



NORTHERN INYO HOSPITAL RURAL HEALTH CLINIC



OUR ATSH TEAM

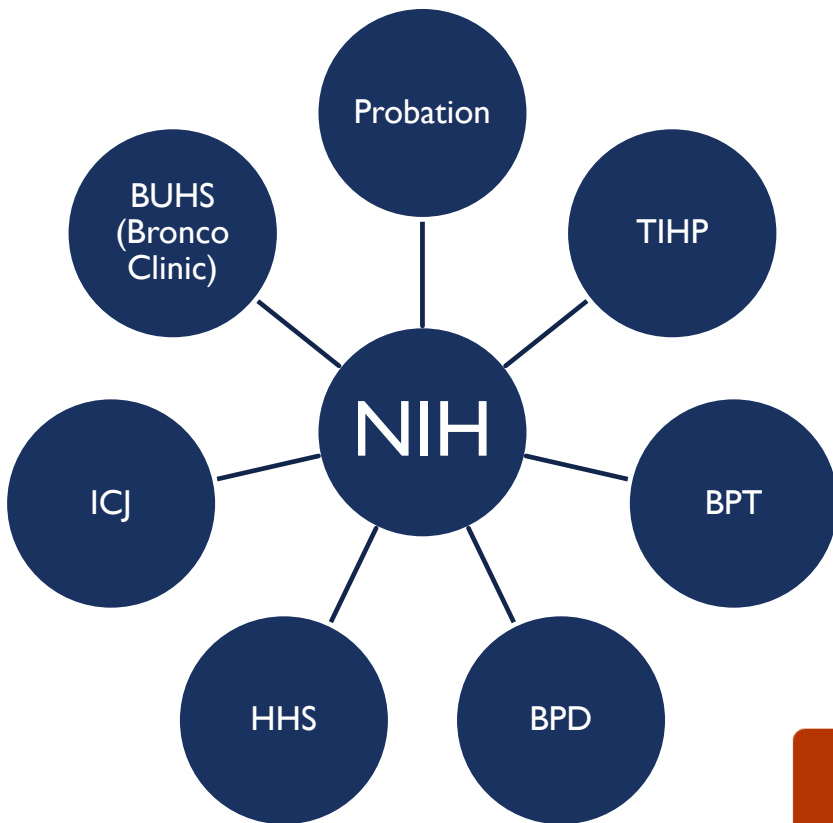


- Our Core MAT Team:
 - Dan David, RN Project Manager:
 - Anne Goshgarian, MD
 - Linda Christensen, LCSW
 - Arlene Brown, Recovery Support Navigator
- Our Site's MAT Team MAT Prescribers:
 - Nursing
 - Social Work
 - Care Coordination
 - Behavioral Health
 - Recovery Support Navigator
 - Physicians
 - Nurse Practitioner

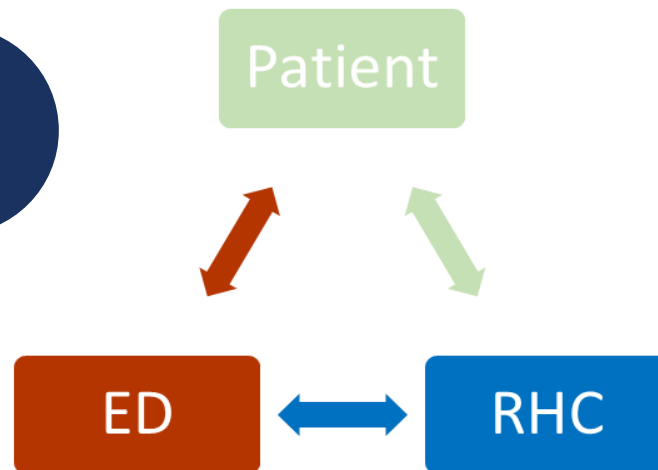


Love & Kindness

OUR RURAL COMMUNITY



Inyo County
County population 17,987
No sober living
No residential treatment



Acknowledgement of
tribal lands.

CURRENT STATE



12 waived providers



We believe in harm reduction and saving lives. Patients are at the center for their care and are treated with respect, compassion and dignity.



45 MAT patients (last 6 months)



CAPABILITY ASSESSMENT: WHAT WE LEARNED

- We were surprised by: **the need for services were greater than anticipated.**
- Our team's areas of strength: **dedicated, trauma-informed staff, model of care coordination, implement harm reduction principles throughout continuum of care, strong leadership, supportive staff and community efforts.**
- Areas for development: **More community involvement and we need more input from those with lived experience.**

CURRENT STATE ASSESSMENT

- We used the following methods to learn more about our current state: Discussions and testimony of patients.
- We spoke to:
 - Staff: *say they are thankful for our MAT Team stepping up and doing the work to help our community.*
 - Patients: *say they appreciate the contact we have them and they know we care.*
- From providers and staff we learned: *We are saving lives.*
- From patients we learned: *They love that we call and check in on them.*
- Other insights we gathered from current state activities: *We will always be a work in progress.*
- We received the following feedback on the appropriateness and acceptability of using MAT in our clinic: *People are grateful that we are changing the narrative on addictions!*

OUR TEAM HAS BEEN WONDERING ...

- Our questions to other teams: Helping polysubstance misuse with patients. **What does behavioral health look like at other sites?**
 - Psychiatry, CBT, ASAM, group models, ethical situations for providing care if higher level is needed? (we are it).
- Our questions for faculty: **how do you promote other providers to become x waived?**
- We need support to accomplish: **It's the above questions.** 😊

Goals for ATSH participation: we want to grow and expand our behavioral health and ensure safety nets are in place for patients.

ADVICE/GUIDANCE/TOOLS FOR OTHER TEAMS

- Do you have policies, protocols, tools to share with others? **Yes.**
- Are there specific content areas or specific sub populations where your team has developed deep expertise and you may serve as faculty or do more formal sharing?
 - HCV, Care Coordination Model, Transportation.



Hepatitis C
Get Tested
Get Treated
Get Cured!

