



CCI  
CENTER FOR CARE  
INNOVATIONS

# Treating Addiction in the Primary Care Safety Net

August 2016

## IMPORTANT DATES

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### **Program Duration**

September 2016 - February 2018

### **Informational Webinar**

August 8, 2016, 10-11 am PT

### **Application Deadline**

August 19, 2016, 5 pm PT

### **Participants Confirmed**

August 26, 2016

### **Kick-Off Webinar**

September 23, 2016, 10-11 am PT

### **In-Person Learning Session #1**

October 19, 2016

### **In-Person Learning Session #2**

February 15, 2017

### **In-Person Learning Session #3**

June 14, 2017

## Participation at a Glance

### How do I apply to participate?

Submit an application [online here](#) by 5 pm PT on Friday, August 19, 2016. Application instructions are included on page 5.

### Who is eligible to participate?

This technical assistance program is available to the 36 California health centers selected for the Substance Abuse Service Expansion Awards (SASE) by the U.S. Health Resources and Services Administration (HRSA) in spring 2016.

Organizations must be nonprofit and tax-exempt organizations under 501(c)(3) of the Internal Revenue Service Code or a governmental, tribal, or public entity.

Some activities of the program may be available to non-awardee organizations through the California Improvement Network of the California Health Care Foundation.

### Where can I find more information?

Join us for an Informational Webinar on **August 8, 2016 at 10 am PT** to hear a detailed description of the program and ask questions. [Register here](#) for the webinar.

For any other questions, please contact:

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## INVITATION TO PARTICIPATE

# Treating Addiction in the Primary Care Safety Net

A joint effort of the Center for Care Innovations and California Health Care Foundation

## Program Background

The United States faces an epidemic of opioid addiction and overdose deaths—and healthcare has a vital role to play in this fight. Increasing access to medication-assisted treatment (MAT) is one of the three top federal health priorities, and state and local groups are focused on slowing opioid deaths in their communities. The [California Health Care Foundation](#) (CHCF) supports these efforts through a variety of [programs and publications](#).

In addition to funding, new care models that include MAT require a long list of adaptive changes. These changes include the practical details of workflow, developing the best roles for care team members, data-sharing, establishing a business plan for the new service, and the education and engagement of providers and staff to ensure a workplace culture that supports addiction treatment. In addition to these operational changes, primary care providers need to learn new concepts and skills to engage patients in MAT.

In 2016 the Health Resources and Services Administration granted Substance Abuse Service Expansion Awards (SASE) to 36 California health centers to take on these changes. A survey conducted by the California Primary Care Association (CPCA) found that most California SASE awardees have either limited or no experience providing addiction treatment. The survey respondents indicated that customized technical assistance would be helpful and welcome.

In response to this request for support, the Center for Care Innovations, in partnership with the California Health Care Foundation, announces the **Treating Addiction in the Primary Care Safety Net (TAPC)** program. The TAPC program will provide tailored technical assistance on addiction treatment and change management topics. This program opportunity is open to the California health centers that are recipients of the 2016 HRSA SASE awards. Program activities will align with and supplement the resources provided through the California Society of Addiction Medicine and the Substance Abuse and Mental Health Services Administration (SAMHSA).

## Program Structure and Support

Building addiction treatment into a busy primary care practice is complex, technical and sensitive work. Leaders must ensure patient safety, compliance with strict regulatory requirements, and workplace culture management to support compassionate care for patients who are often challenging to care for. Staff and providers need education on the emerging clinical recommendations, practical clinical guidelines tailored to their setting, support in designing and testing new care team workflows, and effective information management that spans different privacy requirements. Everyone needs to understand how to track their progress and grow their capacity to serve all patients.

The TAPC program will span from September 2016 - February 2018 and will provide detailed technical assistance to SASE awardees customized to their specific needs and priorities in developing MAT services at their organizations.

During the project period, participants have access to the following program benefits and activities:

- ❖ **Three in-person learning sessions** for peer learning and in-depth presentations by MAT specialists. Join other SASE awardees to share recommendations. Commit to making progress together.
- ❖ **Subscription fees for the robust knowledge-sharing network Project ECHO.** Connect your clinic to specialists and support program development for MAT and other complex care through monthly live video consults, educational videos, email consults, model treatment protocols, and other resources through pain.net.
- ❖ **Site visits for clinic teams** to exemplar sites with successful MAT programs. Observe first-hand the care teams in action and find out what it takes to build such teams through face-to-face conversations with clinic managers, providers and care team staff.
- ❖ **On-site practice coaching for the project team** by addiction specialists and experts in performance improvement. Use experts' focused attention to tackle your biggest program development challenges and make great progress.
- ❖ **Consultation for physicians** by national experts in MAT and addiction treatment. Request a consultation on a specific challenging clinical case, or join a group discussion.
- ❖ **Online learning events on specific clinical topics.** We expect to offer a total of 12 webinars.
- ❖ **An online learning platform** for program development support and sharing resources.

**Participating clinics are required to participate in the three in-person learning sessions and at least two other program support activities described above.** This minimum participation requirement will help ensure that participants meet their goals of providing clinically sound and well-managed programs for their patients. Participants will also be expected to submit a copy of their quarterly HRSA SASE progress report to help CCI understand the progress and impact of their work throughout the program.

Participating organizations will receive a \$5,000 stipend to help offset travel and other program expenses.

## Program Success Factors

This program opportunity is open to all 2016 HRSA SASE awardees. As described above, program teams are expected to participate in the three in-person learning sessions and at least two additional support activities. In addition to this active participation, there are three critical success factors that will influence the efficacy of the teams' efforts during the program:

- ❖ **Engaged Leadership** – The development of new and sustainable care services, such as MAT, requires committed leadership to allocate staff resources and to set clear expectations for success.
- ❖ **Dedicated Project Team** – Project teams will need to allocate sufficient time to learn, test and implement the many changes required to effectively implement addiction treatment and MAT. The core project team should include 4-6 individuals. This team should include at least one member of the leadership team, one provider, and one or two other care team members. Other suggested team members are individuals that will be involved in developing and delivering MAT services. The total time commitment needed per team member will depend on the number of program activities the clinic selects and the overall goals of your work. Outside of program activities, teams should plan to meet regularly.

- ❖ **Achievement of HRSA Award Requirements** – CCI’s and CHCF’s hope is that all clinics that participate in the TAPC opportunity will reach the goals set by the HRSA SASE program:
  - Improving the integration of primary care and behavioral health care
  - Adding substance use treatment providers, staff and services
  - Updating prescriber guidelines for opioid prescribing
  - Increasing the number of patients receiving both SBIRT (Screening, Brief Intervention, and Referral to Treatment) and addiction services

## Eligibility

Eligibility is limited to those 36 California health centers that received awards in the 2016 HRSA Substance Abuse Service Expansion Project. All applicants to the TAPC program will be invited to participate.

## How to participate

### STEP 1 | ATTEND AN INFORMATIONAL WEBINAR

Interested organizations are encouraged to participate in an informational webinar on **Monday, August 8, 2016, 10-11 am PT**. [Register here](#) for the webinar.

### STEP 2 | SUBMIT AN APPLICATION

To participate, organizations must submit an online application by **Friday, August 19, 2016 at 5 pm PT**. This is a non-competitive application; we anticipate admitting all clinics that apply. Submissions will help ensure the program content meets your needs.

**Applications must be submitted online here:** <https://www.tfaforms.com/435758>

#### Applications should include the following:

- ❖ Application submission form information
- ❖ Responses to narrative questions listed below
- ❖ Copy of application for the HRSA SASE program

#### Narrative Questions

Narrative responses should be no longer than 3 pages, 11-point font, and include responses to the following questions:

- 1) Please summarize the goals that you hope to accomplish with your SASE HRSA award.

*Note: In the online submission form you will be asked to upload a copy of your SASE proposal to HRSA, as well as include the following quantitative goals targeted in the SASE program:*

- a. *The number of patients you currently serve with MAT or addiction counseling*
  - b. *The number of patients you hope to serve with MAT by the end of the award term*
  - c. *The number of providers in your organization who currently possess a buprenorphine waiver (X-number)*
  - d. *The number of providers in your organization you hope will possess a buprenorphine waiver (X-number) by the end of the award term*
- 2) What challenges do you foresee in meeting the goals stated in your SASE HRSA proposal?

- 3) Where are the gaps in knowledge among your care teams related to substance use disorders, MAT and related program development topics? What specific content/topics do you recommend CCI include in program learning events?

**Applicants will be notified of their participation confirmation by August 26, 2016.**

### **STEP 3 | START LEARNING AND IMPROVING**

The program duration is September 1, 2016- February 28, 2018. Participation in the following events is expected of all program teams, so please hold the following dates:

- ❖ **Kick-Off Webinar**- Friday, September 23, 2016, 10-11 am PT
- ❖ **In-Person Learning Session #1**- Wednesday, October 19, 2016 (San Francisco Bay Area)
- ❖ **In-Person Learning Session #2**- Wednesday, February 15, 2017 (Location TBA)
- ❖ **In-Person Learning Session #3**- Wednesday, June 14, 2017 (Location TBA)

## A joint effort of



**Center for Care Innovations (CCI)** partners with health care safety net providers to help them transform care for underserved populations. CCI is a vital source of ideas, best practices and funding to support the adoption and spread of innovations to improve health, reduce costs and improve the patient experience of care. By bringing people and resources together, we accelerate innovations for healthy people and healthy communities.

[www.careinnovations.org](http://www.careinnovations.org)



**California  
Health Care  
Foundation**

**The California Health Care Foundation (CHCF)** is dedicated to advancing meaningful, measurable improvements in the way the health care delivery system provides care to the people of California, particularly those with low incomes and those whose needs are not well served by the status quo. CHCF works to ensure that people have access to the care they need, when they need it, at a price they can afford.

[www.chcf.org](http://www.chcf.org)