

OCCATI SUSTAINABILITY PLAN (2022-ongoing)

Through quantitative data analysis of county healthcare availability and utilization coupled with resident surveys on their attitudes toward county healthcare, OCCATI identified three primary barriers to SUD/ODU prevention, treatment, and recovery support services:

- (1) the SUD/ODU healthcare continuum is incomplete, and services are fragmented, due in part to low usage rates;
- (2) fear of being stigmatized and bias against healthcare, especially mental and behavioral healthcare, results in existing resources being underutilized;
- (3) citizen disengagement has prevented the county from fully exploring and implementing potential solutions to the lack of SUD/ODU services.

OCCATI prioritized the following evidence-based strategies to overcome the identified barriers:

- (1) Providing specialized SUD/ODU training for the providers, first responders, community and faith leaders, and school personnel;
- (2) Hiring Care Coordinator and Peer Support Specialists;
- (3) Implementing a Quick Response Team;
- (4) Devising specialized programs for vulnerable populations in the region to Owen County;
- (5) Creating a complement of workforce pipeline initiatives, including K-12 programming, clinical training sites in Owen County, and loan repayment support;
- (6) Educating the community to reduce stigma and instill a Culture of Health; and
- (7) Lobbying for an integrated care Medicaid reimbursement pilot in Owen County.

Immediate Project Funding and Implementation

Regional partners have received both an HRSA-RCORP Implementation grant and an HRSA-OWEP Paraprofessional grant to support the OCCATI strategic plan for Owen County. The sustainability plan below focuses on sustaining efforts after the new grant funding lapses in 2022 and lists the mechanisms and metrics for those initiatives designed to continue beyond the end of the granting period.

OCCATI SUSTAINABILITY PLAN

OBJECTIVE 1: REDUCE GAP IN SERVICES IN THE OUD HEALTHCARE CONTINUUM				
<i>Objectives</i>	<i>Intermediate Outcome Indicators</i>		<i>Date</i>	<i>Lead Agency</i>
Expand # of providers for OUD services	6 OUD-trained providers in Owen County		9/23	T, N
Increase peer support services	4 Peer Support Specialists in Owen County		9/23	N
Expand recovery programming	50% increase in people remaining in remission		9/23	CC, QRT
Expand OUD early intervention programs	50% decrease in hospitalizations for drug misuse		9/23	OCS
Maintain services for pregnant women and former inmates	Specialized services available for pregnant women and former inmates		9/23	SEH, N, TRDHD
Strategies	Activities	Organization Responsible	Resources for Support	Key Performance Indicators
Implement pipeline programs in health-related careers for OC	Continue Teen Health Café in OCS Continue Middle School Health Careers Exploration in OCS Continue Simulation Center Field Trips in OCS	NKU	NKU, OCS, NSF, NIH	# OCS students who participate in pipeline programs annually

	Reserve two spots for OC students in Nursing Summer Camp and BRAIN Summer Academy	NKU		
	Continue the Addiction Counseling & Prevention micro-credential at NKU	NKU	NKU	# of students who participate annually
	Continue training sites with N in OC	NKU, N		
	Continue clinical training sites with Triad in OC	NKU, T		
	Provide loan forgiveness advising to NKU healthcare students	NKU	NKU, NHSC	# of students who apply annually
Implement Certified Peer Support Specialists in OC care continuum for SUD/ODD	Continue peer support specialist training for rural areas	NKU, MHA	NKU, MHA	# of Certified Peer Support Specialists who practice in OC annually
Implement mentoring network for providers in OC	Schedule mentoring conversations	N, SEH, T	N/A	100% of OC providers have a mentor
Implement SBIRT in OCS	Continue train-the-trainer model	NKU, OSC	N/A	# of referrals and interventions
	Universal screening continues	OCS	N/A	
Implement St. Elizabeth Baby Steps program for new moms in OC	Integrate St. Elizabeth Baby Steps program with TRDHD Hand's program, N's KY Mom's Matter program, and OCS's early childhood program	SEH	SEH	# of new participants who engage with the program annually

OBJECTIVE 2: INCREASE UTILIZATION OF EXISTING OUD RESOURCES				
Objectives	Intermediate Outcome Indicators		Date	Lead Agency
Increase No Wrong Door access	40% increase in service utilization		9/23	NKYODCP
Increase access to Naloxone	40% decrease in OUD-related deaths		9/23	TRDHD
Increase community engagement in health initiatives	100% increase in residents' participation in OUD advocacy		9/23	NKU
Increase insurance utilization	40% increase in OUD-related billable hours claimed		9/23	T, N
Increase public transportation usage	60% increase in public transportation runs		9/23	OC
Strategy	Activities	Organization Responsible	Resources for Support	Key Performance Indicators
Implement a QRT and re-entry program	Continue QRT and re-entry programs	NKYODCP, OC	KORE	% increase in those in treatment or receiving recovery/social services
Offer care coordination	Continue Care Coordinator position, leveraging TRDHD's harm reduction programs	NKU, T, TRDHD	KORE	% increase in those receiving SUD or support services
Train faith community leadership in SBIRT	Implement train-the-trainer model	Faith leaders	N/A	% of the faith leaders trained

GOAL: REDUCE STIGMA AND DISCONNECTION PREVENTING COMMUNITY OUD SOLUTIONS					
Objectives		Intermediate Outcome Indicators		Date	Lead Agency
Increase faith community engagement		60% increase in faith-based support programs		9/23	NKU
Increase community understanding of OUD		70% increase in community metrics		9/23	NKU
Reduce stigma associated with behavioral healthcare		70% decrease in community stigma metrics		9/23	NKU
Increase engagement of youth in health topics		75% increase in youth seeking health-related career		9/23	NKU
Improve first responders' interactions		40% decrease in "frequent fliers"		9/23	NKYODCP
Strategy	Activities	Organization Responsible	Resources for Support	Key Performance Indicators	
Launch Golden Triangle PAR	Continue Golden Triangle PAR meetings	TRDHD	TRDHD	# of OC residents who attend PAR meetings	
Implement NAMI support group	Continue NAMI support group	NKU	N/A	# of OC residents who are members of NAMI support group	
Implement OCS SUD/OUD Educational Program	Continue OSC SUD/OUD programming	OCS	OCS	% of OSC students who have decreased stigma measure and % increase in students engaged in SUD advocacy	
Implement Owen County Youth Advisory Board	Continue youth advisory board	NKU, OCS, OCDPC	NKU, OCS	% increase in youth interest in health-related careers	

KEY: KORE = Kentucky Opioid Response Effort [STR grant]; N = NorthKey Community Care; NIH = National Institutes of Health; NKU = Northern Kentucky University; NKYODCP= Northern Kentucky Office of Drug Control Policy; NSF = National Science Foundation; OC=Owen County; OCDPC= Owen County Drug Prevention Coalition; OCS= Owen County Schools; PAR=People Advocating Recovery; SEH=St. Elizabeth Healthcare; T=Triad Healthcare; TRDHD=Three Rivers District Health Department; QRT = Quick Response Team

OCCATI utilized the *Program Sustainability Assessment Tool* (Washington University at St. Louis) to identify the primary programmatic elements required to maintain the impact of efforts. The following areas were highlighted: Funding Stability, Communication, and Partnerships. The overall assessment by the consortium indicated strong confidence in the program's sustainability (5.7 on scale of 1-7). This sustainability plan focuses on these key elements and builds on *The Dynamics of Sustainability: A Primer for Rural Health Organizations* (n.d).

Future Funding Stability

The workforce pipeline programs, including the K-12 initiatives, the clinical training sites, peer support specialist training, and the loan repayment support, are all in NKU's direct interest to continue after the funding period expires. They also align with the institution's values and mission. Several of the proposed programs include developing a "train-the-trainer" model for long-term sustainability. Additional programs (Care Coordinators, QRTs, Baby Steps) are extensions of regional initiatives already in existence and the sponsoring agencies are willing to support the expansion after termination of grant funding, assuming billing data indicates an appropriate return on initial investment. The established mentorship relationships should continue beyond the funding period as well, for these are mutually beneficial.

OCCATI's training programs for providers includes how to maximize reimbursements across all insurance types for SUD/ODU services. Part of the responsibilities of the Care Coordinator will be to facilitate health insurance enrollments of eligible uninsured residents. However, due to Medicaid expansion, the current rate of uninsured residents in Owen County is quite low. All NorthKey offices have "Kynectors" to assist with insurance navigation and Medicaid as well. Moreover, all service providers in Owen County have affiliated charity programs already in existence for the uninsured and underinsured.

Additional funding to continue to support the proposed activities include Narcan for naloxone for a variety of public spaces and philanthropic foundations to support disposal kits, K-12 programming, and school-based health centers. Owen County's House Representative Kim Moser, the current chair of the House Standing Committee for Health and Family Services, is attempting to secure funding to support social workers in police departments. Most of the practices in our strategic plan include services that can be reimbursed by Medicaid through federal regulatory provisions for "value added services." OCCATI will work with the offices of the Kentucky Secretary for Health and Family Services and the Secretary of Justice and Public Safety to fund our implementation activities as a value-based pilot project for the Commonwealth.

Finally, Kentucky's initiative associated with SAMHSA's State Targeted Response to the Opioid Crisis grant (or Opioid STR grant) is the Kentucky Opioid Response Effort (KORE). KORE funding is currently allocated to major providers who will then manage distribution of funds and program implementation. Most of the agencies involved with the distribution of KORE funding are members of OCCATI (NorthKey Community Care, NKYODCP, Three Rivers District Health Department) or are members of the agency responsible for the distribution of KORE funding (Kentuckiana Health Collaborative, Kentucky Primary Care Association, Northeast Kentucky Regional Health Information Organization). The remaining agencies have close ties to one or more of OCCATI members (Kentucky Pharmacists to Triad Health and Three Rivers District Health Department; Mental Health America to NKYODCP and NKU; the NKY Department of Workforce Investment, Hazelden Betty Ford Foundation, and Domestic Violence Shelters to NKYODCP). All of the KORE initiatives align with OCCATI's strategic plan. KORE's tight connections with OCCATI membership also ensure that should state investment strategies change, OCCATI would be among the first to know and be able to respond appropriately.

Partnerships

Successful and sustained implementation of the strategic plan depends upon a continued cross-sector partnership and utilization of collective impact principles, i.e., mutually reinforcing activities, ongoing communication and common measurement. A multi-disciplinary management team consisting of NKU, Triad Health, St. Elizabeth Healthcare, and NorthKey Community Care will enhance partnership cohesion and success by establishing buy-in, keeping work plans and goals realistic, developing measurable short-

term outcomes, and holding people accountable. There is commitment, however, that the management team not become the “lead” organization at the center of the collaborative work. All community partners must have ownership of the project and all must share a deep commitment to the consortium itself.

However, in order to sustain program activities beyond the granting periods, OCCATI will need to evolve as well. The Golden Triangle Rural Healthcare Network is an existing collaborative partnership of agencies working together to support health related programs in the rural counties of Northern Kentucky. Most current members of OCCATI also serve in this network. As a result of these overlapping partnerships, consortium members have forged strong collaborative relationships, both in OUD work specific to the consortium itself but also in facing the larger population health challenges that span all of the rural counties in Northern Kentucky. Leveraging the strong connections developed over the course of the planning and implementation grants will enable long-term integration with the Golden Triangle Rural Healthcare Network.

Communication

Moving forward, OCCATI will continue its regular family and community participatory events. The consortium is committed to communicating with constituent audiences to share quantifiable impact in order to maintain community support and engagement.

In addition, OCCATI will institute a Community Advisory whose membership will include at least county leadership, faith leaders, former inmates, parents, and residents with lived experience. This Board will discuss and provide feedback regarding program impact, the target metrics, any unanticipated challenges, changing circumstances, additional opportunities, and methods of sharing success. They will also provide feedback on any proposed significant strategic revisions or tactical adjustments, as well as help maintain accountability for OCCATI members.