	
Clay County, AL	Coosa County, AL
Talladega County, AL	

**Project Information:**

Project Summary
<p>AltaPointe plans to purchase fentanyl test strips and naloxone to initiate a basic level of harm reduction among the target population. The plan is to develop a relationship with a local pharmacy that can dispense suboxone as well as utilize our providers in the clinics to administer injectable Sublocade. Our project coordinator will be able to navigate to uninsured patients to find appropriate coverage for treatment. AltaPointe Health Systems (AltaPointe) will utilize its telehealth infrastructure to improve the availability of excellent remote services, removing barriers to care and encouraging adherence to treatment plans. After all other resources have been exhausted, AltaPointe will provide transportation to those who need services and have no other transportation options. AltaPointe will establish social services to support individuals in recovery, such as assistance with transportation to and from treatment and counseling, as well as connections to recovery-friendly employment opportunities.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating their placements in local SUD/OD service delivery sites, such as emergency departments (EDs), primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/OD
- Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery-friendly employment opportunities, etc.

**Intended Audience**

<b>Age:</b>	Adolescents (13-17), Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	Racial and ethnic minorities, Veterans, Justice-involved/incarcerated persons, People who use drugs
<b>Other:</b>	Families and caretakers of people with OUD/SUD, Healthcare workers and providers, Law enforcement and first responders

### Organizational Information:

<b>Project Title:</b>	Arkansas Rural Opioid Use Team Education Overdose Response Program (AROUTE-OR)
<b>State:</b>	Arkansas
<b>Organization Type:</b>	Nonprofit
<b>Website:</b>	<a href="http://www.abhinetwork.org">www.abhinetwork.org</a>
<b>Address:</b>	44 Kings Highway, Eureka Springs, AR 72632

### Grantee Points of Contact:

<b>Project Director:</b>	Kim Shuler, kim.shuler@abhinetwork.org
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### Target Service Area(s):

County, State	
Baxter County, AR	Boone County, AR
Carroll County, AR	Clay County, AR
Cleburne County, AR	Cross County, AR
Fulton County, AR	Greene County, AR
Independence County, AR	Izard County, AR
Jackson County, AR	Lawrence County, AR
Madison County, AR	Marion County, AR
Mississippi County, AR	Newton County, AR
Poinsett County, AR	Randolph County, AR
Searcy County, AR	Stone County, AR
Sharp County, AR	Van Buren County, AR

## Project Information:

### Project Summary

The Arkansas Rural Opioid Use Team Education Overdose Response program (AROUTE-OR) was developed in response to immediate needs in the target area for increased access to SUD services in North Arkansas. The 1-year project will build the capacity of 10 EDs by implementing a 9-hour training and placement program that connects participating EDs with peer recovery support specialists (PRSS) working in the region. During the first 4 months (December 2023 – March 2024), physician, peer, and behavioral health trainers will provide virtual training—with continuing education units (CEUs)/continuing medical education (CME)—for ED/hospital staff and PRSS. After training completion, peers will be funded to work an estimated 6–7 hours per week in participating EDs (April 2024 – August 2024). During this time, medical and peer consultants will provide support for ED/hospital staff as they integrate peer services, develop and refine workflows, and train non-peer staff on the value and scope of peer services and best practices in SUD prevention, treatment, and recovery. Program staff will also support EDs/hospitals in sustainability planning by providing support for data collection/reporting to demonstrate the impact peer services have on SUD outcomes.

### Focus Areas/Selected Allowable Activities

- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD

### Areas Where We Would Like to Serve as a Peer Mentor

- Behavioral health integration

### Areas Where We Would Welcome Technical Assistance

- Harm reduction
- Stigma reduction

### Intended Audience

General population

**Organizational Information:**

<b>Project Title:</b>	Decreasing Overdoses in Northeast Georgia (DOiNG)
<b>State:</b>	Georgia
<b>Organization Type:</b>	Institution of Higher Education
<b>Website:</b>	<a href="http://www.augusta.edu">www.augusta.edu</a>
<b>Address:</b>	1120 15th Street, CJ-2300, Augusta, GA 30912

**Grantee Points of Contact:**

<b>Project Director:</b>	Catherine Clary, <a href="mailto:cclary@augusta.edu">cclary@augusta.edu</a>
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**Target Service Area(s):**

County, State	
Banks County, GA	Elbert County, GA
Franklin County, GA	Habersham County, GA
Hart County, GA	Jackson County, GA
Rabun County, GA	Walton County, GA
White County, GA	

**Project Information:**

Project Summary
DOiNG will address the area's critical needs, including access to 1) overdose prevention supplies, 2) peer recovery support specialists, 3) medication assisted treatment (MAT), and 4) local recovery community organizations (RCOs). We will help develop an RCO in Elbert County with our partner, Georgia Council for Recovery.



**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certifications, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/OD
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing a recovery community organization
- Providing community-based screenings for SUD/OD and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- Developing recovery care organizations
- Peer recovery
- General questions about Health Resources and Services Administration (HRSA) RCORP program
- MAT

**Areas Where We Would Welcome Technical Assistance**

- Billing and sustainability
- Advancements in medication and/or testing for OUD

**Intended Audience**

<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Special Populations:</b>	Justice-involved/incarcerated persons, People who use drugs
<b>Other:</b>	People with low health literacy

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Montana
<b>Organization Type:</b>	FQHC
<b>Website:</b>	<a href="https://www.onechc.org/">https://www.onechc.org/</a>
<b>Address:</b>	10 4th Street W, Suite B, Hardin, MT 59034

**Grantee Points of Contact:**

<b>Project Director:</b>	Sarah Maisel, sarah.maisel@onechc.org
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**Target Service Area(s):**

<b>County, State</b>
Dawson County, MT

**Project Information:**

<b>Project Summary</b>
Bighorn Valley Health Center, Inc., dba One Health ("One Health"), a Federally Qualified Health Center (FQHC) in rural Montana and Wyoming, is applying for Rural Communities Opioid Response Program-Overdose Response (RCORP-OR) funds to improve access to SUD/OD treatment services in a rural county in eastern Montana. We propose to create a new SUD/OD treatment service line in our primary care site in Glendive, MT, offering care to patients through a hybrid model, including virtual care and on-site paraprofessionals.
<b>Focus Areas/Selected Allowable Activities</b>
<ul style="list-style-type: none"> <li>Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.</li> <li>Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services</li> <li>Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.</li> </ul>
<b>Areas Where We Would Like to Serve as a Peer Mentor</b>
<ul style="list-style-type: none"> <li>Recovery services</li> </ul>
<b>Areas Where We Would Welcome Technical Assistance</b>
<ul style="list-style-type: none"> <li>Mobile services</li> </ul>

Intended Audience	
<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis)
<b>Health Access:</b>	Medically underserved
<b>Special Populations:</b>	Pregnant and parenting people

### Organizational Information:

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Idaho
<b>Organization Type:</b>	FQHC
<b>Website:</b>	<a href="https://www.kchnorthidaho.org/">https://www.kchnorthidaho.org/</a>
<b>Address:</b>	301 Cedar Street, Suite 205, Sandpoint, ID 83864

### Grantee Points of Contact:

<b>Project Director:</b>	Kevin Knepper, kevin@kchni.org
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### Target Service Area(s):

County, State	
Bonner County, ID	Boundary County, ID

### Project Information:

#### Project Summary

RCORP funds will support staffing the mobile clinic to provide critical outreach and prevention services to the rural area, which will include distribution of fentanyl test strips, naloxone, and SUD/OD treatment services. The new staff builds capacity within the behavioral health program, increasing access to care aimed at reducing morbidity and mortality of SUD and OUD. The staffing plan includes a certified MAT primary care provider and a chemical dependency counselor. The mobile clinic will operate at least 2 days per week in the field, with the possibility to expand hours as needed. When not in the mobile unit, staff will work at one of the three Kanisku Community Health sites.

#### Focus Areas/Selected Allowable Activities

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/OD in the target rural service area

**Areas Where We Would Welcome Technical Assistance**

- We could use knowledge gained from experience around meaningful and effective scheduling for mobile bases services. We need to schedule in order to reach a larger patient base due to the rural nature of the program.

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Oklahoma
<b>Organization Type:</b>	Community-Based Organization
<b>Website:</b>	<a href="https://www.cherokeeconomyhealthservicescouncil.org/">https://www.cherokeeconomyhealthservicescouncil.org/</a>
<b>Address:</b>	135 N Muskogee Ave, Tahlequah, OK, 74464

**Grantee Points of Contact:**

<b>Project Director:</b>	Rozlyn Locust, rozlyn.locust.cchsc@gmail.com
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**Target Service Area(s):**

<b>County, State</b>
Cherokee County, OK

**Project Information:**

**Project Summary**

The Cherokee County Health Services Council (CCHSC) Rural Community Opioid Response Program has made great strides in increasing knowledge, access, and care for individuals with SUD/OD in northeastern Oklahoma. However, there is still much to be done.

Currently, CCHSC directs an RCORP implementation and RCORP behavioral health grant serving Cherokee County (a third grant supports RCORP implementation in Delaware County). These grants work to inform and educate residents about naloxone, stigma reduction, treatment options and recovery, provide training for behavioral health staff and transportation for clients, and contribute to the support of two MAT treatment facilities—Addiction Recovery Center (ARC) and NEO Health in Cherokee County.

A new partner to the area is the Working to Recover Assist and Prevent (WRAP) program, a social service entity supporting individuals in recovery and those averted from or recently released from incarceration. Supplies and equipment purchased through this opportunity will be used to support RCORP partners and OUD/SUD activities in Cherokee County, Oklahoma.

Each of the tasks under these allowable activities will serve residents of Cherokee County. Cherokee County is 1 of 14 counties in the rolling hills of northeast Oklahoma that constitute the Cherokee Nation and vies with the Navajo Nation to carry the title of the largest Native American Tribe in the U.S. The county population of 47,627 lives within 749 square miles. Within its boundaries, Cherokee County has about 20 U.S. census "places," with the largest 12 having a population between 495 and 15,753. Tahlequah (population 15,753) is the county seat, the largest town, and the capital of the Cherokee Nation.

## Focus Areas/Selected Allowable Activities

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing a recovery community organization
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/OD and related infectious disease

## Areas Where We Would Like to Serve as a Peer Mentor

- Native Americans — Cherokee County has many Native American residents who carry a more significant poverty burden than their non-Native counterparts. The overall poverty rate for the county is 21.8%, higher than rates for the state (15.6%) and nation (11.6%). For Native Americans (single race only), the rate is closer to 29%. The compounding impact of poverty and racism on the lives of American Indian communities is exemplified by longevity and lifespan. American Indians have the shortest life expectancy of all groups—73.0 years, compared to 78.5 years for all other races. This poor finding is partly due to a lack of access to quality health care. Even now, the Indian Health Service (IHS) is underfunded. A 2017 report from the Governmental Accounting Office (GAO) states that when comparing IHS with the Veterans' Administration (the most similar agencies in that both are funded through Congress and have capped expenses and directly operate health care facilities), the IHS per capita spending was 38% of that spent on veterans (\$4,078 compared to \$10,692 for the VA). Comparing budget items across the federal budget shows that most Indian-related spending areas continue to lag behind their non-Indian counterparts.
- Elders, veterans, individuals with disabilities — In Cherokee County, 17.8% of the population is 65 years or older, 15% are persons living with a disability, and 7.2% are veterans. Commonalities across these groups are the use of pain medications due to chronic conditions and living with a disability or a military injury. Until recently, pain medication was easily acquired. American Indian residents could access medicines at no cost through the IHS, and doctors were unregulated regarding prescriptions for opioids. This has significantly changed; however, elders are still prescribed powerful medications

and are frequent targets for thieves (often friends and family members) who take advantage of easy drug access. Elders are also at risk for addiction if they cannot manage their medications without supervision. Sometimes, elders in poverty who need the money will purposefully engage in drug dealing to get survival funds.

- **Recently Incarcerated** — Oklahoma is second in the nation for number of incarcerated women, and drug offenses are the most prevalent offense, at 45%. Researchers have identified a consistent finding of increases between the percentage of females being arrested for drug offenses and the rate of females convicted for drug offenses. In contrast, the opposite is true for males. In Cherokee County, the jail is a medium-security level county jail housing both men and women awaiting sentencing or serving a sentence of 1 year or less. The facility averages 5460 bookings annually (11.2% of the county population), with a daily average of 273 inmates. Based on private discussions with employees of the Indian Child Welfare Act and the U.S. Department of Health and Human Services, approximately 60 women per month are referred to the courts. In each case, substances and/or domestic violence are involved. Data from the District Attorney's office regarding non-Native females show that Cherokee County convicted 52 females of misdemeanor drug charges in 2021-2022. Another 23 were convicted on felony drug charges. Women in both these groups were placed on probation. Eleven women were sent to prison on drug-related charges.

### Areas Where We Would Welcome Technical Assistance

- Community-based screenings reduce stigma by allowing individuals to access services in a safe or neutral space. Based on needs assessment findings, stigma is perhaps the greatest barrier to accessing care. By offering self-testing kits, in tandem with other types of services, community members have access to testing and referral information for subsequent help they may need.

### Intended Audience

<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD
<b>Health Access:</b>	Medically underserved
<b>Special Populations:</b>	People who use drugs



## Organizational Information:

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Arizona
<b>Organization Type:</b>	FQHC
<b>Website:</b>	<a href="https://cchci.org/">https://cchci.org/</a>
<b>Address:</b>	1205 N F Avenue, Douglas, AZ 85635

## Grantee Points of Contact:

<b>Project Director:</b>	Susan Rich, surich@cchci.org
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## Target Service Area(s):

County, State
Cochise County, AZ

## Project Information:

### Project Summary

Chiricahua Community Health Centers will hire two peer recovery support specialists to initiate and conduct support groups for patients with an OUD/SUD diagnosis. Hire three behavioral health technicians to initiate support services, referrals to MAT, and work with the mobile team to identify, screen, and refer patients with an OUD/SUD diagnosis.

### Focus Areas/Selected Allowable Activities

- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Providing community-based screenings for SUD/ODU and related infectious disease

### Intended Audience

General population

**Organizational Information:**

<b>Project Title:</b>	Pathways Overdose Response Team
<b>State:</b>	Ohio
<b>Organization Type:</b>	Community-Based Organization
<b>Website:</b>	<a href="http://www.cacfayettecounty.org">www.cacfayettecounty.org</a>
<b>Address:</b>	1400 US Route 22 NW, Washington Court House, OH 43610

**Grantee Points of Contact:**

<b>Project Director:</b>	Lucinda Baughn, <a href="mailto:bbaughn@cacfayettecounty.org">bbaughn@cacfayettecounty.org</a>
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**Target Service Area(s):**

<b>County, State</b>
Fayette County, Ohio

**Project Information:**

**Project Summary**

Our Pathways to Recovery Team works in conjunction with the many programs within and outside of our agency to connect clients to resources necessary to get and stay substance-free while maintaining their independence and personal preferences for doing so.

The Pathways Overdose Response Team (PORT) project will target gaps identified during provision of services through other grant projects to address community problems associated with the opioid epidemic. The needs to be addressed are increased capacity and access to treatment, (including MAT providers through telehealth services), filling gaps in our existing QRT services, reduction of barriers to treatment, and increased access to transit to treatment.

The target population for this project is (1) individuals at risk for, diagnosed with, and/or in treatment and/or recovery for OUD, (2) their family members/caregivers, and (3) the community as a whole.

**Focus Areas/Selected Allowable Activities**

- Improving capacity for and access to telehealth treatment services for SUD/OUD

**Areas Where We Would Like to Serve as a Peer Mentor**

- Emergency departments, health organizations, law enforcement, and recovery housing

**Areas Where We Would Welcome Technical Assistance**

- Health screen

**Intended Audience**

<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD
<b>Health Access:</b>	Medically underserved
<b>Special Populations:</b>	People who use drugs

**Organizational Information:**

<b>Project Title:</b>	Grand Ronde Overdose Response Project
<b>State:</b>	Oregon
<b>Organization Type:</b>	Tribal Government
<b>Website:</b>	<a href="https://www.grandronde.org/">https://www.grandronde.org/</a>
<b>Address:</b>	9605 Grand Ronde Rd., Grand Ronde, OR 97347

**Grantee Points of Contact:**

<b>Project Director:</b>	Jennifer Worth, Jennifer.Worth@grandronde.org
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**Target Service Area(s):**

County, State	
Polk County, OR	Yamhill County, OR

**Project Information:**

Project Summary
<p>In response to barriers to OUD treatment and with the aim of improving access to OUD treatment for Tribal members, American Indians/Alaskan Natives, and the community, the Tribe plans to complete the following proposed activities: purchase and distribute naloxone, fentanyl test strips, and other relevant supplies within our target service area, establish and expand our physical SUD/OUD care delivery site and existing treatment capacity through the purchase of a mobile unit; and train peer recovery support specialists and coordinate their placements in local SUD/OUD service delivery sites within our designated rural geographic area.</p> <p>The target population of this project are Tribal members, other American Indians/Alaskan Natives and community members who live and work within the Tribe's HRSA-designated rural areas who are experiencing OUD and seek access to effective culturally specific treatment.</p>

## Focus Areas/Selected Allowable Activities

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.

## Areas Where We Would Like to Serve as a Peer Mentor

- MAT, mobile units

## Intended Audience

<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
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**Organizational Information:**

<b>Project Title:</b>	Community Opioid Overdose Prevention Education
<b>State:</b>	California
<b>Organization Type:</b>	Community-Based Organization
<b>Website:</b>	<a href="https://www.coresresponse.org/">https://www.coresresponse.org/</a>
<b>Address:</b>	910 N Hill Street, Los Angeles, CA 07302

**Grantee Points of Contact:**

<b>Project Director:</b>	Linda Oxendine, linda.oxendine@coresresponse.org
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**Target Service Area(s):**

<b>County, State</b>
Robeson County, NC

**Project Information:**

**Project Summary**

Community Organized Relief Effort (CORE) aims to stem the proliferation of opioid use and opioid-related deaths in Robeson County by enhancing community awareness regarding harm reduction and increasing access to naloxone and referral services. This approach seeks to support changes in individual, interpersonal, community-based, and structural factors influencing overdose causes and access and proper use of naloxone. To accomplish this goal, CORE will develop and implement a robust community outreach campaign, increasing literacy on harm reduction, training on naloxone usage, and distributing naloxone to the most impacted and least resourced communities in Robeson County. Activities will emphasize including and responding to the needs of Native American communities in Robeson County.

Over 24% of individuals under 65 (the majority of those with OUD) lack access to health insurance. Countless more are underinsured, and their insurance does not cover the basic costs of accessing withdrawal treatment and recovery services. Therefore, CORE will also focus on assisting uninsured and underinsured individuals in identifying affordable insurance and access to the medical and social services they require. The lack of transparency regarding available resources for OUD treatment and complementary services leads many to avoid treatment because they fear it is not affordable or available. This program will dismantle this barrier by supporting resource coordination and benefits navigation activities to link individuals with insurance and needed prescription assistance. These efforts will increase uptake in OUD treatment and recovery services.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services

**Areas Where We Would Like to Serve as a Peer Mentor**

- Community outreach, integrating public health messaging naturally into existing community spaces, reaching individuals where and when they need help
- Working within and for Tribal communities
- Destigmatization

**Areas Where We Would Welcome Technical Assistance**

- Logistics of connection to care, working with treatment facilities
- Best practices and success strategies for resource navigation

**Intended Audience**

<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD
<b>Health Access:</b>	Uninsured or underinsured

**Organizational Information:**

<b>Project Title:</b>	North Georgia OPEN
<b>State:</b>	Georgia
<b>Organization Type:</b>	Institution of Higher Education
<b>Website:</b>	<a href="https://www.mercer.edu/">https://www.mercer.edu/</a>
<b>Address:</b>	1501 Mercer University Drive, Macon, GA 31207

**Grantee Points of Contact:**

<b>Project Director:</b>	Allen Tindol, tindol_ga@mercer.edu
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**Target Service Area(s):**

County, State	
Fannin County, GA	Gilmer County, GA
Gordon County, GA	Polk County, GA

**Project Information:**

**Project Summary**

In North Georgia's Fannin, Gilmer, Gordon, and Polk counties, opioid overdose is a severe crisis. These counties face alarmingly high opioid overdose mortality rates, with each exceeding the state average. During 2019 and 2020, Georgia witnessed a 35% surge in drug-related deaths, and Fannin County ranked in the top 5% nationwide for vulnerability to HIV and Hepatitis C due to the opioid epidemic. The region also reports a 36% higher rate of overdose-related ED visits compared to the state and 120% higher than the national average. The population here is predominantly uninsured, older, and grappling with poverty.

Despite the North Georgia Opioid Prevention Education Network (OPEN) program's efforts, access to effective prevention, treatment, and recovery services remains problematic across these counties. For instance, during the 3-year RCORP Implementation Project, the number of DATA-waived MAT providers increased from 2 to 3, yet these are the sole MAT providers for the entire 4-county area, resulting in a ratio of over 75,000 residents per 1 MAT-waived provider. The dearth of SUD treatment resources underscores the critical need for both OUD prevention and overdose prevention.

The North Georgia OPEN Consortium comprises partners, including Mercer University School of Medicine, Georgia Council on Substance Abuse, Highland Rivers Health, the Appalachian Circuit Drug Court, Gilmer County Probate Court, Huff's Drug Store, Family Connections, Mountain Education Charter High School, Georgia Prevention Initiative, and three RCOs. This consortium boasts a diverse composition of representatives from higher education, SUD treatment, RCOs, the court system, law enforcement, pharmacy, and educational support. It



ensures a multi-dimensional approach to all implementation activities by involving supporting members from each partner's network.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.

**Areas Where We Would Like to Serve as a Peer Mentor**

- Consortium building

**Areas Where We Would Welcome Technical Assistance**

- Engaging law enforcement

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	Expanding Naloxone Access in Rural Communities in North Carolina
<b>State:</b>	North Carolina
<b>Organization Type:</b>	Institution of Higher Education
<b>Website:</b>	<a href="https://hhp.ecu.edu/hep/">https://hhp.ecu.edu/hep/</a>
<b>Address:</b>	3402 Carol Belk Building, Greenville, NC 27858

**Grantee Points of Contact:**

<b>Project Director:</b>	Lori Ann Eldridge, <a href="mailto:eldridgel21@ecu.edu">eldridgel21@ecu.edu</a>
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**Target Service Area(s):**

County, State	
Carteret County, NC	Jackson County, NC
Stanly County, NC	Surry County, NC
Swain County, NC	

**Project Information:**

Project Summary
<p>The overall goal of this project is to reduce morbidity and mortality of individuals who use opioids within high-risk rural communities in North Carolina (NC). We will work with five high-risk rural counties in NC to expand or enhance their current overdose prevention infrastructure. Specifically, we will expand access to the opioid overdose antidote naloxone by working with these five communities to implement public health vending machines (PHVMs) that dispense naloxone. We will work with key stakeholders, including decision makers and people with lived experiences of opioid use in the five counties to obtain community support and buy-in to implement public health vending machines.</p>
Focus Areas/Selected Allowable Activities
<ul style="list-style-type: none"> <li>• Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area</li> <li>• Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.</li> </ul>
Areas Where We Would Like to Serve as a Peer Mentor
<ul style="list-style-type: none"> <li>• Substance use</li> <li>• Harm reduction</li> <li>• Implementation science</li> </ul>

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	FPST Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Nevada
<b>Organization Type:</b>	Tribal Government
<b>Website:</b>	<a href="http://www.fpst.org">www.fpst.org</a>
<b>Address:</b>	565 Rio Vista Drive, Fallon, NV 89406

**Grantee Points of Contact:**

<b>Project Director:</b>	Leslie Steve, mhsadirector@fpst.org
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**Target Service Area(s):**

County, State
Churchill County, NV

**Project Information:**

Project Summary
<p>The Fallon Paiute Shoshone Tribe (FPST) Rural Communities Opioid Response Program (RCORP) aims to reduce the morbidity and mortality of SUD, including OUD, in high-risk rural communities. Over the course of a 1-year period of performance, the RCORP-Tribal Overdose Response will address immediate needs in the rural/Tribal areas through Improving access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD/OUDs. Goals of this grant will be:</p> <ol style="list-style-type: none"> <li>1. Conduct community education on opioid use, the use/distribution of naloxone to prevent overdoses, and the use of fentanyl test strips to prevent accidental overdoses</li> <li>2. Have the recovery support coordinator achieve state certification as a peer recovery support specialist to provide peer support services, manage/oversee the recovery support drop-in center, assist and support clients who receive local services from emergency departments, higher-level behavioral health services, and primary care providers.</li> <li>3. Assist clients in obtaining health insurance, including Nevada Medicaid, and accessing various social services</li> <li>4. Increase the number of substance use providers at Fallon Tribe Health Center by one additional counselor</li> <li>5. Train all staff in screening for SUD/OUD as well as screening for infectious diseases common with SUDs and making referrals to the Fallon Tribal Health Center for testing and treatment</li> </ol> <p>Staff funded under this grant will include the project director at 0.75 LOE, substance abuse counselor at 0.75 LOE, and Recovery Support Coordinator at 1.0 LOE.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers’ ability to care for individuals with SUD/ODU, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services
- Providing community-based screenings for SUD/ODU and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- Evidence-based practices in rural/Tribal Communities

**Areas Where We Would Welcome Technical Assistance**

- Identifying screening tools for infectious diseases

**Intended Audience**

<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	People experiencing homelessness, Justice-involved/incarcerated persons; People who use drugs, Families and caretakers of people with OUD/SUD
<b>Other:</b>	Healthcare workers and providers, Law enforcement and first responders

**Organizational Information:**

<b>Project Title:</b>	Coordinated Overdose Response Project
<b>State:</b>	New York
<b>Organization Type:</b>	Substance Use Disorder Treatment Provider
<b>Website:</b>	<a href="http://www.farnhaminc.org">www.farnhaminc.org</a>
<b>Address:</b>	283 West Second Street, Suite 200, Oswego, NY 13126

**Grantee Points of Contact:**

<b>Project Director:</b>	Sandra L. Waldron, <a href="mailto:swaldron@farnhaminc.org">swaldron@farnhaminc.org</a>
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**Target Service Area(s):**

County, State	
Cayuga County, NY	Oswego County, NY

**Project Information:**

Project Summary
<p>Farnham, Inc. (Farnham) is a not-for-profit agency providing solutions to the problems created by substance use with an uncompromising commitment to quality and professionalism. Farnham will lead the project with partnering agencies, Desens House and Cayuga County Community Mental Health Center. The Coordinated Overdose Response Project will support immediate response to the overdose crisis in rural areas of Oswego and Cayuga counties through improving access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD. The partners will execute the required activities of this project with three areas of focus: 1) community access to treatment, 2) improve and expand SUD services and 3) reduce workforce shortages and increase professional development.</p> <p>The project focuses on three underserved populations in rural Oswego and Cayuga Counties that experience disproportionate access and engagement in services: 1) socioeconomically disadvantaged populations, 2) individuals at risk of or diagnosed with OUD seeking Medication Opioid Use Disorder (MOUD) services, and 3) women of reproductive age (15-49) with SUD, pregnant/post-partum women, and women experiencing co-occurring mental health conditions.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers’ ability to care for individuals with SUD/OD, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Improving capacity for and access to telehealth treatment services for SUD/OD
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing a recovery home or other supportive housing program

**Areas Where We Would Like to Serve as a Peer Mentor**

- Treatment for SUD, peer recovery services, recovery housing, professional development training

**Areas Where We Would Welcome Technical Assistance**

- Additional resources

**Intended Audience**

<b>Special Populations:</b>	Pregnant and parenting people, People who use drugs
<b>Other:</b>	Women of reproductive age 15-49 with SUD, Pregnant/post-partum women, and Women experiencing co-occurring mental health conditions.

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Georgia
<b>Organization Type:</b>	FQHC
<b>Website:</b>	<a href="https://georgiapca.org/">https://georgiapca.org/</a>
<b>Address:</b>	315 W Ponce de Leon Avenue, Suite 1000, Decatur, GA 30030

**Grantee Points of Contact:**

<b>Project Director:</b>	David Newton, DNewton@gaphc.org
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**Target Service Area(s):**

County, State	
Appling County, GA	Atkinson County, GA
Ben Hill County, GA	Berrien County, GA
Bulloch County, GA	Candler County, GA
Coffee County, GA	Cook County, GA
Emanuel County, GA	Evans County, GA
Irwin County, GA	Jeff Davis County, GA
Montgomery County, GA	Screven County, GA
Tattnall County, GA	Tombs County, GA
Treutlen County, GA	Wayne County, GA

**Project Information:**

Project Summary
The purpose of the RCORP-Overdose Response grant is to support immediate responses to the overdose crisis through improving access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD in a large rural area of the state of Georgia.



**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/OD and related infectious disease

**Areas Where We Would Welcome Technical Assistance**

- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Missouri
<b>Organization Type:</b>	Behavioral Health Provider
<b>Website:</b>	<a href="http://gibson-center.com/">http://gibson-center.com/</a>
<b>Address:</b>	340 S. Broadview, Cape Girardeau, MO 63703

**Grantee Points of Contact:**

<b>Project Director:</b>	Melissa Vogelsang
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**Target Service Area(s):**

County, State	
Mississippi County, MO	New Madrid County, MO
Scott County, MO	

**Project Information:**

**Project Summary**

The Gibson Center for Behavioral Change’s mission for this project, called Overdose Community Peer Response (O-CPR), is to improve outcomes for those suffering with opioid use by distributing naloxone, providing peer recovery support training in our service delivery sites (jails/prisons/behavioral health clinics), enhancing capacity to provide mobile crisis intervention services in rural areas, improving access to telehealth treatment services for substance use and opioid use disorder(s), establishing a recovery community and providing community-based screenings for SUD/OD and related infectious diseases.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/OD in the target rural service area
- Establishing a recovery community organization
- Providing community-based screenings for SUD/OD and related infectious disease

**Areas Where We Would Welcome Technical Assistance**

- Implementation of marketing for crisis intervention in the rural communities

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	Summit's Overdose Response Initiative
<b>State:</b>	Washington
<b>Organization Type:</b>	Critical Access Hospital, Rural Health Clinic (RHC)
<b>Website:</b>	<a href="https://summitpacificmedicalcenter.org/">https://summitpacificmedicalcenter.org/</a>
<b>Address:</b>	600 E Main Street, Elma, WA 98541

**Grantee Points of Contact:**

<b>Project Director:</b>	Christina Mitchell, christina.mitchell@sp-mc.org
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**Target Service Area(s):**

<b>County, State</b>
Grays Harbor County, WA

**Project Information:**

**Project Summary**

Grays Harbor County is recognized as having a major OUD challenge, which has a devastating impact on the County. Our community has a very low health index and a 3-year shorter life expectancy than the rest of Washington State. Grays Harbor County is ranked 37 out of 39 in health outcomes which means that the current overall health of our residents is incredibly poor. Additionally, our county is ranked number 36 out of 39 regarding health factors which threatens the future health of our community. Our residents' health is influenced by different health related social needs.

Summit Pacific Medical Center was awarded a HRSA RCORP Planning grant in 2018. This grant established the Grays Harbor County Opioid Response Consortium and provided funding to implement a coordinated approach to opioid use prevention, treatment, and recovery. It has supported the identification of areas requiring additional funding or policy changes to better address the current opioid crisis. Furthermore, we were awarded a HRSA RCORP Implementation grant in 2019, which established programs for our patients with SUD/OUD and provided dedicated staffing, data collection and analysis, research, and collaboration time. Additionally, we received a HRSA RCORP MAT Expansion grant award in 2019. This grant rapidly expanded our MAT services to increase capacity to meet the needs of our community.

The HRSA RCORP Overdose Response grant will allow Summit Pacific Medical Center to improve access to naloxone for our target population by purchasing and distributing this medication. Furthermore, we will expand our capacity to provide care (specifically prevention, treatment, and recovery services for individuals with SUD/OUD) by providing CEUs and CME to our providers to enhance their ability to provide these services to our patients. Additionally,

we will establish services to reduce transmission of infectious diseases that can occur when sharing injectable drug equipment.

### Focus Areas/Selected Allowable Activities

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/ODU
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.

### Areas Where We Would Welcome Technical Assistance

- We would like technical assistance in screening for and treating infectious diseases, specifically patient education, screening forms, and protocols.

### Intended Audience

<b>Health Status</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD
<b>Special Populations:</b>	People who use drugs

**Organizational Information:**

<b>Project Title:</b>	Overdose Response Consortium Expansion in Northwest Pennsylvania
<b>State:</b>	Pennsylvania
<b>Organization Type:</b>	Foundation
<b>Website:</b>	<a href="https://www.hamothealthfoundation.org/">https://www.hamothealthfoundation.org/</a>
<b>Address:</b>	100 State Street, Suite 510, Erie, PA 16507

**Grantee Points of Contact:**

<b>Project Director:</b>	Mandy Fauble, faublem2@upmc.edu
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**Target Service Area(s):**

County, State	
Crawford County, PA	Erie County, PA
Venango County, PA	

**Project Information:**

Project Summary
<p>This project will provide knowledgeable, relevant, and immediate responses through our experienced consortium in Northwestern Pennsylvania that positively impacts prevention, treatment, and recovery for individuals and families impacted by SUD/OD. Activities include education and distribution of naloxone and fentanyl test strips (recently decriminalized in Pennsylvania), enhancement of providers' ability to care for individuals with SUD/OD, certified recovery specialist training and mentoring, improvement of access to telehealth, provision of CE and CME to allow providers to enhance their ability to provide care to individuals with SUD/OD, and provision of sober social activities and a childcare pilot program to support individuals in recovery.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers’ ability to care for individuals with SUD/OD, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/OD
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.

**Areas Where We Would Like to Serve as a Peer Mentor**

- Families and women and children impacted by SUD
- Community Outreach

**Areas Where We Would Welcome Technical Assistance**

- Intentionally including people who use drugs
- Harm reduction outreach
- Social media/communications.

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Texas
<b>Organization Type:</b>	Rural Health Clinic
<b>Website:</b>	<a href="http://www.fcrhc.com">www.fcrhc.com</a> and <a href="http://www.healandrecovery.com">www.healandrecovery.com</a>
<b>Address:</b>	506 Texas Highway 37, Mount Vernon, TX 75457

**Grantee Points of Contact:**

<b>Project Director:</b>	Beverly Austin, <a href="mailto:baustin@fcrhc.com">baustin@fcrhc.com</a>
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**Target Service Area(s):**

County, State	
Franklin County, TX	Morris County, TX
Titus County, TX	

**Project Information:**

Project Summary
<p>The RCORP-Overdose Response grant will expand the Franklin County Rural Health Clinic (FCRHC) workforce, targeting SUD treatment by allowing FCRHC to hire a peer recovery specialist/case manager. The peer recovery specialist/case manager will identify and assist patients who are eligible for Medicaid, Children's Health Insurance Program, Medicare, or the Affordable Care Act insurance program to enroll in these programs. The peer recovery specialist/case manager will also link the project team with existing community resources for prevention activities.</p> <p>FCRHC will be a part of a multi-sectoral consortia consisting of law enforcement, healthcare, and mental health partners. In addition, FCRHC's proposed strategy is to partner with a broad consortium of RCOs that support the social needs of rural individuals with SUDs. The consortia consist of 4 members and 18 partners in the recovery community that have extensive history in the healthcare, behavioral health, criminal justice, and recovery community fields and offer a diversity of programs, activities, education, and social benefits needed to fill the gaps and improve the quality of rural health care services in our target area.</p> <p>The target population are individuals who are at risk for, have been diagnosed with, and/or are in treatment and/or recovery for SUD/ODU and their families and/or caregivers, and other community members who reside in HRSA-designated rural areas. The target service area is in rural northeast Texas, Region 4, and consists of three counties, Franklin, Titus, and Morris. The target service area includes populations that are historically excluded groups that suffer from poorer health outcomes, health disparities, and other inequities as compared to the rest of the target population when addressing SUD/ODU and mental disorders. This population includes, but is not limited to, racial and ethnic minorities, the homeless, pregnant women, incarcerated people, youth, and adolescents.</p>



**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/OD in the target rural service area
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing a recovery home or other supportive housing program
- Establishing a recovery community organization
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/OD and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- We could serve as a peer mentor in establishing coalitions to help close the service gaps in areas that lack all the resources need for prevention, treatment, and recovery. Because of the complex and multifaceted nature of OUD and SUD. FCRHC formed a partnership with a of 18 broad consortia of recovery community organizations that support the social needs of rural individuals with substance use disorders. The consortia, named the Heal and Recovery Coalition, consist of four members and 18 partners in the recovery community that have extensive history in the healthcare, behavioral health, criminal justice, and recovery community fields and offer a diversity of programs, activities, education, and social benefits needed to fill the gaps and improve the quality of rural health care services in our target area.
- In addition, we partnered with the Criminal Justice Department and created a Post-Release Program to assist Probation Department reduce recidivism by introducing the parolee to the RCORP program. This also helps parolees obtain employment and build stronger family relationships.

**Areas Where We Would Welcome Technical Assistance**

- We would like to have more technical assistance in how to best utilize the Peer Recovery Coach.

**Intended Audience**

<b>Age:</b>	Young Adult (18-24); Adult (25-64); Older Adult (65+)
<b>Race/Ethnicity:</b>	White; Hispanic/Latino/Latinx; Black/African-American; Asian or Pacific Islander
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD, Substance-exposed children and infants, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	Racial and ethnic minorities, People experiencing homelessness, Pregnant and parenting people, Veterans, Justice-involved/incarcerated persons, LGBTQ+ populations, People experiencing food insecurity, People who use drugs
<b>Other:</b>	Families and caretakers of people with OUD/SUD, Healthcare workers and providers, Law enforcement and first responders, People with low health literacy, Non-English speakers

**Organizational Information:**

<b>Project Title:</b>	Madison Opioid Response and Empowerment (MORE) Project
<b>State:</b>	Kentucky
<b>Organization Type:</b>	Community-Based Organization
<b>Website:</b>	<a href="http://www.foothillscap.org">www.foothillscap.org</a>
<b>Address:</b>	309 Spangler Drive, Richmond, KY 40475

**Grantee Points of Contact:**

<b>Project Director:</b>	Jeri Allison, <a href="mailto:jallison@foothillscap.org">jallison@foothillscap.org</a>
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**Target Service Area(s):**

County, State
Madison County, KY

**Project Information:**

**Project Summary**

The majority (75%) of the incarcerated people at the Madison County Detention Center are male. With that in mind, this project will provide services to assist men with OUD/SUD in successful reentry from the Madison County Detention Center to residence in Madison County. Services will help prevent post-release overdoses. It will focus on service delivery (pre-release and post-release, for incarcerated individuals), evaluation and quality improvement, and community outreach and engagement.

The activities complement the previous RCORP award by adding direct services and support for individuals affected by opioid use disorder and overdoses, including social services (emergency, basic needs, housing support), employment, and self-sufficiency services to overcome poverty (such as resume development, job searches, and skills development), and recovery services (peer mentoring). The community outreach and engagement component will also work to raise awareness about opioid use disorder and overdose while coordinating with local organizations to share resources. This delivery plan will build on the previous award by expanding services and reducing recidivism.

**Focus Areas/Selected Allowable Activities**

- Establishing, improving, or expanding physical SUD/OUD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery-friendly employment opportunities, etc.

**Areas Where We Would Like to Serve as a Peer Mentor**

- All male detainees of the Madison County Detention Center, 30 days pre-release to gain an understanding of the challenges and needs they have and 90 days post-release, to ensure they are successful in their transition from incarceration, avoid overdose incidents, and reduce the chances of recidivism.

**Areas Where We Would Welcome Technical Assistance**

- Developing protocols for data collection

**Intended Audience**

<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People in recovery from OUD/SUD, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	Justice-involved/incarcerated persons

### Organizational Information:

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Kentucky
<b>Organization Type:</b>	Behavioral Health Provider
<b>Website:</b>	<a href="https://horizonhealthky.org/">https://horizonhealthky.org/</a>
<b>Address:</b>	1019 Cumberland Falls Highway, Suite B210, Corbin, KY 40701

### Grantee Points of Contact:

<b>Project Director:</b>	Monty Sears, msears@horizonhealthky.org
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### Target Service Area(s):

County, State	
Knox County, KY	Laurel County, KY
Whitley County, KY	

### Project Information:

#### Project Summary

We will target our services towards residents of the service area who have OUD or are at risk of OUD. Our interventions will include direct services through patient navigation and community-wide prevention, outreach and education, and collaboration initiatives.

Reduce the morbidity and mortality of SUD, including OUD, in high-risk rural communities by supporting immediate response to the opioid crisis through activities aimed at improving access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/OD
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing a recovery home or other supportive housing program
- Establishing a recovery community organization
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/OD and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- Lab setup
- Childcare setup

**Areas Where We Would Welcome Technical Assistance**

- Community outreach programs and any other activities needed

<b>Intended Audience</b>	
<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Race/Ethnicity:</b>	White, Hispanic/Latino/Latinx, Black/African-American
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD, People living with disabilities
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	Racial and ethnic minorities, People experiencing homelessness, Pregnant and parenting people, Veterans, Justice-involved/incarcerated persons, LGBTQ+ populations, People experiencing food insecurity, People who use drugs
<b>Other:</b>	Families and caretakers of people with OUD/SUD, Healthcare workers and providers, Law enforcement and first responders, People with low health literacy

**Organizational Information:**

<b>Project Title:</b>	Tri CORP Overdose Response Project
<b>State:</b>	Oklahoma
<b>Organization Type:</b>	Community-Based Organization
<b>Website:</b>	<a href="https://liftca.org">https://liftca.org</a>
<b>Address:</b>	209 N 4th Street, Hugo, OK 74743

**Grantee Points of Contact:**

<b>Project Director:</b>	Dionne Frankum, <a href="mailto:dionne.frankum@liftca.org">dionne.frankum@liftca.org</a>
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**Target Service Area(s):**

County, State	
Choctaw County, OK	McCurtain County, OK
Pushmataha County, OK	

**Project Information:**

Project Summary
<p>During the 1-year period, Lift CAA will work to improve access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD/OD in rural Choctaw, McCurtain, and Pushmataha Counties. The project will implement strategies to:</p> <ul style="list-style-type: none"> <li>• Directly support achieving the purchasing and distribution of naloxone, fentanyl test strips, and other relevant supplies</li> <li>• Assist uninsured individuals with SUD/OD obtain health insurance and accessing SUD/OD treatment and other behavioral health and social services</li> <li>• Train peer recovery support specialist and coordinate placement in local SUD/OD services delivery sites, such as EDs, primary care, jails/prisons, behavioral health care clinics</li> <li>• Provide CEUs as well as CME to allow for providers to enhance their ability to provide care to individuals with SUD/OD</li> <li>• Establish an RCO</li> <li>• Establish social services to support individual in recovery, such as childcare services during doctor's appointments transportation to treatment and counseling, connection to recovery-friendly employment opportunities</li> </ul>



**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/ODU care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/ODU
- Establishing a recovery community organization
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.

**Intended Audience**

General population

### Organizational Information:

<b>Project Title:</b>	LCAD's Mobile Integrated Health Recovery Program
<b>State:</b>	Missouri
<b>Organization Type:</b>	Emergency Medical Services
<b>Website:</b>	<a href="http://www.lcad.net">www.lcad.net</a>
<b>Address:</b>	1392 South 3rd Street, Troy, MO 63379

### Grantee Points of Contact:

<b>Project Director:</b>	Raymond Antonacci, ray@lcad.net
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### Target Service Area(s):

County, State
Lincoln County, MO

### Project Information:

#### Project Summary

Lincoln County Ambulance District (LCAD) is a regional ambulance district that provides east-central Missouri residents access to quality health care. One of the most common themes raised in community meetings during the development of LCAD's strategic plan was the need for behavioral and mental health services. LCAD's Rural Communities Opioid Response Program project's goal is to reduce the morbidity and mortality of SUD, OUD, in its high-risk rural communities. This program is an opportunity to expand the service delivery model for treatment and recovery services for individuals with SUD/OUD through the evidenced-based Mobile Integrated Healthcare (MIH) model. The MIH model comprises a primary care provider, community paramedics, emergency medical technicians, community health workers, and a newly added peer support recovery specialist. This MIH team will provide excellent and accessible care, address many SDOH issues, and reduce costs to the health care system. LCAD recognizes that its team is usually the first on scene, so it can provide an "in the moment" opportunity for behavioral health services, such as field-initiated buprenorphine, peer support services, immediate care with medical providers via telehealth, and wraparound services for the patient's follow-up care through its MIH program. LCAD understands that it is imperative to capture these vulnerable patients "in the moment," and that is exactly what the MIH team intends to do. The program will focus on the following key strategies:

- Harm reduction with naloxone distribution
- Improving access to treatment by purchasing a vehicle
- Training and certification
- Assisting individuals with obtaining health insurance
- Treatment, and social services
- Expanding peer recovery support specialists
- Providing mobile crisis intervention services

- Improving capacity of telehealth services

### Focus Areas/Selected Allowable Activities

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/ODU care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/ODU, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/ODU

### Areas Where We Would Like to Serve as a Peer Mentor

- Mobile integrated healthcare
- EMS field induction for buprenorphine
- Peer support specialist integration into EMS staffing

### Areas Where We Would Welcome Technical Assistance

- Access to trainings specific for our project, such as SIBIRT, PREPARES, Cultural Competency, etc.

### Intended Audience

<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population
<b>Special Populations:</b>	People experiencing homelessness, Justice-involved/incarcerated persons, People who use drugs
<b>Other:</b>	Families and caretakers of people with OUD/SUD, People with low health literacy

**Organizational Information:**

<b>Project Title:</b>	Rural Health Outreach and Rural Network Development Program
<b>State:</b>	Maine
<b>Organization Type:</b>	Community-Based Organization, Rural Health Network
<b>Website:</b>	<a href="https://www.mainehealth.org/Franklin-Community-Health-Network/Healthy-Communities">https://www.mainehealth.org/Franklin-Community-Health-Network/Healthy-Communities</a>
<b>Address:</b>	105 Mt Blue Circle, Suite 1, Farmington. ME 04938

**Grantee Points of Contact:**

<b>Project Director:</b>	Lorri Brown, lorri.brown@mainehealth.org
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**Target Service Area(s):**

<b>County, State</b>
Franklin County, ME

**Project Information:**

<b>Project Summary</b>
The purpose of the proposed project is to immediately address the opioid overdose crisis in rural Maine by improving capacity and local access to MAT providers, peer recovery specialists and other community social service and crisis intervention specialists within the most rural neighborhoods in the region via a new mobile health unit designed and purchased exclusively for this purpose. Additionally, a new mobile health care billing system will be established to ensure project sustainability.
<b>Focus Areas/Selected Allowable Activities</b>
<ul style="list-style-type: none"> <li>• Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area</li> <li>• Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services</li> <li>• Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/OD in the target rural service area Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.</li> <li>• Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.</li> </ul>

**Areas Where We Would Like to Serve as a Peer Mentor**

- Mobile health services
- Recovery community

**Areas Where We Would Welcome Technical Assistance**

- Reimbursable services

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	Rural York County Overdose Response Project
<b>State:</b>	Maine
<b>Organization Type:</b>	Health Care Provider
<b>Website:</b>	<a href="https://www.mainehealth.org/">https://www.mainehealth.org/</a>
<b>Address:</b>	22 Bramhall Street, Portland, ME 04102

**Grantee Points of Contact:**

<b>Project Director:</b>	Jean Bessette, jean.bessette@mainehealth.org
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**Target Service Area(s):**

<b>County, State</b>
York County, ME

**Project Information:**

<b>Project Summary</b>	
<p>The overarching goals of the project are to prevent overdose deaths across rural York County, Maine, to address the increasing rate of infection from drug use, and to support historically underserved vulnerable populations, such as incarcerated individuals and unhoused people, in their recovery. The key strategies that will be implemented to address these needs are the installation of Naloxboxes®, the distribution of Narcan®, the provision of harm reduction and wound care supplies, and engagement of peer recovery coaches. The overdose response activities are designed to prevent overdose deaths by addressing the immediate needs of the targeted rural service area and will enhance, but not duplicate, the work being done under SMHC's RCORP Implementation IV grant.</p>	
<b>Focus Areas/Selected Allowable Activities</b>	
<ul style="list-style-type: none"> <li>• Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area</li> <li>• Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.</li> </ul>	
<b>Intended Audience</b>	
<b>Special Populations:</b>	People Experiencing Homelessness; Veterans; Justice-Involved/Incarcerated Persons

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program - Overdose Response
<b>State:</b>	Wisconsin
<b>Organization Type:</b>	Community based organization; Rural Regional Hospital
<b>Website:</b>	<a href="http://www.marshfieldclinic.org">www.marshfieldclinic.org</a>
<b>Address:</b>	1000 N. Oak Avenue (F1C), Marshfield, WI 54449

**Grantee Points of Contact:**

<b>Project Director:</b>	Meagan Barnett, <a href="mailto:barnett.meagan@marshfieldclinic.org">barnett.meagan@marshfieldclinic.org</a>
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**Target Service Area(s):**

County, State	
Barron County, WI	Dodge County, WI
Rusk County, WI	Portage County, WI

**Project Information:**

Project Summary
<p>As the largest, nonprofit, integrated rural healthcare system serving Wisconsin and Michigan's Upper Peninsula, Marshfield Clinic Health System (MCHS) will implement a multi-level support system in response to the opioid overdose crisis in rural Wisconsin. Identified counties each have a rural population facing numerous barriers to healthcare, limited resources, and a growing opioid epidemic. Individuals in these counties who are suffering with substance use disorder (SUD) or Opioid Use Disorder (OUD) often face stigmatization regarding their condition and may not have access to the life-saving medication, NARCAN, to avoid an overdose death. Patients with SUD/OUD are often forced to travel several hours (sometimes daily) to receive treatment from a provider who is both knowledgeable and understanding of their condition and well-versed in treatment options such as Medication Assisted Treatment (MAT), which has proven highly effective in patients seeking recovery.</p> <p>Over the course of 12 months, project staff will engage hospital staff and resources and community partners in creating a sustainable, Recovery-oriented system of care that expands access and resources to a vulnerable population.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers’ ability to care for individuals with SUD/OD, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD

**Areas Where We Would Welcome Technical Assistance**

- Engaging healthcare providers to begin prescribing MAT

**Intended Audience**

<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People in recovery from OUD/SUD
<b>Health Access:</b>	Uninsured or underinsured
<b>Special Populations:</b>	People who use drugs



**Organizational Information:**

<b>Project Title:</b>	Mississippi Rural Overdose Response
<b>State:</b>	Mississippi
<b>Organization Type:</b>	Public Health Organization
<b>Website:</b>	<a href="http://www.msphi.org">www.msphi.org</a>
<b>Address:</b>	5 Olympic Way, Suite A, Madison, MS, 39110

**Grantee Points of Contact:**

<b>Project Director:</b>	Dr. AnnaLyn Whitt, <a href="mailto:awhitt@msphi.org">awhitt@msphi.org</a>
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**Target Service Area(s):**

County, State	
Adams County, MS	Amite County, MS
Clairborne County, MS	Franklin County, MS
Jefferson County, MS	Pike County, MS
Walthall County, MS	

**Project Information:**

Project Summary
<p>Mississippi (MS) has been among the states most adversely affected by the opioid epidemic, exhibiting an alarmingly elevated number of opioid prescriptions per resident. Naloxone distribution networks within MS remain in their infancy and fentanyl test strips are only now being reclassified so they are no longer banned as drug paraphernalia. Consequently, overdose deaths within MS remain at disturbingly high levels and are exacerbated by longstanding health disparities related to racial-ethnic stratification, poverty prevalence, rural remoteness, and the state's designation as a medically underserved region.</p> <p>The overarching goal of MS RCORP-OD is to create a sustainable, integrated, multi-disciplinary, community-based overdose prevention and harm reduction system that reduces morbidity and mortality of persons with SUD/ODU, positioned to offer a holistic and complementary approach to overdose prevention and harm reduction. To increase access to care for people with SUD/ODU, the MS RCORP-OD project focuses on training and recruiting appropriate professionals and community members to obtain, administer, and distribute naloxone. Training and development activities provided through MS Public Health Institute's Learning Network and local community partners will enable the team to train staff and providers to increase their capacity. Through such efforts, the community-based team will identify both mental health and SUD/ODU issues, given that they co-occur in the vast majority</p>

of the population of individuals with OUD. The MS RCORP-OD team will also provide effective services and referrals for treatment.

The project's specific goals are as follows:

- Goal 1: Enhance naloxone purchasing and distribution
- Goal 2: Develop a plan for the purchase, distribution, and utilization of fentanyl test strips in the catchment region
- Goal 3: Offer formalized training programs to enhance providers' ability to care for individuals with SUD/OUD
- Goal 4: Assess the implementation of Project ECHO in MS

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OUD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Training peer recovery support specialists and coordinating placements in local SUD/OUD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Providing community-based screenings for SUD/OUD and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- SDOH
- Stigma reduction
- Creative naloxone distribution

**Areas Where We Would Welcome Technical Assistance**

- Fentanyl test strips procurement and distribution
- Consortium expansion

**Intended Audience**

<b>Age:</b>	Young Adult (18-24), Adult (25-64)
<b>Health Status:</b>	People with/at risk for OUD or SUD, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis, People in recovery from OUD/SUD, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population

<b>Special Populations:</b>	Racial and ethnic minorities, Pregnant and parenting people, Justice-involved/incarcerated persons, LGBTQ+ populations
<b>Other:</b>	Families and caretakers of people with OUD/SUD, Healthcare workers and providers, Law enforcement and first responders, People with low health literacy

**Organizational Information:**

<b>Project Title:</b>	Lost River Treatment Center Harm Reduction for SUD/OD in Rural Service Area
<b>State:</b>	Oklahoma
<b>Organization Type:</b>	Tribal Government
<b>Website:</b>	<a href="https://modoclrhc.com/">https://modoclrhc.com/</a>
<b>Address:</b>	10025 S. 705 Road, Wyandotte, OK 74370

**Grantee Points of Contact:**

<b>Project Director:</b>	Lillian Kittrell, Lillian.kittrell@modocnation.com
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**Target Service Area(s):**

County, State
Ottawa County, OK

**Project Information:**

Project Summary
<p>One of the prevalent issues our patients face is access to mental health and substance use treatment. The purpose of this program is to provide continued support to the existing programs at Lost River Treatment Center that provide access to MAT services for persons with an OUD who are seeking, considering, or receiving MAT, as well as mental health and substance use treatment for other patients. The selected activities will allow the Tribe to continue to operate a recovery service program, providing treatment for patients who are struggling with substance use, co-occurring disorders, and behavioral health disparities.</p>
Focus Areas/Selected Allowable Activities
<ul style="list-style-type: none"> <li>• Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area</li> <li>• Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services</li> <li>• Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.</li> </ul>
Areas Where We Would Welcome Technical Assistance
<ul style="list-style-type: none"> <li>• Collaboration strategies</li> </ul>

Intended Audience	
<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People in recovery from OUD/SUD
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients
<b>Economic:</b>	Socioeconomically disadvantaged population
<b>Special Populations:</b>	People who use drugs

**Organizational Information:**

<b>Project Title:</b>	Building a Community of Rural Peer Supporters in Ohio
<b>State:</b>	Connecticut
<b>Organization Type:</b>	FQHC, Public Health Organization, Research Organization
<b>Website:</b>	<a href="https://www.mwhs1.com/">https://www.mwhs1.com/</a>
<b>Address:</b>	635 Main Street, Middletown, CT 06457

**Grantee Points of Contact:**

<b>Project Director:</b>	Ariel Porto, portoar@mwhs1.com
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**Target Service Area(s):**

County, State	
Adams County, OH	Allen County, OH
Ashland County, OH	Ashtabula County, OH
Athens County, OH	Auglaize County, OH
Belmont County, OH	Brown County, OH
Butler County, OH	Carroll County, OH
Champaign County, OH	Clinton County, OH
Columbiana County, OH	Coshocton County, OH
Crawford County, OH	Drake County, OH
Defiance County, OH	Erie County, OH
Fairfield County, OH	Fayette County, OH
Fulton County, OH	Gallia County, OH
Geauga County, OH	Green County, OH
Guernsey County, OH	Hancock County, OH
Hardin County, OH	Harrison County, OH
Henry County, OH	Highland County, OH

County, State	
Hocking County, OH	Holmes County, OH
Huron County, OH	Jackson County, OH
Knox County, OH	Lawrence County, OH
Logan County, OH	Lorain County, OH
Madison County,	Mahoning County, OH
Marion County, OH	Meigs County, OH
Mercer County, OH	Miami County, OH
Monroe County, OH	Morgan County, OH
Morrow County, OH	Muskingum County, OH
Noble County, OH	Ottawa County, OH
Paulding County, OH	Perry County, OH
Pickaway County, OH	Pike County, OH
Preble County, OH	Putnam County, OH
Richland County, OH	Ross County, OH
Sandusky County, OH	Scioto County, OH
Seneca County, OH	Shelby County, OH
Stark County, OH	Tuscarawas County, OH
Union County, OH	Van Wert County, OH
Vinton County, OH	Washington County, OH
Wayne County, OH	Williams County, OH
Wood County, OH	Wyandot County, OH

**Project Information:**

**Project Summary**

The "Building a Community of Rural Peer Supporters in Ohio" project addresses the needs of rural Ohio residents experiencing SUDs. In partnership with the Ohio Department of Mental Health and Addiction Services (OhioMHAS), this project will leverage the evidence-based Project ECHO model to provide a virtual learning community for Certified Peer Recovery Supporters (CPRSs) where CPRSs can connect with a multidisciplinary core faculty of experts and peers for continuing education presentations and case-based support.

Although the state of Ohio has dedicated a large amount of resources toward helping more Ohio residents overcome the disease of addiction and maintain their recovery, little focus has been on enhancing the training of CPRSs serving rural Ohio residents with SUD. Rural areas in Ohio have a high incidence of residents with SUD with less access to opioid treatment providers and CPRSs. Because there are fewer CPRSs in rural areas in Ohio, they are often isolated from other CPRSs. It is crucial that CPRSs in rural Ohio feel connected to one another and not alone in their challenging work.

Together, Weitzman Institute and OhioMHAS will design and implement a 16-session Peer Recovery Support ECHO to provide continuing education and a learning community for 60 CPRSs in counties designated rural and make the recordings available to all CPRSs in those counties. A core team of Peer Recovery Support ECHO faculty members will be recruited and will include a behavioral health clinician, an expert in services and local resources addressing SDOH, a CPRS training lead, and at least two experienced CPRSs to ensure the peer voice is represented and centered in all sessions. A learning community will exist through the ECHO to provide continuing education, mentorship, and connection across the CPRSs.

**Focus Areas/Selected Allowable Activities**

- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/ODU, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO.
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/ODU.

**Intended Audience**

<b>Special Populations:</b>	People in recovery from OUD/SUD, Healthcare workers and providers
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**Organizational Information:**

<b>Project Title:</b>	Mountain Comprehensive Care Center, Inc.
<b>State:</b>	Kentucky
<b>Organization Type:</b>	Certified Community Behavioral Health Organization
<b>Website:</b>	<a href="http://www.mtcomp.org">www.mtcomp.org</a>
<b>Address:</b>	104 South Front Street, Prestonsburg, KY 41653

**Grantee Points of Contact:**

<b>Project Director:</b>	Dr. Brandt Briggs, <a href="mailto:Brandt.Briggs@mtcomp.org">Brandt.Briggs@mtcomp.org</a>
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**Target Service Area(s):**

County, State	
Breathitt County, KY	Lee County, KY
Powell County, KY	Wolfe County, KY

**Project Information:**

Project Summary
Mountain Comprehensive Care Center, in tandem with community partners representing local health departments, jails, and law enforcement, will implement the Mountain Opioid Prevention Program to improve access to, capacity for, and sustainability of prevention, treatment, and recovery services for rural, underserved individuals with SUD, OUD, in Breathitt, Lee, Powell, and Wolfe counties in eastern KY.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/ODU, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/ODU in the target rural service area.
- Improving capacity for and access to telehealth treatment services for SUD/ODU
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/ODU

**Intended Audience**

<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Race/Ethnicity:</b>	White, Hispanic/Latino/Latinx, Black/African American, Asian or Pacific Islander, Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis, People in recovery from OUD/SUD, People living with disabilities
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	Racial and ethnic minorities, People experiencing homelessness, Veterans, Justice-involved/incarcerated persons, LGBTQ+ populations, People experiencing food insecurity, People who use drugs
<b>Other:</b>	Families and caretakers of people with OUD/SUD, People with low health literacy, Non-English speakers

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Florida
<b>Organization Type:</b>	FQHC
<b>Website:</b>	<a href="http://www.pancarefl.org">www.pancarefl.org</a>
<b>Address:</b>	403 East 11 <sup>th</sup> Street, Panama City, FL 32401

**Grantee Points of Contact:**

<b>Project Director:</b>	Drew Hild, dhild@pancarefl.org
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**Target Service Area(s):**

County, State	
Calhoun County, FL	Franklin County, FL
Jackson County, FL	Liberty County, FL
Washington County, FL	

**Project Information:**

Project Summary
<p>Key activities for the RCORP-Overdose Response project include:</p> <ul style="list-style-type: none"> <li>• Purchasing and distributing naloxone within the target rural service area</li> <li>• Offering MAT waiver training</li> <li>• Assisting uninsured individuals with SUD/OD in the rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services</li> <li>• Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/OD</li> <li>• Improving capacity for and access to telehealth treatment services for SUD/OD</li> <li>• Providing CEUs as well as CME, which allow for providers to enhance their ability to provide care to individuals with SUD/OD</li> <li>• Establishing social services to support individuals in recovery</li> <li>• Providing community-based screenings for SUD/OD and related infectious diseases</li> </ul>

**Focus Areas/Selected Allowable Activities**

- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers’ ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/OD in the target rural service area
- Providing community-based screenings for SUD/OD and related infectious disease

**Intended Audience**

<b>Health Status:</b>	People in recovery from OUD/SUD
<b>Health Access:</b>	Uninsured or underinsured
<b>Economic:</b>	Socioeconomically disadvantaged population

**Organizational Information:**

<b>Project Title:</b>	Petersburg Advancing Telepsychiatry
<b>State:</b>	Arkansas
<b>Organization Type:</b>	Critical Access Hospital
<b>Website:</b>	<a href="https://www.pmcak.org/">https://www.pmcak.org/</a>
<b>Address:</b>	PO Box 589, Petersburg, AK 99833

**Grantee Points of Contact:**

<b>Project Director:</b>	Patrick Sessa, psessa@pmc-health.org
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**Target Service Area(s):**

County, State
Petersburg County, AK

**Project Information:**

Project Summary	
<p>Over 12 months, Petersburg Advancing Telepsychiatry (PAT) will establish and build capacity for a robust, sustainable, integrated telemedicine framework serving all of Petersburg Borough, and bridge current gaps in our service region's access to critical behavioral health care for those affected by SUD/OD.</p> <p>The target rural service region is the 4,000 square mile area served by Petersburg Medical Center. Petersburg Borough and the surrounding rural census areas, located in central Southeast Alaska and accessible only by boat or plane, comprise both a HRSA-designated rural area and a Health Professional Shortage Area (HPSA).</p>	
Focus Areas/Selected Allowable Activities	
<ul style="list-style-type: none"> <li>Improving capacity for and access to telehealth treatment services for SUD/OD</li> </ul>	
Intended Audience	
<b>Health Status:</b>	People with/at risk for OUD or SUD

**Organizational Information:**

<b>Project Title:</b>	Pike County Opioid Overdose Prevention
<b>State:</b>	Missouri
<b>Organization Type:</b>	Critical Access Hospital
<b>Website:</b>	<a href="http://www.pcmh-mo.org">www.pcmh-mo.org</a>
<b>Address:</b>	2305 Georgia Street, Louisiana, MO 63353

**Grantee Points of Contact:**

<b>Project Director:</b>	Suzanne Wommack, <a href="mailto:swommack@pcmhmo.org">swommack@pcmhmo.org</a>
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**Target Service Area(s):**

<b>County, State</b>
Pike County, MO

**Project Information:**

<b>Project Summary</b>
<p>Pike County Memorial Hospital is focusing on integration of services to prevent overdoses of opioids and other drugs, improvement of healthcare delivery systems in the service area that increase access to naloxone to treat overdoses and provide MAT for opioid and substance use, increased access to peer recovery support mechanisms, coordinated and quality essential healthcare services (including identification of diseases related to drug use, referrals for infectious disease treatment), and improvement of population health for Pike County Missouri.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers’ ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO.
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services.
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/OD and related infectious disease.

**Areas Where We Would Like to Serve as a Peer Mentor**

- Integration of MAT into rural health clinic setting

**Areas Where We Would Welcome Technical Assistance**

- Distribution and legalities of free buprenorphine

**Intended Audience**

General population

**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Illinois
<b>Organization Type:</b>	Substance Use Disorder Treatment Provider
<b>Website:</b>	<a href="http://www.pfh.org">www.pfh.org</a>
<b>Address:</b>	639 York Street, Quincy, IL 62301

**Grantee Points of Contact:**

<b>Project Director:</b>	Stacey Julifs, <a href="mailto:stacey.julifs@pfh.org">stacey.julifs@pfh.org</a>
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**Target Service Area(s):**

County, State	
Adams County, IL	Marion County, MO
Monroe County, MO	Pike County, IL
Pike County, MO	Ralls County, MO

**Project Information:**

**Project Summary**

Clarity Healthcare (a division of Preferred Family Healthcare) will implement a Rural Communities Opioid Response Program-Overdose Response project to reduce the morbidity and mortality of SUD/OD in the high-risk rural communities we serve. Our catchment area includes the Missouri counties of Pike, Marion, Monroe, and Ralls, as well as the Illinois counties of Adams and Pike. Through the efforts of the project director, care coordinator/community liaison, and an Illinois-based peer support specialist, the goals of this project are three-fold: (1) Provide education on OUD and overdose to community organizations and individuals, (2) provide behavioral health treatment referral and care coordination for those with SUD/OD experiencing (or at risk for) overdose, and (3) provide wraparound community resource connection and wellness support for those impacted by SUD/OD, including incidents of overdose.

Specific activities will include providing education/outreach to a minimum of 100 individuals and 10 organizations, distributing 200 naloxone kits and 200 medication-disposal kits, and assisting at least 50 clients with copayments and prescription costs. All (100%) participants will be provided with overdose reversal drugs at no cost to them. Project activities will be informed by SAMHSA's Opioid Prevention Toolkit and other evidence-based practices, including SBIRT (screening, brief intervention, referral to treatment), PQH-9 (patient depression questionnaire), DLA-20 (functional assessment tool), care coordination, peer support, patient-centered medical home, MAT, cognitive behavioral therapy, trauma-informed therapy, EMDR, and motivational interviewing.



**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/ODU, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/ODU
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/ODU
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.

**Intended Audience**

<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Race/Ethnicity:</b>	White, Hispanic/Latino/Latinx, Black/African American, Asian or Pacific Islander, Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis, People in recovery from OUD/SUD, People living with disabilities, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	Racial and ethnic minorities, People experiencing homelessness, Pregnant and parenting people, LGBTQ+ populations, People experiencing food insecurity, People who use drugs
<b>Other:</b>	Families and caretakers of people with OUD/SUD, Healthcare workers and providers, Law enforcement and first responders, People with low health literacy

**Organizational Information:**

<b>Project Title:</b>	Harm Reduction Community Hub
<b>State:</b>	Kentucky
<b>Organization Type:</b>	Public Health Organization
<b>Website:</b>	<a href="http://www.purchasehealthconnections.com">www.purchasehealthconnections.com</a>
<b>Address:</b>	916 Kentucky, Paducah, KY 42003

**Grantee Points of Contact:**

<b>Project Director:</b>	Kaitlyn Krolkowski, <a href="mailto:kkrolkowski@purchasehealth.org">kkrolkowski@purchasehealth.org</a>
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**Target Service Area(s):**

County, State	
Ballard County, KY	Calloway County, KY
Carlisle County, KY	Fulton County, KY
Graves County, KY	Hickman County, KY
Marshall County, KY	McCracken County, KY

**Project Information:**

**Project Summary**

Purchase District Health Department (PDHD) is located in far western Kentucky and will serve all eight counties (Ballard, Carlisle, Calloway, Graves, Hickman, Fulton, Marshall, and McCracken) of the region through the RCORP-Overdose grant. Far western Kentucky is a HPSA and has counties with poorer health outcomes, higher rates of poverty, lower educational attainment, less access to care and transportation, and higher rates of STDs/STI and drug arrests than the state of Kentucky.

To address these barriers and needs PDHD will create a Harm Reduction Integrated Community Hub that will serve those with an SUD/ODU through wraparound services, which include:

- STD/STI prevention, testing and counseling, and referral for treatment
- Assistance in accessing treatment for SUD/ODU through an onsite telehealth hub (or when needed, an in-person and/or inpatient SUD/ODU facility)
- Coordination for Medicaid applications for the uninsured
- Access to harm reduction supplies including overdose reversal supplies
- Access to a peer support specialist for both individual and group services to provide community outreach and education and travel to areas where the need is greatest when not at the Harm Reduction Integrated Community Hub

PDHD is part of a greater network and the backbone of the Purchase Area Health Connections. Through these established relationships PDHD has partnered with two local regional hospitals, a sheriff's department, a community mental and behavioral health center, a Ryan White provider, and a recovery community center to implement this project.

### Focus Areas/Selected Allowable Activities

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/ODU care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/ODU
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/ODU and related infectious disease

### Intended Audience

<b>Race/Ethnicity:</b>	White, Black/African American
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People in recovery from OUD/SUD, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Special Populations:</b>	People who use drugs

**Organizational Information:**

<b>Project Title:</b>	Recovery for the Homeless Program
<b>State:</b>	Missouri
<b>Organization Type:</b>	Community-Based Organization
<b>Website:</b>	<a href="http://www.therollamission.org">www.therollamission.org</a>
<b>Address:</b>	708 N. Main Street, Rolla, MO 65401

**Grantee Points of Contact:**

<b>Project Director:</b>	Ashley Brooks, <a href="mailto:ashley@therollamission.org">ashley@therollamission.org</a>
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**Target Service Area(s):**

County, State
Phelps County, MO

**Project Information:**

Project Summary
<p>The project goal is to reduce the morbidity and mortality of SUD, including OUD, in high-risk rural communities. The Rolla Mission (TRM) will address the immediate needs of its rural service area by improving access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD. TRM will focus on key strategies and selected activities that include:</p> <ul style="list-style-type: none"> <li>• Naloxone distribution</li> <li>• Purchasing a vehicle for easier access to treatment</li> <li>• Training and certification (peer support, community health worker, and project ECHOs)</li> <li>• Improving access to behavioral health and social services (including benefits enrollment assistance)</li> <li>• Allowing peer support specialist availability</li> <li>• Increasing access to telehealth</li> <li>• Increasing access to social services to support individuals in recovery</li> </ul> <p>The target population entirely comprises individuals at risk for, diagnosed with, or in treatment and/or recovery for SUD/OUD, their families and/or caregivers, and impacted community members who reside in the rural target service area. There is an emphasis on high-risk subpopulations to include individuals who are uninsured or underinsured and those at risk of or experiencing homelessness.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/OD
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.

**Intended Audience**

<b>Economic:</b>	Socioeconomically disadvantaged population
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**Organizational Information:**

<b>Project Title:</b>	Southern Colorado Rural Communities Peer Recovery Support Specialist Workforce Development Initiative (PRSSWD)
<b>State:</b>	Colorado
<b>Organization Type:</b>	Research Organization
<b>Website:</b>	<a href="https://tsrg.org/">https://tsrg.org/</a>
<b>Address:</b>	P.O. Box 371342, Denver, CO 80237

**Grantee Points of Contact:**

<b>Project Director:</b>	Terri Schreiber, <a href="mailto:terri@tsrg.org">terri@tsrg.org</a>
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**Target Service Area(s):**

County, State	
Bent County, CO	Crowley County, CO
Otero County, CO	

**Project Information:**

**Project Summary**

To increase capacity of services addressing SUD/OD in our community, we will offer a formalized training program for peer recovery support specialists (PRSSs) that will include supervision, professional mentorship, and a clear path to certification.

Currently, there are 16 PRSSs employed by agencies in our region, only 4 of whom are certified. Through anonymous surveys administered in the region, we learned that PRSSs are experiencing burnout, feel "pulled in too many directions," want to become certified, and are seeking a career track in peer recovery support. Peers are experientially qualified and are seeking more structure and support to continue providing a lifeline to clients in the region. To directly address peer feedback, provide targeted support, improve confidence in one's skill set, and enable peer retention, the training will include skill building, supervision/mentorship, boundary identification, an opportunity to choose specialty, self-care strategies, and a pathway to certification.

Collaborating regional agencies report that they not only find value in their current peer recovery support specialists but are also wanting to increase the number of peers in their respective agencies to better meet client needs. In order to meet this immediate need, we are training PRSSs and coordinating their placements in three local SUD/OD service delivery sites. These peers will serve as a free resource for these agencies as they complete their training, supervision, and certification, alleviating some of the workload current peers hold. Another means of creating access to recovery services is through improving capacity for and access to telehealth treatment services for SUD/OD in the participating agencies in our area. Therefore, we plan to assess telehealth capacity and technology among regional agencies to ensure that all clients will have equitable access to the growing treatment resources in the region.

**Focus Areas/Selected Allowable Activities**

- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/OD

**Areas Where We Would Like to Serve as a Peer Mentor**

- Inpatient and outpatient treatment facilities for SUD/OD
- Co-responder agencies that include law enforcement and SUD/OD treatment providers, and the local public health department community liaison

**Areas Where We Would Welcome Technical Assistance**

- To be determined, it will depend on the various agency's responses to the placement of the peers on a rotation schedule. This is brand new, and we are investigating.

Intended Audience	
<b>Health Status:</b>	People in recovery from OUD/SUD
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons



**Organizational Information:**

<b>Project Title:</b>	Beyond the Clinic: Expanding Access to SUD/OD Treatment in Ashtabula County, Ohio
<b>State:</b>	Ohio
<b>Organization Type:</b>	Behavioral Health Provider, FQHC, Health Care Provider, Substance Use Disorder Treatment Provider
<b>Website:</b>	<a href="https://www.signaturehealthinc.org/">https://www.signaturehealthinc.org/</a>
<b>Address:</b>	7232 Justin Way, Mentor, OH 44060

**Grantee Points of Contact:**

<b>Project Director:</b>	Anna Whitmer, <a href="mailto:awhitmer@shinc.org">awhitmer@shinc.org</a>
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**Target Service Area(s):**

<b>County, State</b>
Ashtabula County, OH

**Project Information:**

<b>Project Summary</b>
<p>Signature Health, Inc. (SHI) will expand its mobile clinic initiative and improve capacity for OUD and SUD telehealth and home-based treatments. SUD and OUD screenings at community locations will be co-delivered with screening and testing for infectious diseases, impacting 525 individuals in rural Ashtabula County, (the largest county by area in Ohio, representing 8% of the Ohio population). The populations most impacted by the opioid epidemic are those that have low income or live in poverty, have a lack of transportation and access to medical care, are veterans, and those currently experiencing SUD or OUD and needing access to treatment.</p> <p>In 2021, 27 individuals in the County experienced an accidental overdose (23 involving fentanyl), and the number of responses to non-fatal overdoses increased by 39% from 2020 to 2021. The largest barrier to drug and alcohol treatment in Ashtabula County is transportation. Nine percent of County residents do not have a vehicle in their household (7.7% in Ohio) and nearly half (49.5%) of adult residents travel outside of the county for healthcare.</p> <p>Funding from HRSA's RCORP-Overdose Response Program will support SHI's mobile clinic, providing resources to expand best-practice harm reduction activities and access to treatment. Activities include prevention of overdose deaths by distributing naloxone and fentanyl test strips, providing education and resources in low population areas of the county, and offering infectious disease screening and testing. Activities supporting access to treatment include beginning and maintaining MAT through accessible treatment, including induction and ongoing treatment in patients' homes, intensive outpatient program (IOP) groups, a telehealth option for IOP, and expanded transportation options. Bringing help to where people live means that individuals can access the treatment they need without traveling outside of the county.</p>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/ODU care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Improving capacity for and access to telehealth treatment services for SUD/ODU
- Establishing social services to support individuals in recovery, such as childcare services during doctor’s appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/ODU and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- The project director has experience starting up and leading MAT, including MAT access clinics offering same-day or next-day assessments and medication inductions.

**Areas Where We Would Welcome Technical Assistance**

- Technical assistance or peer support for best practices on logistics and scheduling patients in a large county for home/community-based SUD/ODU nursing
- Best practices for offering transportation options for SUD/ODU treatment in a large rural county

**Intended Audience**

<b>Age:</b>	Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis, People in recovery from OUD/SUD, People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population, Unemployed persons
<b>Special Populations:</b>	Racial and ethnic minorities, People experiencing homelessness, Veterans, People experiencing food insecurity, People who use drugs
<b>Other:</b>	People with low health literacy

**Organizational Information:**

<b>Project Title:</b>	START-SD-OR Program (Stigma, Treatment, Avoidance, and Recovery in Time – Overdose Response)
<b>State:</b>	South Dakota
<b>Organization Type:</b>	Institution of Higher Education
<b>Website:</b>	<a href="https://www.sdstate.edu/cpic">https://www.sdstate.edu/cpic</a>
<b>Address:</b>	Box 2202C, Brookings, SD 57007

**Grantee Points of Contact:**

<b>Project Director:</b>	Erin Miller, Erin.Miller@sdstate.edu
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**Target Service Area(s):**

County, State	
Hughes County, SD	Lyman County, SD
Roberts County, SD	Yankton County, SD

**Project Information:**

**Project Summary**

The Stigma, Treatment, Avoidance, and Recovery in Time-Overdose Response (START-SD-OR) project aims to reduce morbidity and mortality associated with overdoses related to substance use in target communities among adults aged 18–54. This project will expand our current innovative START-SD program. START-SD has three prongs, funded by separate RCORP awards, which address key barriers to the prevention, treatment, and recovery services for OUD and psychostimulant use disorder. The START-SD-OR project will leverage the tremendous skills and resources from seven of our consortium organizations: SDSU, USD, Coteau des Prairies Health Care System, Face It TOGETHER, Straight Up Care, South Dakota Foundation for Medical Care, and Emily's Hope.

The target rural service area includes Yankton, Lyman, Roberts, and Hughes Counties, which have a combined population of 54,918 people. All four counties are listed as HPSAs and mental health professional shortage areas, and all four counties are deemed to have an elevated risk for overdose and other substance-related outcomes. Through the START-SD-OR program, the project team and partner organizations will complete work to distribute harm reduction supplies, including naloxone prescriptions and fentanyl test strips, integrate evidence-based strategies for education and training activities among healthcare staff in the target counties, reinforce and grow existing peer-recovery support organizations and resources, and conduct anti-stigma work through community outreach and healthcare staff education. This approach will improve overall access and use of services and improve long-term outcomes in our target counties.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to), Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.

**Areas Where We Would Like to Serve as a Peer Mentor**

- Leading a project as a non-provider organization

**Areas Where We Would Welcome Technical Assistance**

- Housing

**Intended Audience**

<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD, People in recovery from OUD/SUD
<b>Special Populations:</b>	Racial and ethnic minorities
<b>Other:</b>	Families and caretakers of people with OUD/SUD, Healthcare workers and providers

**Organizational Information:**

<b>Project Title:</b>	SPTHB RCORP-OR Initiative
<b>State:</b>	Oklahoma
<b>Organization Type:</b>	Tribal Organization, Nonprofit
<b>Website:</b>	<a href="https://spthb.org/">https://spthb.org/</a>
<b>Address:</b>	9705 N Broadway Extension, Oklahoma City, OK 73114

**Grantee Points of Contact:**

<b>Project Director:</b>	Amber Martinez, <a href="mailto:amartinez@spthb.org">amartinez@spthb.org</a>
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**Target Service Area(s):**

County, State	
Adair County, OK	Alfalfa County, OK
Atoka County, OK	Beaver County, OK
Beckham County, OK	Blaine County, OK
Bryan County, OK	Caddo County, OK
Carter County, OK	Cherokee County, OK
Choctaw County, OK	Cimarron County, OK
Coal County, OK	Cotton County, OK
Craig County, OK	Creek County, OK
Custer County, OK	Delaware County, OK
Dewey County, OK	Ellis County, OK
Garfield County, OK	Garvin County, OK
Grady County, OK	Grant County, OK
Greer County, OK	Harmon County, OK
Harper County, OK	Haskell County, OK
Hughes County, OK	Jackson County, OK

County, State	
Jefferson County, OK	Johnston County, OK
Kay County, OK	Kingfisher County, OK
Kiowa County, OK	Latimer County, OK
Le Flore County, OK	Lincoln County, OK
Love County, OK	Major County, OK
Marshall County, OK	Mayes County, OK
McCurtain County, OK	McIntosh County, OK
Murray County, OK	Muskogee County, OK
Noble County, OK	Nowata County, OK
Okfuskee County, OK	Okmulgee County, OK
Osage County, OK	Ottawa County, OK
Pawnee County, OK	Payne County, OK
Pittsburg County, OK	Pontotoc County, OK
Pottawatomie County, OK	Pushmataha County, OK
Roger Mills County, OK	Rogers County, OK
Seminole County, OK	Sequoyah County, OK
Stephens County, OK	Texas County, OK
Tillman County, OK	Wagoner County, OK
Washington County, OK	Washita County, OK
Woods County, OK	Woodward County, OK

**Project Information:**

**Project Summary**

The South Plains Tribal Health Board (SPTHB)-RCORP-OR Initiative implements the following strategies and activities to support the overall goal of the 1-year RCORP HRSA initiative:

- Strategy 1: Provide funding, support, and sustainability to the established SPTHB SovereignME Harm Reduction Initiative. This strategy provides an immediate response to the opioid crisis in rural Tribal communities.
  - Activity 1(1): Purchase and distribute naloxone, fentanyl test strips, and other relevant, harm reduction supplies within the target population noted above
  - Activity 2 (9): Establish services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
  - Activity 3: SPTHB will work with KAT Media to create an anti-stigma and marketing campaign for the SovereignME Harm Reduction Initiative
- Strategy 2: Improve the quality and sustainability of rural SUD/OD health care services by supporting and training rural, Tribal peer recovery support specialists, other behavioral healthcare staff, and medical healthcare providers
  - Activity 1 (5): Training peer recovery support specialists and coordinating their placements and partnerships in and with relevant local Tribal facilities and other SUD/OD service delivery sites (EDs, primary care, jails/prisons, behavior health care clinics, etc.)
  - Activity 2 (8): Provide CEUs and CME that are recognized by the respective boards by offering a culturally competent safer prescribing training
- Strategy 3: Address the immediate needs of Tribal rural communities by improving access to and capacity for treatment and recovery services for SUD/OD.
  - Activity 1 (12): Establish social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery-friendly employment opportunities, etc.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Providing Continuing Education Units (CEU) as well as Continuing Medical Education Units (CME) that are recognized by their respective boards, which allow for providers to enhance their ability to provide care to individuals with SUD/OD
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.

**Areas Where We Would Like to Serve as a Peer Mentor**

- Developing and training for peer support

**Intended Audience**

General population



**Organizational Information:**

<b>Project Title:</b>	Reducing Overdose Deaths by Coordinating a Recovery Ecosystem (CARE) in Rowan County, KY
<b>State:</b>	Kentucky
<b>Organization Type:</b>	Rural Local Hospital
<b>Website:</b>	<a href="https://www.st-claire.org/">https://www.st-claire.org/</a>
<b>Address:</b>	222 Medical Circle, Morehead, KY 40351-1179

**Grantee Points of Contact:**

<b>Project Director:</b>	Luke Stapleton, luke.stapleton@st-claire.org
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**Target Service Area(s):**

<b>County, State</b>
Rowan County, KY

**Project Information:**

<b>Project Summary</b>
This project will create an RCO in Morehead, KY. The RCO will serve as a safe space for those seeking to enter or sustain their recovery as well as the loved ones of those who have an SUD. The RCO will provide social services, such as housing and employment support, and transportation to recovery related appointments. The RCO will also serve as a beacon of hope in the community and will strive to reduce the stigma related to SUD and recovery by hosting events and community service days.
<b>Focus Areas/Selected Allowable Activities</b>
<ul style="list-style-type: none"> <li>Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services</li> <li>Establishing an RCO</li> <li>Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery-friendly employment opportunities, etc.</li> </ul>
<b>Areas Where We Would Welcome Technical Assistance</b>
<ul style="list-style-type: none"> <li>We would welcome hearing from other organizations that have built an RCO from the ground up.</li> </ul>
<b>Intended Audience</b>
General population

**Organizational Information:**

<b>Project Title:</b>	Danville Virginia OBOT Clinic Peer Recovery Specialists
<b>State:</b>	Virginia
<b>Organization Type:</b>	Behavioral Health Provider
<b>Website:</b>	<a href="https://www.crossroadstreatmentcenters.com/">https://www.crossroadstreatmentcenters.com/</a>
<b>Address:</b>	1555 Meadowview Drive, Suite 7, Danville, VA 24541

**Grantee Points of Contact:**

<b>Project Director:</b>	Cynthia Payne, cpayne@ctc.care
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**Target Service Area(s):**

County, State	
Caswell County, NC	Charlotte County, VA
Floyd County, VA	Franklin County, VA
Franklin City County, VA	Galax County, VA
Halifax County, VA	Henry County, VA
Mecklenburg County, VA	Montgomery County, VA
Patrick County, VA	Person County, NC
Pittsylvania County, VA	Rockingham County, NC
Wilkes County, NC	Wythe County, VA

**Project Information:**

**Project Summary**

Crossroads has been at the forefront of treating patients with opioid use disorder (OUD) since its inception in 2005. Crossroads operates 125 clinics across 10 states and employs doctors, nurse practitioners, counselors, and professionals dedicated to providing the most accessible and highest-quality treatment to combat the opioid epidemic and help people with OUD start a path to recovery. Crossroads operates more than 30 Opioid Treatment Programs (OTPs) and 95 Office-Based Opioid Treatment (OBOT) clinics in Colorado, Georgia, Kentucky, New Jersey, North Carolina, South Carolina, Pennsylvania, Tennessee, Texas, and Virginia. Crossroads lives by its organizational mission to improve health equity in order to create superior outcomes. Crossroads uses evidence-based MAT across multiple modalities paired with referrals for social supports to help people with OUD create better lives for themselves and their families.

Starting Point of Virginia, P.C. is a Crossroads clinic in Danville, VA. Crossroads is committed to providing high-quality, cost-effective care to patients in Virginia, living by the organization's mission and passion for SUD/OUD harm reduction and treatment. Crossroads will continue its organizational efforts by expanding the center's approach to improving access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD and OUD by incorporating peer support specialists. The project activities focus on rural communities that have experienced historically poor health outcomes and have special populations, including low-income people over 50 and minority and rural populations that have been socioeconomically disadvantaged.

Crossroads will focus on the following project activities: (4) assisting uninsured individuals with SUD/OUD in the target rural service area with obtaining health insurance and accessing SUD/OUD treatment and other behavioral health and social services, and (5) training peer recovery support specialists and coordinating their placements in local SUD/OUD service delivery sites, such as EDs, primary care, jails/prisons, behavioral health care clinics, etc. □

By the end of project funding, Crossroads will have expanded its organizational capacity to reach more patients throughout rural Virginia, targeting at-risk populations and ensuring they are aware of the services offered by Crossroads.

To achieve the project objectives and establish a sustainable approach to addressing the opioid epidemic, Crossroads will focus on building capacity by expanding the workforce and its education and trainings provided on the support, prevention, and screening of SUD.

Additionally, Crossroads will target uninsured individuals with SUD/OUD and ensure they have the resources and personnel available to them to obtain health insurance coverage, removing a barrier to care identified among the population. Crossroads will engage community-based organizations and gather evidence-based practices from RCORP recipients and additional Crossroads clinics that have established programming models for those living with SUD/OUD.

# T.E.A.R.S. (Teens Empowerment Awareness with Resolutions)

## Organizational Information:

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Alabama
<b>Organization Type:</b>	Community-Based Organization, Substance Use Disorder Treatment Provider, Telehealth Network
<b>Website:</b>	<a href="https://rrcmbb.com/">https://rrcmbb.com/</a>
<b>Address:</b>	501 School Street, Tuskegee, AL, 36083

## Grantee Points of Contact:

<b>Project Director:</b>	Angelia C. Walton, cofaye@aol.com
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## Target Service Area(s):

County, State	
Barbour County, AL	Bullock County, AL
Macon County, AL	

## Project Information:

### Project Summary

Teens Empowerment Awareness with Resolutions (TEARS) RCORP Overdose Response Program through the Recovery Resource Center (RRC) will provide service to address the needs of individuals and families impacted by SUD/OD. TEARS will target both adolescents and adults in the Macon, Bullock, and Barbour counties who are at risk for, have been diagnosed with, or are in treatment/recovery for SUD/OD.

Our mission is to create a culture within a three-county area where the awareness, education, prevention, treatment, and recovery support services for adolescents and adults are an integral part of the community and recognized as a vital resource for the health, social well-being, and economic welfare of Macon, Bullock, and Barbour counties.

TEARS will provide services including but not limited to the following: intake assessment, individualized treatment plan, case management, individual counseling, psychoeducation, crisis intervention, and peer support. TEARS will also facilitate Narcotics Anonymous and Alcoholics Anonymous meetings in Macon and Bullock counties.

To become better involved with the adolescents, TEARS still continues to provide substance use prevention programs at Tuskegee Public School in Macon County. An evidence-based curriculum will be used to address substance use and encourage positive life skills. The RRC and TEARS will provide substance use outreach, screenings, and referral to withdrawal

## T.E.A.R.S. (Teens Empowerment Awareness with Resolutions)

management and higher levels of treatment, access to MAT, recovery housing, and recovery support.

The TEARS RCORP Project has organized a consortium team, including members from Macon County District Court, Macon County Community Corrections, and Macon County Schools to assist with identifying and serving those with SUD/OD in the communities we serve.

The overall goal of this project is to provide access to treatment, reduce stigma related to SUD/OD, and save lives.

### Focus Areas/Selected Allowable Activities

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Establishing a recovery home or other supportive housing program
- Providing community-based screenings for SUD/OD and related infectious disease

### Areas Where We Would Like to Serve as a Peer Mentor

- Our local government official—to assist with rural projects and to help educate each community that lacks peer support about available services provided to them

### Areas Where We Would Welcome Technical Assistance

- TEARS would welcome peer-support activities to assist with overcoming transportation issues and sustainability.

### Intended Audience

General population

**Organizational Information:**

<b>Project Title:</b>	UMUT's RCORP Overdose Response
<b>State:</b>	Colorado
<b>Organization Type:</b>	Tribal Government
<b>Website:</b>	<a href="http://www.moguan.life">www.moguan.life</a>
<b>Address:</b>	118 Spruce Street, Towaoc, CO 81334

**Grantee Points of Contact:**

<b>Project Director:</b>	DeAnne House, DeanneHouse@utemountain.org
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**Target Service Area(s):**

County, State	
Montezuma County, CO	San Juan County, UT

**Project Information:**

Project Summary
<p>The Ute Mountain Ute are a federally recognized Tribe living on the 889.1 square miles of the Ute Mountain Ute Tribe (UMUT) Reservation in the Four Corners Region of America’s Southwest, spanning across Montezuma County, Colorado (Towaoc) and San Juan County, Utah (White Mesa) —a community entirely eligible in the Rural Health Grants Analyzer.</p> <p>UMUT has long faced the devastating impact of SUD and OUD, an epidemic that impacts youth, families, adults, and older adults alike. Committed to supporting proactive efforts to build a better life, UMUT opened a new behavioral health building, Mógúán (“my heart” in the Ute dialect), in late 2019, offering culturally appropriate services to confront long-held stigmas that surround substance use in this isolated community. With a one-time infusion of dollars, UMUT’s Mógúán will be prepared with additional certified peer recovery coaches, additional treatment space, and a new telehealth mobile crisis intervention unit that can bring evidence-based SUD/OUD treatment services to all corners of the rural, remote UMUT reservation.</p>

**Focus Areas/Selected Allowable Activities**

- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Improving capacity for and access to telehealth treatment services for SUD/OD

**Areas Where We Would Like to Serve as a Peer Mentor**

- Award winning website development

**Areas Where We Would Welcome Technical Assistance**

- Staff development and training

**Intended Audience**

<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
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**Organizational Information:**

<b>Project Title:</b>	Rural Communities Opioid Response Program-Overdose Response
<b>State:</b>	Nevada
<b>Organization Type:</b>	Substance Use Disorder Treatment Provider
<b>Website:</b>	<a href="https://vegasstronger.org/">https://vegasstronger.org/</a>
<b>Address:</b>	916 N Main Street, Las Vegas, NV 89101

**Grantee Points of Contact:**

<b>Project Director:</b>	April Adams, april@vegasstronger.org
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**Target Service Area(s):**

County, State
Nye County, NV

**Project Information:**

Project Summary
<p>The project goal is to reduce morbidity and mortality of opioid overdoses across Nye County, Nevada, by expanding a successful OUD/SUD/co-occurring use disorder response model from Las Vegas into the first of many potentially under-served rural areas. Vegas Stronger will address the immediate needs of this rural county by distribution of naloxone and fentanyl test strips, establishment of a new care delivery site, improving access to behavioral health and social services (including support enrolling in health insurance and other government assistance), and increasing access to both telehealth and community-based screenings for OUD/SUD/co-occurring disease and related infectious diseases.</p>
Focus Areas/Selected Allowable Activities
<ul style="list-style-type: none"> <li>• Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area</li> <li>• Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.</li> <li>• Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services</li> <li>• Improving capacity for and access to telehealth treatment services for SUD/OD</li> <li>• Providing community-based screenings for SUD/OD and related infectious disease</li> </ul>



**Areas Where We Would Welcome Technical Assistance**

- We are particularly interested in expertise related to telehealth implementation and optimization, ensuring that our services are accessible and effective in a virtual setting.
- We highly value peer support that focuses on SUD and addiction recovery, relapse prevention, and coping strategies for mental health challenges.
- Overall, our goal is to empower our clients with the tools, connections, and knowledge they need for a successful recovery journey.

**Intended Audience**

<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs
<b>Health Access:</b>	Uninsured or underinsured, Medicaid or Medicare recipients, Medically underserved
<b>Special Populations:</b>	People experiencing homelessness, people who use drugs

**Organizational Information:**

<b>Project Title:</b>	Increasing Overdose Response for Wabanaki People
<b>State:</b>	Maine
<b>Organization Type:</b>	Behavioral Health Provider, Community-Based Organization, Harm Reduction Organization, Public Health Organization, Substance Use Disorder Treatment Provider, Tribal Organization
<b>Website:</b>	<a href="https://wabanakiphw.org/">https://wabanakiphw.org/</a>
<b>Address:</b>	P.O. Box 1356, Bangor, ME 04402

**Grantee Points of Contact:**

<b>Project Director:</b>	Sharon Jordan, stomah@wabanakihw.org
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**Target Service Area(s):**

County, State	
Aroostook County, ME	Northern Penobscot County, ME
Washington County, ME	

**Project Information:**

Project Summary
<p>Wabanaki Public Health and Wellness (WPHW) intends to increase overdose response for Native Americans and to address immediate unmet needs in rural areas through improving and enhancing access to, capacity for, and sustainability of prevention, treatment, and recovery services for SUD. WPHW will increase our overdose response through:</p> <ul style="list-style-type: none"> <li>• Training and professional development of staff</li> <li>• Strengthening partnerships to enhance the system of care</li> <li>• Enhancing our capacity to respond to mobile crisis activations</li> <li>• Improving our capacity to provide and accessibility for telehealth</li> <li>• Building capacity to incorporate community-based screenings</li> </ul>

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/OD care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/OD, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/OD in the target rural service area with obtaining health insurance and accessing SUD/OD treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/OD service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/OD in the target rural service area
- Improving capacity for and access to telehealth treatment services for SUD/OD
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing a recovery home or other supportive housing program
- Establishing a recovery community organization
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/OD and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- Services in rural settings

**Areas Where We Would Welcome Technical Assistance**

- Mobile clinics

Intended Audience	
<b>Age:</b>	Adolescents (13-17), Young Adult (18-24), Adult (25-64), Older Adult (65+)
<b>Race/Ethnicity:</b>	Tribal populations/Native Americans/American Indian/Alaska Native
<b>Health Status:</b>	People with/at risk for OUD or SUD, People who inject drugs, People with/at risk for co-occurring conditions as a result of SUD (e.g., cirrhosis, HIV, hepatitis), People with/at risk for co-occurring conditions (mental illness, eating disorders, etc.)
<b>Health Access:</b>	Uninsured or underinsured, Medically underserved
<b>Economic:</b>	Socioeconomically disadvantaged population
<b>Special Populations:</b>	People experiencing homelessness, Veterans, Justice-involved/incarcerated persons, LGBTQ+ populations, People who use drugs

### Organizational Information:

<b>Project Title:</b>	Overdose Response in Washington County Missouri
<b>State:</b>	Missouri
<b>Organization Type:</b>	Critical Access Hospital
<b>Website:</b>	<a href="http://www.wcmhosp.org">www.wcmhosp.org</a>
<b>Address:</b>	300 Healthway Drive, Potosi, MO 63664

### Grantee Points of Contact:

<b>Project Director:</b>	Tammy Miller, tmiller@wcmhosp.org
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### Target Service Area(s):

County, State
Washington County, MO

### Project Information:

#### Project Summary

This Overdose Response funding request will maintain the same overarching goal of existing RCORP efforts by continuing to allow network members to meet the needs of the rural population of Washington County. The network commits to removing barriers to quality care by meeting the person where they are at on their care journey, both literally and figuratively. RCORP-Overdose Response funds, if awarded to the Network, will enhance acute care delivery for those in crisis, use specific behavioral health strategies at existing points of care, and create new community points of care to provide support and healthcare access to our most vulnerable and underserved populations. To summarize, the network is proposing to pick up where education, prevention, and the administration of naloxone leaves off, improving the SUD/OD patient journey from emergency/acute care response to comprehensive care to recovery.

The goal will be to build upon the existing foundation of work that has been put into place through past and present RCORP funding by improving access to not only SUD prevention, treatment, and recovery but other needed acute and non-acute behavioral health care services.

While the Network has coalesced and is actively providing SUD/OD prevention, treatment, and recovery services to adults and adolescents, disparate unserved populations still exist within the Network's service population. RCORP Health Disparities Impact assessments conducted by the Rural Health Network show several populations still in need of network assistance to bridge significant barriers to care, education, and recovery support. Additionally, services, existing and proposed, offered by the Rural Health Network will be available to the entire target population. Existing and proposed services will help support individuals in

treatment or recovery and provide a variety of interventions within an exceptionally vulnerable population to SUD/ODU.

**Focus Areas/Selected Allowable Activities**

- Purchasing and distributing naloxone, fentanyl test strips, or other relevant supplies within the target rural service area
- Establishing, improving, or expanding physical SUD/ODU care delivery sites, including through, but not limited to, conducting minor renovations, purchasing a mobile unit for providing/expanding access to treatment, etc.
- Offering certification, formalized training programs, and/or professional mentorship opportunities to enhance providers' ability to care for individuals with SUD/ODU, such as (but not limited to) Peer Recovery Coach certification, Medication Assisted Treatment waiver training, and Project ECHO
- Assisting uninsured individuals with SUD/ODU in the target rural service area with obtaining health insurance and accessing SUD/ODU treatment and other behavioral health and social services
- Training peer recovery support specialists and coordinating placements in local SUD/ODU service delivery sites, such as emergency departments, primary care, jails/prisons, behavioral health care clinics, etc.
- Enhancing capacity to provide mobile crisis intervention services for individuals with SUD/ODU in the target rural service area.
- Establishing services to reduce transmission of infectious diseases, such as, but not limited to, hepatitis A and B vaccinations, pre- and post-exposure prophylaxis for HIV, hepatitis C treatment, etc.
- Establishing a recovery community organization
- Establishing social services to support individuals in recovery, such as childcare services during doctor's appointments, transportation to treatment and counseling, connections to recovery friendly employment opportunities, etc.
- Providing community-based screenings for SUD/ODU and related infectious disease

**Areas Where We Would Like to Serve as a Peer Mentor**

- Consortium relationships and management

**Areas Where We Would Welcome Technical Assistance**

- Case management for OUD/SUD and behavioral health patients

**Intended Audience**

General population