

RCORP PR Sept 2023 - Request for Information

Grantee Info

1. Grantee Name (Prepopulated, do not edit)

Mid-Valley Healthcare, Inc.

2. RCORP Grant Number (Prepopulated, do not edit)

GA1RH42912

3. RCORP Grant Program (Prepopulated, click next to continue):

Implementation III (FY21)

Contact Information

4. Project Director

First Name

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5. Data Coordinator

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Implementation III Prevention-Related Work Plan Activities

6. Degree of Implementation. For each core requirement below (per the RCORP-Implementation Notice of Funding Opportunity), please indicate the degree to which you have implemented the associated activities and sub-activities proposed in your HRSA-approved work plan. For work plan activities that are ongoing, if the minimum threshold has been met, choose fully implemented.

	Not Yet Started	Just Beginning	Partially Implemented	Fully Implemented
P1. Public Education & Stigma Reduction. Provide culturally and linguistically appropriate education to improve family members', caregivers', and the public's understanding of evidence-based prevention, treatment, and recovery strategies for SUD/OD, and to reduce stigma associated with the disease.			X	
P2. Naloxone Access. Increase access to naloxone within the rural service area and provide training on overdose prevention and naloxone administration to ensure that individuals likely to respond to an overdose can take the appropriate steps to reverse an overdose.			X	
P3. Drug Take-Back Programs. Implement year-round drug take-back programs.				X
P4. Community-Based Prevention. Increase and support the use of school- and community-based prevention programs that are evidence-based to prevent misuse of opioids and other substances.				X
P5. SUD Screening and Referral. Identify and screen individuals at risk for SUD/OD and provide or make referrals to prevention, harm reduction, early intervention, treatment, and other support services to minimize the potential for the development of SUD/OD.				X

7. Status Relative to Timeline. For each core requirement below, please indicate your implementation status relative to the timeline proposed in your work plan.

	Delayed	On Track	Ahead of Schedule
P1. Public Education & Stigma Reduction.		X	
P2. Naloxone Access.			X
P3. Drug Take-Back Programs.		X	
P4. Community-Based Prevention		X	
P5. SUD Screening and Referral.		X	

Implementation III Treatment-Related Work Plan Activities

8. Degree of Implementation. For each core requirement below (per the RCORP-Implementation Notice of Funding Opportunity), please indicate the degree to which you have implemented the associated activities and sub-activities proposed in your HRSA-approved work plan. For work plan activities that are ongoing, if the minimum threshold has been met, choose fully implemented.

	Not Yet Started	Just Beginning	Partially Implemented	Fully Implemented
T1. Screen for Infectious Diseases. Screen and provide, or refer to, treatment patients with SUD/ODU who have infectious complications, including HIV, viral hepatitis, and endocarditis, particularly among PWID.				X
T2. Recruit, Train, and Mentor MAT Support Staff. Recruit, train, and mentor interdisciplinary teams of SUD/ODU clinical and social service providers who are trained, certified, and willing to provide medication-assisted treatment (MAT), including both evidence-based behavioral therapy (e.g., cognitive behavioral therapy, community reinforcement approach, etc.) and FDA-approved pharmacotherapy (e.g., buprenorphine, naltrexone). This can include providing support for the required training of providers who are pursuing DATA 2000 waivers for the prescription of buprenorphine-containing products and intend to provide these medications to their patients.				X
T3. Workforce Recruitment and Development. Increase the number of providers, other health and social service professionals, and appropriate paraprofessionals who are able to identify and treat SUD/ODU by providing professional development opportunities and recruitment incentives such as, but not limited to, the NHSC.				X
T4. Address Treatment Barriers through Integrated Care. Reduce barriers to treatment, including by supporting integrated treatment and recovery, such as integration efforts between entities such as primary care service providers, behavioral health service providers, the criminal justice system, dentistry, and social services. As appropriate, provide support to pregnant women, children, and other at-risk populations using approaches that minimize stigma and other barriers to care.			X	
T5. Strengthen Collaboration to Improve Emergency Treatment. Train and strengthen collaboration with and between law enforcement and first responders to enhance their capability of responding and/or providing emergency treatment to those with SUD/ODU, particularly vulnerable populations within the service area that suffer from health access and outcome disparities.			X	
T6. Optimize Reimbursement. Train providers, administrative staff, and other relevant stakeholders to optimize reimbursement for treatment encounters through proper coding and billing across insurance types to ensure financial sustainability of services.		X		
T7. Improve Access to Treatment Supports. Enable individuals, families, and caregivers to find, access, and navigate evidence-based, affordable treatments for SUD/ODU, as well as home- and community-based services and social supports.				X

9. Status Relative to Timeline. For each core requirement below, please indicate your implementation status relative to the timeline proposed in your work plan.

	Delayed	On Track	Ahead of Schedule
T1. Screen for Infectious Diseases.			X
T2. Recruit, Train, and Mentor MAT Support Staff.			X
T3. Workforce Recruitment and Development.			X
T4. Address Treatment Barriers through Integrated Care.			X
T5. Strengthen collaboration to improve emergency treatment.		X	
T6. Optimize reimbursement.	X		
T7. Improve Access to Treatment Supports.			X

Implementation III Recovery-Related Work Plan Activities

10. Degree of Implementation. For each core requirement below (per the RCORP-Implementation Notice of Funding Opportunity), please indicate the degree to which you have implemented the associated activities and sub-activities proposed in your HRSA-approved work plan. For work plan activities that are ongoing, if the minimum threshold has been met, choose fully implemented.

	Not Yet Started	Just Beginning	Partially Implemented	Fully Implemented
R1. Improve Discharge (Re-entry) Programs and Services. Enhance discharge coordination for people leaving inpatient treatment facilities and/or the criminal justice system who require linkages to home and community-based services and social supports, including case management, housing, employment, food assistance, transportation, medical and behavioral health services, faith-based organizations, and sober/transitional living facilities with the goal of improving health care in rural areas.			X	
R2. Expand Peer Workforce. Expand peer workforce and programming as interventionists in various settings, including hospitals, emergency departments, law enforcement departments, jails, SUD/ODU treatment programs, and in the community.				X
R3. Expand Availability of Recovery Support Services. Support the development of recovery communities, recovery coaches, and recovery community organizations to expand the availability of and access to recovery support services.				X

11. Status Relative to Timeline. For each core requirement below, please indicate your implementation status relative to the timeline proposed in your work plan.

	Delayed	On Track	Ahead of Schedule
R1. Improve Discharge (Re-entry) Programs and Services.		X	
R2. Expand Peer Workforce.			X
R3. Expand Availability of Recovery Support Services.		X	

Successes, Challenges, and TA Needs

12. Capacity

	Success	Challenge	Need TA	N/A
Availability of MAT	X			
Availability of Mental Health Treatment		X		
Availability of Substance Use Disorder (SUD) Treatment		X		
Other Service Capacity (not including MAT, mental health, or SUD treatment capacity) – please specify		X		

13. Please specify which other service capacity you are referring to

Housing

14. Services

	Success	Challenge	Need TA	N/A
Care Coordination	X			
Discharge Planning	X			
Harm Reduction (other than naloxone distribution)	X			
Naloxone Distribution	X			
Prevention Services (other than harm reduction or naloxone distribution)	X			
Recovery Services		X		

15. Operations

	Success	Challenge	Need TA	N/A
Consortium Growth and/or Engagement (including competing priorities)	X			
Billing/Coding for service reimbursement		X		
Program Financing	X			
Workforce (e.g., hiring, recruitment, retention)	X			
Telehealth/telemedicine				X
Accessing data from consortium members for HRSA reporting	X			
Accessing data for consortium planning, monitoring consortium activities, etc.	X			

16. Other

	Success	Challenge	Need TA	N/A
Stigma/Stigma Reduction	X			
Underserved Populations Engagement (please specify population(s) below)	X			
Other (please specify)		X		

17. Please specify which population(s) you are referring to

Woman who are pregnant, nursing, have children, and are of the childbearing age population.

18. Please specify other response

Linn County Alcohol and Drug voiced the lack of support for families and friends of individuals with problematic substance use or for those that have lost someone to substance use. East Linn County still lacks the resources for family and friends support and for grief counseling specific to those who have lost someone from overdose.

19. Please describe the success(es) identified

Family Tree Relief Nursery has expanded their recovery services and now has Therapeutic Early Childhood Programs (TECP) in two locations of East Linn County. Their Nurturing Parenting classes and Parent Café groups have been well attended. The Maternal Healthcare Coordinator and Samaritan Treatment & Recovery Services Peer Support Specialist have seen increased engagement with woman who are pregnant, nursing, have children, and are of the childbearing age population. Specifically, there is increased coordination of care and wrap around services for this population which has positively resulted in more woman receiving support in the labor and delivery unit and afterward. Family Tree Relief Nursery has expanded their services for woman and children in East Linn County which includes recovery housing for woman and children. Family Tree Relief Nursery and Samaritan Treatment & Recovery Services Peer Support note the successes in having a space to meet with individuals at the recovery house which helps to reduce barriers such as transportation.

20. Please describe the challenge(s) and/or technical assistance need(s) identified

Regarding the care coordination of recovery services, partners have had trouble gaining clearance into the hospital to provide peer support to individuals. This is a challenge the Network Director is currently working on with hospital administration to create a streamline process that allows partner agencies hospital clearance. Family Tree Relief Nursery and Samaritan Treatment & Recovery Services Peer Support Specialists report challenges with client engagement once peer support services have been established and noted there is still a lack of recovery resources in certain rural communities.

Project Director Turnover

21. Did you have a change in project director during the past year?

No

SUD/Drug Concerns

22. Among the drug types listed, please rank in order the top three drug types that currently pose the greatest concern to the health and well-being of the individuals in your HRSA-designated rural service area. List in order of drugs of most concern to least concern. If you have a concern not included in this list, please use the comment box to specify.

- 1. Fentanyl and Fentanyl Analogs (i.e., synthetic opioids)
- 2. Alcohol
- 3. Methamphetamine

Comments

Family Tree Relief Nursery and Samaritan Treatment & Recovery Services both reported having the highest number positive screenings for alcohol use with patients. All the partners and the Medical Director of Samaritan Treatment & Recovery Services voiced how fentanyl is still the biggest concern due to the overdose rates and fact that it is showing up in various other substances. The Medical Director notes that when individuals are in treatment for methamphetamine use and given a toxicology screening, fentanyl is also present approximately twenty-five percent of the time which is often unknowingly to the individual. Between March and August of 2023 Samaritan Lebanon Community Hospital had 67 overdoses which is an increase from our last report that showed 63 overdoses between September 2022 and February 2023.

23. Among the drug types listed, please rank in order the top three drug types that your HRSA-designated rural service area has the least capacity to treat. The ranking is only for those areas that are a problem in your community (e.g., if you do not have the capacity to address cocaine but that is not a problem in your service area, do not rank it). List from top to bottom starting with the drug you have the least capacity to address. If you have a concern not included in this list, please use the comment box to specify.

- 1. Alcohol
- 2. Fentanyl and Fentanyl Analogs (i.e., synthetic opioids)
- 3. Benzodiazepines

Comments

All the partners were agreeable that because our service area does not have freestanding detoxification withdrawal management, individuals face significant barriers when detoxing from alcohol due to the associated risk factors. Samaritan Treatment & Recovery Services Medical Director expressed that individuals seeking treatment for alcohol use face increased barriers because they are not able to be admitted until they have successfully detoxed. Sometimes patients get lost in the process of transferring from one organization to another and lose their desperation for treatment once they are detoxed. Family Tree Relief Nursery Peer Support Supervisor stated frustration in the lack of detox centers and treatment options for individuals. He discussed the difficulties that Peer Support Specialists at Family Tree Relief Nursery face when trying to refer someone to treatment because of the amount of time they spend trying to get individuals into treatment and are often unsuccessful due to lack of availability.

SUD-Related Health Concerns

24. Among the problem areas listed, please rank in order the top three problem areas that currently pose the greatest concern to the health and well-being of the individuals in your HRSA-designated rural service area. List in order of health issue of most concern to least concern. If you have a concern not included in this list, please use the comment box to specify.

1. Fatal and Non-Fatal Overdoses (all drugs)
2. Neonatal Abstinence Syndrome
3. Drug-related Bacterial Infections (e.g., infectious endocarditis)

Comments

The Medical Director of Samaritan Treatment and Recovery Services notes that one common challenge is the lack of recovery services outside of treatment, such as recovery housing. Once an individual leaves treatment continued support with recovery is crucial. Individuals completing treatment for fentanyl or opioid use must be made aware of their tolerance returning to baseline which means they are at increased risk of overdose if they return to use. Although this reporting period Samaritan Lebanon Community Hospital had fewer babies born to NAS/NOWS, partners still feel it is of concern. The Maternal Care Coordinator expressed challenges with engagement of individuals who are pregnant and using substances which is likely a result of shame and stigma. Samaritan Treatment & Recovery Services Peer Support Specialists discussed positive experiences with care coordination between Labor and Delivery, the Maternal Care Coordinator, and Peer Supports however has trouble getting patients to follow through with recovery services.

25. Among the problem areas listed, please rank in order the top three problem areas that your HRSA-designated rural service area has the least capacity to address. The ranking is only for those areas that are a problem in your community (e.g., if you do not have the capacity to address opioid poisoning among children but that is not a problem in your service area, do not rank it). List from top to bottom starting with the health issue you have the least capacity to address. If you have a concern not included in this list, please use the comment box to specify.

1. Fatal and Non-Fatal Overdoses (all drugs)
2. Drug-related Bacterial Infections (e.g., infectious endocarditis)
3. Neonatal Abstinence Syndrome

Comments

Family Tree Relief Nursery Peer Support Supervisor notes how overdose rates continue to increase despite our ability to distribute Narcan throughout the service area which means there is greater need for services. All the partners agree that the lack of treatment facilities continues to be an issue and that there are so many individuals within East Linn County that fall through the cracks because when they are ready for treatment there is no availability, so they go back to using. Samaritan Lebanon Community Hospital saw 8 individuals under the age of 17 for overdose in this reporting period yet there are no treatment options for youth in the service area. Samaritan Treatment & Recovery Services Peer Support Specialist mentioned how the majority of woman she works with that are expecting or recently delivered, talk about the shame they carry and feeling humiliated when they have to talk about their substance use to providers. Family Tree Relief Nursery and Samaritan Treatment & Recovery services Peer Supports agreed that continuing to work on reducing stigma for expecting mothers is important.

Behavioral Health Concerns

26. Among the behavioral health services listed, please rank in order the top three services that your HRSA-designated rural service area has the least capacity to provide. List from top to bottom starting with the service you have the least capacity to provide. If you have a concern not included in this list, please use the comment box to specify.

1. Treatment for co-occurring disorders in adolescents and children
2. Crisis intervention for adolescents and children
3. Treatment for co-occurring disorders in adults

Comments

East Linn County and Linn County as a whole does not have any substance use or mental health treatment for adolescents and children. Linn County Alcohol and Drug has been providing education and prevention through their Lifeskills and Early Intervention programs to middle and high schools and during this reporting period, referred 22 youth to treatment. Often the treatment centers for youth emphasize importance around family involvement which is difficult for families when the treatment center is so far away from their hometown. Family Tree Relief Nursery Peer Supervisor believe the service area needs more Youth Outreach Specialists to provide support to youth.

Long COVID Impacts

27. Does long COVID seem to be an issue within your service area (e.g., health care providers are mentioning it, treatment protocols seem to be in development)?

Yes

28. Does long COVID impact your consortium's work addressing substance use?

No

Naloxone Availability

29. Is over-the-counter (OTC) naloxone currently available in your service area?

Yes

30. Has access to naloxone increased, decreased, or stayed the same since OTC naloxone became available?

Stayed the same

31. Within which of the following is naloxone currently available? *Select all that apply.*

Community based organizations

Harm reduction venues

Health departments

Pharmacies

Treatment and/or recovery organizations

32. Please list any concerns or anticipated challenges you or members of your consortium have regarding the [changes in naloxone availability](#) (e.g., cost, stigma, etc.).

Samaritan Treatment and Recovery Peer Support Specialist experienced a positive response from the East Linn community at grocery stores, bars, gas stations, and salons where she distributed Narcan. Partners were in agreement that currently there is grant funding for Narcan which makes it accessible for those who need it however expressed uncertainty for what would happen when grant funding runs out.

**Rural Communities Opioid Response – Implementation
“Rural Communities Supporting Women and Youth”**

RC-SWAY Work Plan

Acronym	Definition	Key Contact(s)	Email
CHCBLC	Community Health Centers Benton & Linn Counties	Carla Jones	carla.jones@co.benton.or.us
FTRN	Family Tree Relief Nursery	Renee Smith Vernon Rose	rsmith@familytreem.org vrose@familytreem.org
FTRN PSS	Family Tree Relief Nursery Peer Support Specialist	Lynette Cavanaugh	kcavanaugh@familytreem.org
FTRN YPOW	Family Tree Relief Nursery Youth Peer Outreach Worker	Carter Kachel	ckachel@familytreem.org
FTRN PSGL	Family Tree Relief Nursery Peer Support Group Leader	Josh Pankau	jpankau@familytreem.org
LCAD	Linn County Alcohol & Drug Program	Justin Thomas	jthomas@co.linn.or.us
LCAD LST	Linn County Alcohol & Drug Program LifeSkills Trainer	Shannon Snair Sarah Daniels	
LCAD EIFY	Linn County Alcohol & Drug Program Early Interventionist for Youth	Rose Reaser Barry Collins Heidi Kizer Aranda Andrea Goff Eva Arndt	
PD-DC	Project Director-Data Coordinator	Molly Gelinias	mgelinias@samhealth.org
ROPC	Regional Overdose Prevention Coordinator	Isabelle Cisco	icisco@co.lincoln.or.us
SHS MCC	Samaritan Health Services Maternity Care Coordinator	Laurie Barajas	lbarajas@samhealth.org
SLCH	Samaritan Lebanon Community Hospital	Marty Cahill, CEO	mcahill@samhealth.org
STARS	Samaritan Treatment and Recovery Services	Brandon Bates (Interim)	bbates@samhealth.org
STARS PSS	Samaritan Treatment and Recovery Services Peer Support Specialist	Christina Sechrest	csechrest@samhealth.org

Quarters

Q1 - September, October, November 2021	Q7 - March, April, May 2023
Q2 - December 2021, January, February 2022	Q8 - June, July, August 2023
Q3 - March, April, May 2022	Q9 - September, October, November 2023
Q4 - June, July, August 2022	Q10 - December 2023, January, February 2024
Q5 - September, October, November 2022	Q11 - March, April, May 2024
Q6 - December 2022, January, February 2023	Q12 - June, July, August 2024

Color Key

Red Activities completed between 9/1/2022 – 2/28/2023

Yellow Changes made during 9/1/2022 – 2/28/2023

Green Activities where progress has been made during 9/1/2022 – 2/28/2023(details included)

Samaritan Lebanon Community Hospital, HRSA-21-088, Award #GA1RH42912



RC-SWAY Work Plan

Overarching Goal: Reduce morbidity and mortality of substance use disorder (SUD), including opioid use disorder (OUD), in rural Linn County.									
Goal 1: Strengthen and expand SUD/OUD prevention services in rural Linn County.									
Objective	Activity Number	Core Activity	Activities	Improvement to health care delivery	Deliverable	Responsible persons	Timeline	Progress	Details
Develop and implement all five core prevention activities by August 31, 2024.	1a	3	Hire Project Director-Data Coordinator to support the RC-SWAY Project.	Improve coordination of services for people with SUD/OUD	Staff hired	SLCH	Q1	Completed	Jolynn Meza Wynkoop began as the PD-DC on 9/27/2021. Molly Gelinas began as the PD-DC on 9/27/2022.
	1b	3	Hire or assign Peer Support Specialists and Peer Support Group Leader to implement RC-SWAY peer support activities.	Improve access to direct services and increase SUD/OUD supports	Staff hired	STARS FTRN	Q1	In Progress	<u>STARS</u> Christine Felt began as the STARS PSS on 11/8/2021. 3/1/2023 – 8/31/2023 Christine Felt left STARS on 3/21/23. Christina Sechrest began as the STARS PSS on 5/15/23. STARS PSS Position changed from a .5FTE to a 1.0 FTE <u>FTRN</u> Amanda True began as the FTRN PSS on 12/1/2021. Jessica Collin will begin as the new FTRN PSS on 9/26/2022. Octavia Chandler began as the Peer Support Group Leader in 12/2021. Joshua Pankau began as the new Peer Support Group Leader on 8/4/2022.

									<p>Carter Kachel began as the new Youth Peer Outreach Worker on 7/20/2022.</p> <p>Jessica Collins left her role as FTRN PSS and Lynette Cavanaugh, a Bi-lingual PSS, was hired for this position on 11/14/2023.</p> <p>Vernon Rose was hired with FTRN as the Program Director on 11/28/22. He is helping ensuring deliverables are met and all necessary data is gathered for the grant.</p> <p>3/1/2023-8/31/2023 Lynette Cavanaugh has been providing Bi-Lingual PSS in all Rural areas (Sweet Home and Lebanon) Youth Peer Outreach Carter Kachel has also been providing PSS services to a younger population but not limited to any specific age group.</p>
1c	1	<p>FTRN, STARS, LCAD, CHCLBC, will develop and distribute culturally and linguistically appropriate education material for family members and caregivers on SUD/OUUD prevention, treatment and recovery.</p>	<p>Improve knowledge of family members and caregivers around SUD/OUUD, reduce stigma and increase ability to access care</p>	<p># of education materials developed and distributed</p>	<p>FTRN</p>	<p>Q1-Q12</p>	<p>In Progress</p>	<p>STARS STARS has shared educational materials that are currently being used among the partners 12/6/2021.</p> <p>STARS PSS provided Director of STARS with 50 wallet cards (25 English/25 Spanish) and 50 posters (25 English/25 Spanish) to pass out at conferences, labeling, and trainings. Measure 110 PSS were provided 50 wallet cards (25 English/25 Spanish) and 50 posters (25 English/25 Spanish) Community Court was provided with 50 wallet cards (25 English/25</p>	

<p>Spanish) and 50 posters (25 English/25 Spanish)</p>	<p># of individuals receiving educational materials: 80 (9/1/22-2/28/23)</p>	<p>3/1/2023 – 8/31/2023</p>	<p>STARS PSS attended 5 events reaching approx. 440 individuals.</p>	<p># of education materials developed</p>	<p>1 box of Good Samaritan Law cards</p>	<p># of education materials distributed</p>	<p>30 posters in English and Spanish were distributed.</p>	<p>100 wallet cards were distributed at community events.</p>	<p>25 wallet cards were distributed to the pregnancy center in Sweet Home/25 to the FAC shelter/ 25 to the HOPE center for women.</p>	<p>International Overdose Awareness</p>	<p>Educational Supplies distributed at</p>	<p>SLCH tabling event, treatment center, and community.</p>	<p>100 OD Awareness Key Chains</p>	<p>200 OD Awareness Bracelets</p>	<p>8 OD Awareness Lanyards</p>	<p>70 OD Awareness Tee shirts</p>	<p>40 Wildflower Seed Packets</p>	<p>200 OD Awareness Ribbons</p>	<p>FTRN</p>	<p># of education materials developed and distributed: 1 (12/6/2021)</p>	<p># of individuals receiving educational materials: 3 women (6/1/2022)</p>	<p># of individuals receiving educational materials: 7 women (8/4/2022)</p>
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<p>618 posters distributed to 18 partners (English) 183 posters distributed to 14 partners (Spanish) 4,190 wallet cards distributed to 20 partners (English) 1,395 wallet cards distributed to 16 partners (Spanish)</p>	<p>1/11/2023 18 Marketing monitors are actively running the SUD/ODU campaign at the following locations: 4 SamFit locations 1 Pastega House 5 SHS hospital sites</p>	<p>3/1/2023 – 8/31/2023 RCSWAY is no longer utilizing Brink Communication for the media campaign and instead will be using AHM Brands. RCSWAY PD began working alongside HIWAY Grant PD and BHRN Grant PD in March 2023 in an effort to share consistent messaging across the Tri-County region, Linn, Benton, and Lincoln Counties. The following meetings have taken place: 3/29/23 – Met to initiate conversations around the Mass Media Behavioral Health Campaign, stigma reduction, target populations, and demographics. 4/4/23 – Created a survey for CCCWN Network and partners to gain feedback on campaign ideas. 4/27/23 – Check-in with AHM Brands on survey feedback. 5/3/23 – Review of survey summary and analysis of feedbacks main themes. 5/16/23 – Budget review and</p>

									<p>spending for each of the grants. 5/23/23 – Collaboration on creation of messaging for adults and youth. 7/26/23 – Feedback for radio scripts and changed point of contact from Lines for Life to the CCCWN webpage. 9/19/23 – Final review and approval for radio messaging, ready to go live.</p>
1e	2	ROPC will coordinate and monitor the purchase and distribution of Narcan.	Reduce overdose fatalities	Amount Narcan distributed through tracking sheets	ROPC	Q1-Q12	In Progress	<p>This task was switched from C.H.A.N.C.E. to the Regional Overdose Prevention Coordinator (ROPC).</p> <p>Samaritan Lebanon Community Hospital has executed a purchase agreement with Lincoln County Health and Human Services for the purchase of Narcan for the rural Linn County region. \$15,000 is allocated towards Narcan purchasing for the first year of the grant.</p> <p>The first order was submitted and received. 216 Narcan kits were ordered on 4/11/2022 and were delivered to STARS.</p> <p>The second order of Narcan for 312 kits was placed on 12/9/2022 and delivered to STARS.</p> <p style="text-align: center;">STARS 3/1/2023 – 8/31/2023 # of kits distributed: 192</p>	

1f	2	<p>C.H.A.N.C.E. Coordinator The PD-DC will provide trainings to community and family members on proper use of Narcan and injectable naloxone in multiple languages.</p>	Increased number of people who can administer Narcan to reduce overdose fatalities	# of participants attending training through sign-in sheets	PD-DC C.H.A.N.C.E.	Q4	In Progress	The PD-DC will be responsible for this activity (8/31/2022) Narcan and Harm Reduction training for FTRN staff (9/2/22) # of attendees: 14 Narcan and Harm Reduction training for STARS staff (9/22/22) # of attendees: 10 Narcan and Harm Reduction training for SHS Community Health Promotions: (11/28/22) # of attendees: 8 Narcan and Harm Reduction training for Samaritan Foundations Team Huddle (2/15/22) # of attendees: 16 3/1/2023-8/31/2023 Narcan and Harm Reduction training for STARS PSS (7/21/23) # of attendees: 2
1g	3	FTRN will continue to conduct on-going drug take-back programs throughout the year.	Reduce incidents of drug use and overdose	Quantity of drugs collected	FTRN	Q1-Q12	In Progress	FTRN is working with Linn Together to coordinate drug take-back events throughout the grant funding period. (10/21/21) FTRN partnered with the MED-Project of Oregon to distribute needed materials for mail in options. (11/17/21) FTRN has ordered materials from the MED-Project to facilitate pill, inhaler and injection take back events. These materials will be used to share information with clients and the FTRN PSS will assist in ordering materials for any clients who are interested in accessing these services. The MED-Project brochure has been downloaded and

<p>is being prepared to use in case work. (3/3/2022)</p> <p>Mail in materials and information is being distributed to the east Linn County case load. (4/11/2022)</p> <p># MED-Project Materials distributed: 2 (4/14/2022)</p> <p>The Linn County Sheriff's Office hosted drug take back days: 4/11/2022 Albany 4/30/2022 Scio/Halsey/Mill City/Lebanon</p> <p>FTRN attended these events to learn more about how the drug take back process works. FTRN will partner with the Linn County Sheriff's Office to host drug-take back events later in 2022 and in 2023.</p> <p>11/17/2022</p> <p>FTRN is taking a new approach with the Med Project. They began partnering with Project Coordinator Michelle Means who has connections to more advanced services within the Med Project. FTRN staff have been made aware of all the "take back med stations" and have access to the "mail in resources" to better assist clients with safe medication disposal.</p> <p>3/1/2023 – 8/31/2023</p> <p>1 FTRN client used the Med take back service.</p> <p>All clients are provided information about the mail-in Med take back process and walk-in process offered by Linn County Sheriff's office during their intake with staff.</p>										
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	1h	4	<p>FTRN will continue to provide Nurturing Parents evidenced-based parent education workshops and classes for parents and caregivers impacted by SUD/OUUD.</p>	<p>Reduce child abuse rates and incidents of emergency department visits</p>	<p># of classes and workshops offered # of participants attend classes and workshops</p>	FTRN	Q1-Q12	In Progress	<p><u>FTRN</u> Staff training for Nurturing Parents certification is scheduled for 3/21/2022 - 3/25/2022 # of participants: 20 staff members</p> <p>FTRN started a parenting support group on 3/31/2022 at LCAD. # sessions: 8 # of participants: 10 (6/1/2022)</p> <p># sessions: 18 # of participants: 10 (8/4/2022)</p> <p># sessions: 24 # of participants: 10 (8/31/2022) Many fathers are attending this class.</p> <p>Additional FTRN staff are being trained to lead the Nurturing Parents group. Continuing to see an increase in fathers attending the classes. 10/8/2022 # sessions: 28 # of participants: 10 11/17/2022 # sessions: 34 # of participants: 10 2/27/2023 FTRN is currently running the "Parent Café" weekly support group on Thursdays at 11:30am and working towards coordinating in person "Nurturing Parents" classes that will be open to the public.</p> <p style="text-align: right;">3/1/2023 – 8/31/2023</p>
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									<p># of classes: 12 # of participants: 5 adults, 4 children, 1 infant</p> <p>FTRN is currently running multiple "Parent Café" support groups on Tuesdays in Linn County</p> <p>Nurturing Parenting Classes were provided from May 4th-July 20th in Linn County.</p> <p>New Nurturing Parenting classes start in the fall location Lebanon 3111 S Main St. Dates are from Sept 7th-Dec 17, Transportation assistance and childcare provided to clients accessing those services. Fliers have been created and distributed.</p>
1i	4	LCAD Program will continue to provide and expand evidenced-based LifeSkills Training in elementary and middle school classrooms.	Improve youth resistance to substance use and delay age of first use	# of LifeSkills Trainings offered # of students participate in training	LCAD	Q2, Q3, Q5, Q6, Q7, Q9, Q10, Q11	In Progress	<p>In classroom training began in late September 2021 in 4th and 6th grade classrooms and has been led by trainer, Shannon Snair. On 4/2/2022, Sarah Daniels joined the team as a trainer and has been able to provide LifeSkills classes as well. Having a second trainer will allow for more students to be served. Online versions of the curriculum are available. (3/1/2022)</p> <p>LifeSkills</p> <p>Pioneer – Grade 6 6 lessons, 40 students, 9 hours (9/29/21, 10/10/21, 10/17/21)</p> <p>Harrisburg Middle School -Grade 6 9 lessons, 65 students, 15 hours (10/7/21, 10/14/21, 10/21/21)</p> <p>Hamilton Creek – Grade 6 3 lessons, 30 students, 6 hours (10/10/21, 10/17/21, 10/24/21)</p> <p>Santiam Canyon School – Grade 6 6 lessons, 34 students, 12 hours</p>	

<p>(10/11/21, 10/17/21, 10/24/21)</p> <p>Scio Middle School – Grade 6 6 lessons, 54 students, 9 hours (1/26/22, 2/2/22, 2/9/22)</p> <p>Lacomb – Grade 6 6 lessons, 22 students, 12 hours (1/27/22, 2/3/22, 2/10/22)</p> <p>Hawthorne Elementary – Grade 6 6 lessons, 57 students, 9 hours (4/12/22, 4/22/22, 4/29/22)</p> <p>Foster Elementary – Grade 6 6 lessons, 49 students, 9 hours (4/22/22, 4/29/22, 5/6/22).</p> <p>LCAD has established consistency with bringing LifeSkills into both 4th and 6th grade classrooms for this reporting period. (2/3/2023) LifeSkills</p>						<p>Pioneer – Grade 6 3 lessons, 186 students, 6 hours (10/12/22, 10/19/22, 11/2/22)</p> <p>Harrisburg Middle School -Grade 6 2 lessons, 126 students, 4 hours (10/4/22, 10/20/22)</p> <p>Hamilton Creek – Grade 6 3 lessons – 93 students – 6 hours (1/25/23, 2/1/23, 2/8/23)</p> <p>Santiam Canyon School – Grade 6 3 lessons, 141 students, 6 hours (10/13/22, 10/20/22, 10/27/22)</p> <p>Scio Middle School – Grade 6 3 lessons, 141 students, 6 hours (10/31/22, 11/7/22, 11/14/22)</p> <p>Lacomb – Grade 6 3 lessons – 81 students – 6 hours (1/27/23, 2/10/23, 2/17/23)</p> <p>Sio – Grade 4 1 lessons, 46 students, 2 hours (10/31/22)</p> <p>Pioneer – Grade 4 1 lessons, 48 students, 2 hours</p>
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									<p>(10/12/22) Lacomb – Grade 4 1 lessons, 34 students, 2 hours (1/27/23) Hamilton Creek – Grade 4 1 lessons, 47 students, 2 hours (1/25/23) Central Linn – Grade 4 1 lessons, 34 students, 2 hours (1/24/23)</p> <p>3/1/2023 – 8/31/2023 # of LifeSkills Trainings offered: 24 lessons # of classrooms attended: 7 # of students participate in training: 551</p> <p>Hawthorne - 6th Grade 3 lessons – 123 students (4/20/23, 4/27/23, 5/4/23) Foster - 6th Grade 3 lessons – 156 students (4/20/23, 4/27/23, 5/4/23) Riverview 4th Grade 1 lesson – 75 students (4/28/23) Cascades 6th Grade 3 lessons – 63 students (4/20/23, 4/25/23, 4/27/23) Foster 4th Grade 1 lesson – 55 students (4/21/23) Cascades 4th Grade 1 lesson – 41 students (4/26/23) Green Acres 4th Grade 1 lesson – 38 students (5/1/23)</p>
1j	5	Primary care clinics will continue to implement Screening Brief Intervention and Referral (SBIRT), Alcohol Use	Increase number of individuals with or at-risk of SUD/ODU who are referred to	# of screenings conducted	SLCH and clinics CHCBLC LCAD	Q1-Q12	In Progress	SLCH & Clinics # of screenings conducted: 10347 (9/1/2021 – 2/28/2022 SLCH & Clinics) # of screenings conducted: 12570	

		Disorder Identification Test (AUDIT) and Drug Abuse Screening Test (DAST) screening for all age-appropriate patients. LCAD will advocate for schools to screen middle and high school youth using the SBIRT.	treatment programs								(3/1/2023 – 8/31/2023 SLCH & Clinics) LCAD advocates for the schools to use the SBIRT screening tool. LCAD does not use the SBIRT as they are a treatment organization and have other assessment tools that they use.
	1k	5	Increase number of individuals with or at-risk of SUD/ OUD who are referred to treatment programs								SLCH & Clinics # of screenings conducted: 10347 (9/1/2021 – 2/28/2022 SLCH & Clinics) # of screenings conducted: 12,645 (3/1/2022 – 8/31/2022 SLCH & Clinics) # of screenings conducted: 11,656 (9/1/2022 – 2/28/2023 SLCH & Clinics) 3/1/2023 – 8/31/2023 # of screenings conducted: 12570 (SLCH & Clinics) # of patients referred to STARS for treatment: 414 (residential, IOP, OP, DU) FTRN # of referrals from FTRN PSS: 10 # of connections from FTRN PSS (people connecting to those services you refer them to): 2 (6/1/2022) 2/28/2023 FTRN PSS are helping 2 individuals access treatment services. 3/1/2023 – 8/31/2023 # of screenings conducted FTRN PSS 0 at this time however we are now able to connect client with a

Develop and implement all	2a	1	Individuals at risk of infectious complication,	Increase number of individuals	# of screenings	SLCH and clinics	Q1-Q12	In Progress	SLCH & Clinics
Goal 2: Strengthen and expand SUD/ OUD treatment services in rural Linn County.									
ASAM standard A&D assessment if needed	# of referrals FTRN Staff have assisted with 6 referrals	# of connections 6 connections have been made as all staff are able to provide transportation assistance to and from appointments if when needed.							

seven core treatment activities by August 31, 2024.		including HIV, viral hepatitis, and endocarditis, will be screened, tracked, and referred to treatment.	with or at risk of infectious complications who are referred to treatment	# of referrals	CHCBLC			3/1/2023-8/31/2023 Patients with a diagnosis of SUD who were tested for: # of screenings HIV/AIDS:147 # of screenings for HCV: 161
2b	2	Prioritize hiring providers who already have DEA Waiver to provide medication-assisted treatment and strongly encourage new hires to obtain DEA Waiver.	Increase number of providers with DEA Waiver, increase available MAT services	# of hires with DEA Waiver	SLCH and clinics CHCBLC	Q1-Q12	In Progress	The project director is working to track new and existing MAT providers in rural Linn County. Data surrounding medication types being prescribed is also being tracked. 8 SHS providers have DATA waiver 7 SHS providers have prescribed medications used to treat SUD/ OUD (2/28/2022) 11 SHS providers have DATA waiver 11 SHS provider have prescribed medication used to treat SUD/ OUD (8/30/2022)
2c	2	Offer DEA Waiver trainings annually in east Linn County to increase number of providers and other paraprofessionals licensed to provide MAT services.	Increase number of providers with DEA Waiver, increase available MAT services	# of trainings offered	SLCH CHCBLC	Q2, Q6, Q10	Not Started	CHCBLC will offer DEA trainings to their providers.
2d	4	RC-SWAY will continue to strengthen the service integration model between physicians, mental health providers, dentists, local law enforcement and service providers to reduce barriers to treatment and recovery.	Improve coordination of services for women and youth with SUD/ OUD	Service integration model implemented in the community	PD-DC SLCH STARS FTRN LCAD CHCBLC	Q1-Q4	In Progress	ETRN FTRN met with the Sweet Home Pregnancy Center and provided them with service information and materials. FTRN met with the office manager at the Sweet Home Clinic and provided them with service information and materials. FTRN PSS will physically be in the Sweet Home community to enhance networking opportunities (projected placement 4/1/2022). Desk spaces are being built at both locations (6/21/2022) 11/17/2022

																				<p>FTRN PSS are working in connection with Community Court to help support individuals who have law involvement and need to meet certain requirements assigned by the judge. 2/28/2023</p> <p>PSS are serving 8 participants (both male and female) through the Community Court program.</p> <p>3/1/2023 – 8/31/2023</p> <p>FTRN PSS are working in connection with Community Court to help support individuals who have law involvement and need to meet certain requirements assigned by the judge.</p> <p>From above dates PSS are serving 8 participants (both male and female) through the Community Court program. And able to provide transportation assistance to other agencies in with whom the client may also be involved with during the participation of Community court.</p> <p>STARS</p> <p>STARS PSS & PD presented on service integration between the RC-SWAY grant and referrals from providers to STARS at the SHS Lebanon provider meeting. (6/1/2022)</p> <p>STARS PSS has continued to meet with Maternal Health Care Coordinator, OBGYN's in Labor & Delivery, and Providers throughout the hospital during her interaction with patients that are referred to her from the hospital. PSS has helped</p>
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<p>to introduce and integrate other PSS into hospital and meets with them on a weekly basis during supervisor to discuss appropriate referrals. (9/1/22-2/28/23)</p>	<p>3/1/2023 – 8/31/2023 STARS PSS has continued to strengthen relationship between Emergency Room staff, ICU, Labor and Delivery Unit, as well as the Patient Care Coordinators. STARS PSS provides Law Enforcement of rural east Linn County, with business cards, pamphlets, and works together on a first name basis to better help our community members who suffer from SUD/OUUD. STARS PSS hosted an event for the service providers in our area to strengthen our support and reduce barriers. STARS PSS stays in constant communication with the clinics in the east Linn County to strengthen our working relationship and reduce the barriers to treatment and recovery.</p> <p>LCAD LCAD has been partnering with rural law enforcement and other outreach programs and reaching more woman who are struggling with SUD/OUUD.</p> <p>3/1/2023 – 8/31/2023 LCAD documented 72 referrals to community support groups such as AA/NA, primary care, mental health, and other services.</p>

<p><u>PD-DC</u> PD-DC convened a meeting with partners to discuss the formalities in conducting a Youth Needs Assessment. (2/16/2022) PD-DC collaborated with other grantees to focus on youth health and wellness. They convened a meeting with 47 attendees and discussed the current gaps, barriers, and successes surrounding youth in the region. (2/22/2022)</p> <p>3/1/2023-8/31/2023 Youth Health Needs Assessment Meetings were held with various partners on: 3/8/23, 3/23/23, 4/3/23, 4/18/23, 5/5/23. RC-SWAY PD and HIWAY PD initiated conversations and meetings with various partners in the region who have conducted similar assessments for youth. PD's obtained a list of various resources in the region that are already available for youth. FTRN Youth Peer Outreach was denied the ability to provide students with the survey due to the content around drugs and alcohol. PD's regrouped over the Summer and began conversations with 1 partner around partnering our efforts and utilizing the data from another needs assessment. 5/11/23: PD attended Project Nurture Collaboration and gained insights on pregnancy and postpartum resources.</p>																					

	2e	7	Peer Support Specialists will conduct outreach efforts to Maternity Care Coordinators to assist pregnant women in navigating the treatment and recovery system.	Improve access to treatment and recovery programs for pregnant women	# of pregnant women provided assistance	SLCH STARS FTRN	Q2-Q12	In Progress	<p>FTRN reached out to the SHS Maternity Care Coordinator (MCC) in Lebanon on 11/16/2021 and a meeting took place 12/8/2021. When FTRN met with the MCC, they were brought up to speed on referrals and service delivery already in place and learned how to best serve new clients in the already established system. FTRN created a flyer and trifold for passing out to patients/clients.</p> <p># of referrals FTRN received from the MCC: 3</p> <p># of pregnant women provided assistance through engaging in services: 1 (3/3/2022)</p> <p>FTRN PSS Lynette is completing necessary requirements to receive clearance for the Samaritan Lebanon Community Hospital so that she can provide services and support to the Emergency Department and Labor & Delivery unit.</p> <p>3/1/2023 – 8/31/2023</p> <p># of pregnant women provided assistance: 7</p> <p>PSS are additionally supporting 8 individuals and families referred by Community Court in Sweet Home.</p> <p>STARS</p> <p>STARS PSS has received referrals from both the MCC in Lebanon (Laurie Barajas) and the MCC in Albany (Pam Collier).</p> <p># of referrals STARS PSS has</p>
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									<p>received from the MCC: 6 (8/31/2022)</p> <p># of pregnant women provided assistance through engaging in services: 13 (8/31/2022)</p> <p># of referrals STARS PSS has received from the MCC: 5</p> <p># of pregnant women provided assistance through engaging in services: 6</p> <p>3/1/2023 – 8/31/2023</p> <p># of pregnant women provided assistance: 3</p> <p># who engaged in services: 2</p> <p># referred from Labor & Delivery: 3</p>
2f	4	Peer Support Specialists will conduct outreach efforts to schools and youth serving agencies to assist youth in navigating the treatment and recovery system.	Improve access to treatment and recovery programs for youth	<p># of youth provided assistance</p> <p># of speaking engagements (specify location)</p> <p># of outreach events attended (specify location)</p> <p># of meetings with youth's family</p>	FTRN	Q2-Q12	In Progress	<p>FTRN will be providing outreach to schools by connecting with school superintendents and other staff. FTRN will reach youth through support groups taking place at LCAD. Additionally, FTRN will introduce youth to treatment services via the parents of the youth.</p> <p>FTRN has conducted outreach efforts with local youth treatment facilities. Information has been gathered regarding evidence-based practice when working with youth. (4/11/22)</p> <p>Speaking engagements have been coordinated and a youth in the community has been identified to be trained to speak at these events. (4/11/22)</p> <p>A youth speaker has been hired by FTRN and training will start for the youth employee throughout summer</p>	

																						<p>2022.</p> <p>FTRN has met with the Lebanon school district and identified appropriate settings for the youth speaker to share their experience(s).</p> <p>FTRN will coordinate a booth at the Lebanon High School Open House event to share services and resources with families in the fall of 2022.</p> <p>Youth speaking events at Linn County Alcohol & Drug Program will commence after the youth employee has obtained the proper training. (6/1/2022)</p> <p>FTRN is in contact with Oak Creek school to coordinate potential outreach opportunities. (8/4/2022)</p> <p>The Youth Peer Outreach Worker is going through the local school's background check. He met with LCAD on 9/7 to share his message of recovery and gain approval to share his message with youth accessing services. He is now Mental Health First Aid certified for Youth. He has been cleared through the central background registry and is cleared to work with children. He also sits on the YST and STAND committees. (9/6/2022).</p> <p>2/28/2023 Youth Outreach Specialist Carter is making progress connecting with high schools and is speaking to students in the Health Communications class. He plans to</p>
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<p>which rose to the level of needing treatment services) (9/1/2021 – 2/28/2022)</p>	<p># of youth entering treatment: 15 (9/1/2021 – 2/28/2022)</p>	<p># of youth participating in early intervention services: 19 (none of which rose to the level of needing treatment services) (3/1/2022 – 8/31/2022)</p>	<p># of youth entering treatment: 51 (3/1/2022 – 8/31/2022)</p>	<p><u>Hours</u></p>	<p>Early Intervention Hours: 17 (1/31/2022)</p>	<p>Early Intervention Hours: 13 (2/28/2022)</p>	<p>Early Intervention Hours: 24.5 (3/31/2022)</p>	<p>Early Intervention Hours: 16 (4/30/2022)</p>	<p>Early Intervention Hours: 23.5 (5/31/2022)</p>	<p>Early Intervention Hours: 8.5 (6/30/2022)</p>	<p>Early Intervention Hours: 4 (7/31/2022)</p>	<p>Early Intervention Hours: 2 (8/31/2022)</p>	<p><u>Numbers</u></p>	<p># of youth assessed: 34 (6 entered Early Intervention, 19 entered Outpatient, 6 entered intensive outpatient, 1 entered residential, 2 did not need treatment)</p>	<p>(12/1/22 – 2/28/23)</p>	<p># of youth participating in early intervention services: 90 (9/1/2022 – 2/28/2023)</p>	<p># of youth entering treatment: 24 (9/1/2022 – 2/28/2023)</p>	<p><u>Hours</u></p>																																																																																																																																																																																																																																				
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	2h	5	<p>Coordinate training and education opportunities for law enforcement and first responders to understand the trends of SUD/ODU in the community particularly unhouse, pregnant women and youth.</p>	<p>Create a more compassionate environment that will improve access to services for women and youth</p>	<p># of people attend trainings</p>	<p>PD-DC</p>	<p>Q3, Q7, Q11</p>	<p>In Progress</p>	<p>Early Intervention Hours: 11.5 (1/3/2023) Early Intervention Hours: 13 (2/3/2023) 3/1/2023 – 8/31/2023 # of youth participating in early intervention services = 22 # of youth entering treatment = 23</p>
									<p>The RC-SWAY team will work together to plan this training. FTRN & their relationship with law enforcement will be helpful in coordinating this training. One potential trainer/speaker that was suggested was Dr. Simmons with STARS.</p> <p>CME trainings offered through Samaritan will be emailed to law enforcement and first responder partners.</p> <p>It was shared at the RC-SWAY team meeting on 3/7/2022 that local law enforcement has required crisis intervention trainings (CIT) and this could be a potential spot to partner and see about integrating in some SUD-related training.</p> <p>PD-DC spoke with Captain Hyde and Lieutenant Jackson about grant projects and discussed OD-Maps. PD invited them to CCCWN Network meetings reiterating the value in having close partnerships with law enforcement. (1/27/23, 2/2/23)</p> <p>PC-DC collaborated with various providers to discuss recent trends with overdose and procedure with PSS. Dr. Sprague, Medical Director</p>

									of ED and Linn County EMS, is working with others to create a more seamless process for individuals entering the ED so that each person brought in with SUD/ODD is met by a PSS. (2/21/23)
									3/1/2023-8/31/2023 On 4/3/23 PD spoke with Albany Chief of Police and Lebanon Chief of Police on ensuring homeless shelters in the area had enough Narcan on hand, SUD and overdose educational material, and resource pamphlets. June 2023 introduce STARS new PSS to Lebanon Police Dept and Sweet Home Police Dept. Provided insight into her role with supporting woman and children. Discussed the increased risk pregnant and postpartum mothers, stigma surrounding SUD and pregnancy, and resources for youth.
2i	6	Offer training to the consortium, providers, and staff of local SUD/ODD treatment centers on proper coding and billing across insurance types.	Increase resources to sustain services provided through this project	# of people attend trainings	SLCH	Q8	Not Started		
2j	7	Peer Support Specialists will assist individual, family and caregiver referrals and connections to home and community-based and social support services available in the community.	Improve access to services and community supports for women, families, caregivers, and youth with SUD/ODD	# of people who are referred to services # of people connected to services	STARS FTRN LCAD CHCBLC	Q1-Q12	In Progress	FTRN (receiving referrals) # of referrals received at FTRN: 2 # of people connected to services at FTRN: 2 Two mothers are currently receiving services from FTRN. (2/4/2022) # of referrals received at FTRN: 2 # of people connected to services at FTRN: 2 There have been 2 referrals for	

<p>family members that need support in navigating SUD within their family systems. Both are grandparents caring for the children whose parents are in active use. (4/11/22)</p>										
<p>FTRN is serving 4 families and assisting them in navigating additional recovery supports. PSS is working in connection with STARS to assist 1 mom with accessing treatment.</p>										
<p># of referrals received at FTRN: 4 # of people connected to services at FTRN: 4 # of people referred out: 1</p>										
<p>3/1/2023 – 8/31/2023 # of people who are referred to services Childcare: 7 Employment: 7 Postpartum Support: 7 Recovery Housing: 7 Transportation: 7</p>										
<p># children connected to services: 6 Several women have also been referred to SUD treatments and the PSS help them walk through that process.</p>										
<p><u>LCAD (referring out)</u> # of referrals to Recovery Housing: 13 referrals # of referrals to Transportation to treatment: 18 referrals # of referrals to Self-help groups: 141 referrals (for both rural and non-rural locations) (9/1/2021 – 2/28/2022)</p>										
<p># of referrals to Recovery Housing: 40 referrals</p>										

<p># of referrals to Transportation to treatment: 48 referrals # of referrals to Self-help groups: 171 referrals</p>	<p>(for both rural and non-rural locations) (3/1/2022 – 8/31/2022) During 9/1/22-2/28/23 LCAD staff participated in training with a new medical record system for more consistent tracking with referral processes. Their numbers this quarter are lower due to the training process.</p>	<p>Referrals Out # of referrals to Recovery House: 13 referrals</p>	<p># of referrals to Transportation to treatment: 18</p>	<p># of referrals to Self-help groups: 141 referrals</p>	<p># of referrals to other Community programs: 41 referrals</p>	<p>Referrals Received ADES: 8 referrals Circuit Court: 8 referrals Jail: 3 referrals Parole/Probation: 51 referrals School: 22 referrals</p>	<p>3/1/2023-8/31/2023</p>	<p># of people who are referred to services (referring out) 131 referred to community supports such as AA/NA, Primary Care, Mental Health</p>	<p>53 referred to Recovery Housing 44 referred to Transportation</p>	<p># of people connected to services: we don't have a mechanism to track this internally</p>	<p>STARS (referring out) # of referrals (not individuals) to childcare: 3</p>
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<p># of referrals (not individuals) to employment services: 1 # of referrals (not individuals) to prenatal/postpartum care services: 3 # of referrals (not individuals) to recovery housing: 14 # of referrals (not individuals) to transportation to treatment: 27 # of referrals (not individuals) to CARDV: 2 # of referrals (not individuals) to mental health treatment: 13 # of referrals (not individuals) to community recovery: 21 # of referrals for family members: 3 # of people connected to services: not tracked at this time (9/1/2021 – 2/28/2022)</p>															
<p># of referrals (not individuals) to employment services: 1 # of referrals (not individuals) to prenatal/postpartum care services: 7 # of referrals (not individuals) for recovery housing: 14 # of referrals (not individuals) for transportation to treatment: 23 # of referrals (not individuals) to CARDV: 1 # of referrals (not individuals) to mental health treatment: 1 # of referrals (not individuals) to community recovery: 23 # of people connected to services: not tracked at this time (3/1/2022 – 8/31/2022)</p>															
<p># of referrals to Childcare services: 0 # of referrals to Employment Services: 2 # of referrals to Prenatal/Postpartum care services: 3 # of referrals to Recovery Housing: 11 # of referrals to Transportations to treatment: 23 # of referrals to CARDV: 5 known # of referrals to Mental Health Treatment: 3 # of referrals to Community Recovery: 23 (9/1/2022 – 2/28/2023)</p>															
<p>3/1/2023 – 8/31/2023 # of referrals to Childcare services: 1 # of referrals to Employment Services: 1 # of referrals to Prenatal/Postpartum care services: 3 # of referrals to Recovery Housing: 4 # of referrals to Transportations to treatment: 16 # of referrals to CARDV: 2</p>															

									<p># of referrals to Mental Health Treatment: 18 # of referrals to Community Recovery: 19 # of people who are referred to services: 31 # of people connected to services: 26</p>
Goal 3: Strengthen and expand SUD/ODU recovery services in rural Linn County.									
Develop and implement all three core recovery activities by August 31, 2024.	3a	1	Peer Support Specialists will outreach to Linn County Probation and Parole and local residential treatment facilities to connect people to housing and other services.	Improve access to services and supports to individuals within the justice system and residential treatment facilities	# of people connected to services	STARS FTRN	Q2-Q12	In Progress	<p><u>FTRN</u> FTRN PSS attended Community Court on 12/22/21 to network with the local police office and law enforcement in Sweet Home. FTRN PSS is partnering with Measure 110 Access to Care outreach.</p> <p>FTRN PSS continues to attend Sweet Home Community Court as a way to connect to individuals experiencing homelessness and the criminal justice system. (6/1/2022)</p> <p>FTRN has coordinated with Sweet Home treatment services and Exodus treatment services, and both can now refer out for peer support services to FTRN. (3/3/2022)</p> <p># of people connected to services by FTRN: 2 (4/11/22)</p> <p>FTRN does not currently have a PSS designated to the Community Court support position however PSS Lynette plans to begin attending the monthly meetings in the near future. (11/17/2022) FTRN PSS is working with 8 individuals who were referred through Community Court and connecting them with resources such as housing and transportation. (2/28/2023)</p>

<p>3/1/2023 – 8/31/2023 # people connected to services 3</p> <p>FTRN initiated a referral system for Sweet Home Treatment Services and Exodus treatment services to streamline the process so clients can receive PSS services. FTRN PSS continues to attend Sweet Home Community Court and aids individuals experiencing homelessness and involved with the criminal justice system. PSS assist the court staff with the referral process for clients to obtain an intake and navigate services.</p> <p><u>STARS</u> STARS PSS attended Albany Police Dept talk on fentanyl and passed out brochures, cards, and Narcan (from a different funding source) as a way to share services available in rural Linn County.</p> <p># of people connected to housing/shelter services by STARS: 2 (6/1/2022)</p> <p>STARS PSS has gone to Community Court 4 times over the last quarter. PSS met with Director of Obria and discussed services for unhoused women or women discharging from treatment. # of referrals from Community Court: 0 Linn Co P&P clients connected to housing: 4 Linn Co P&P clients connected to supports: 4 (9/1/2022-2/28/2023)</p>																						

									<p>3/1/2023 – 8/31/2023</p> <p># people connected to services: 26 Referral from Community Court: 1 Helped into housing: 3</p> <p>STARS PSS attends Community Court in Sweet Home on a monthly basis and meets with Community Outreach Officer Sean Morgan of the Sweet Home Police Department.</p> <p>PSS continues to support the FAC Shelter, Hope Center, Exodus, and Pregnancy Resource Center of Sweet Home with a partnership in shared community resources and PSS services, including wrap around services for SUD/ODU clients.</p>
3b	2	Peer Support Specialists will be assigned to the SLCH /emergency department, jails, residential treatment facilities and schools.	Peer support services available on-site to facilitate entry into treatment, increase number of people entering SUD / OUD treatment	# of contacts # of referrals # of connections	STARS FTRN	Q2-Q12	In Progress	<p>STARS</p> <p>Below shows the data for the STARS PSS's contacts in a given location, referrals to a given location, and connections an individual has made with the given location.</p> <p># of contacts: 4 ED, 1 res treat, 1 IOP, 4 other # of referrals: 1 res treat, 2 detox # of connections: not tracked (3/4/2022)</p> <p># of contacts: 17 ED, 0 jail, 7 res treat, 11, 4 other IOP # of referrals: 11 res treat, 11 IOP, 2 detox # of connections: 7 res treat, 2 IOP (8/31/2022)</p> <p>STARS PSS facilitated 12 step meetings for patients in treatment.</p>	

<p>(10/8/2022) # of contacts: Emergency Dept: 0 Jail: 2 Residential treatment: 5 (16 during 12-step meetings) Intensive Outpatient: 4 Detox: 6 (2/28/2023)</p>	<p>3/1/3023 – 8/31/2023 SLCH ED # of contacts: 12 # of referrals: 28 # of connections: 8 STARS # of contacts: 14 # of referrals: 36 # of connections: 10 JAILS # of contacts: 0 # of referrals: 0 # of connections: 0</p>	<p>FTRN FTRN contacted Capt. Langley at the Linn County Jail on 12/6/2021 and was informed that there are no outside services entering the jail at this time. Linn Co jail has established new criteria for professional visitation with adults in custody. The FRTN PSS has started the process to better support unhoused individuals. FTRN has been seeking clearance to enter the SHS Lebanon Emergency Department. (6/1/2022) All new FTRN staff have been</p>

										<p>cleared for Linn County Jail visitations. They are in the process of presenting their services to all the police departments in the county in hope to lesson barriers and create a seamless referral process.</p> <p>PSS Lynette is waiting to receive clearance for the SLCH emergency department. (2/28/2023)</p> <p>Jails # contacts: 2 Residential Treatment # of referrals: 1</p> <p>3/1/2023 – 8/31/2023</p> <p># of contacts 1 # of referrals 14 # of connections 14</p> <p>FTRN PSS staff have been collaborating with Linn County Jail and receiving referrals. FTRN staff are providing resources to clients who are incarcerated (SUD assessments, housing, MAT referrals) prior to their release.</p> <p># of people trained: 16</p>
3c	3	Outreach and train individuals and agency staff to increase the supply of Peer Recovery Coaches and Peer Support Specialists.	Increase in peer support workforce, increase support for people with SUD/OUUD	# of people trained	FTRN	Q3, Q7, Q11	In Progress	FTRN has partnered with 3 local agencies to place FTRN staff in their programming as interns. FTRN has trained 12 community members to obtain their CRM certification free of cost to them. (4/11/22)	FTRN has offered an agency specific training to the volunteer staff to gain their CRM. There are 4 staff obtaining this training information. (4/28/2022)	
									FTRN is preparing a PSS 40 hour	

									<p>training program to submit to OHA for approval. (6/1/2022)</p> <p>The 40 hr training program application has been submitted. (8/4/2022)</p> <p>CRM Training (as of 2/28/2023) # of people trained: 18 graduates FTRN PSS Supervisor reports there was a wide variety of participants from diverse backgrounds and many individuals found employment while attending the training. Waiting on approval from OHA to begin the 40 hr CRM training. # of people on the waitlist: 25 individuals</p> <p>3/1/2023 – 8/31/2023 # of people trained 3 FTRN has partnered with 2 local agencies and have 3 staff as interns to obtain there CADC1. FTRN is currently submitting a 40 hr. training to OHA for CRM certifications. Currently there is a full list of 25 people that once approval process is finished all 25 people will be able to access the training at no cost to them. First submittal for training was denied due to paperwork error but is getting worked out for re submittal.</p>
3d									<p>3</p> <p>FTRN Peer Support Group Leader will provide support groups, counseling and mentoring to Peer Support Specialists connected to the project.</p>
									<p>Strengthen peer support workforce, increase retention and skills of PSSs</p>
									<p># of contacts, group sessions, counseling sessions, mentoring sessions</p>
									FTRN
									Q2-Q12
									In Progress
									<p>The first PSS support group session will take place on 1/13/2022.</p> <p>PSS support groups are in process and held on Thursdays at 11am. Flyers and other materials have been created and will be distributed to community partners as a</p>

																						<p>resource for their PSS staff.</p> <p>STARS and FTRN are working together to open this group to a larger peer network. Recurring Teams meetings have been scheduled & a public flyer has been made. (6/1/2022)</p> <p># of support group sessions conducted: 17 1/13/2022, 1/27/2022, 2/10/2022, 2/24/2022, 3/10/2022, 3/24/2022, 4/7/2022, 4/21/2022, 5/5/2022, 5/19/2022, 6/2/2022, 6/16/2022, 6/30/2022, 7/14/2022, 7/28/2022, 8/11/2022, 8/25/2022</p> <p>10/8/2022 Open Zoom link was created and a flyer was sent out to multiple partners across the region that employ Peer Mentors. 11/17/2022 FTRN and STARS Peer Mentors have been the only participants at the Support Group meetings thus far. 2/28/2023 Attendance for the meetings remains low. FTRN PSS Supervisor has facilitated the meetings on the following topics: Ethics, Dual Roles, Conflicts of Interest, Self-Care # of meetings: 23 (since 10/17/22)</p> <p>3/1/2023 – 8/31/2023 # of contacts, group sessions, counseling sessions, mentoring sessions: Every Monday at 11:00 AM 26 Support Groups</p> <p>Flyers and other materials have been created distributed to community partners as a resource</p>
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									for their PSS staff. Attendance for the PSS Support Group has been extremely low with only 1 to 3 peers joining weekly. STARS and FTRN are collaborating on opening the support group up to a larger peer network. Decisions have been made to change the day, time, and online meeting platform starting in September. New flyers will be made and distributed.
3e	3	Support FTRN in expanding access of recovery support services.	Strengthen recovery communities, increase number of people who remain in recovery	Amount and type of increased services offered by FTRN	PD-DC FTRN	Q2-Q12	In Progress	# of Increased Services: 5 Increased Services in the following areas: -Adults with SUD/ODU -Pregnant women with SUD/ODU -Youth services for SUD/ODU -Drug take back events -Peer support programming and support groups (6/1/2022) -additional CRM 40hr training for individuals in recovery to work as a Peer Mentor -expanded services to have an additional office space at the Church of Nazarene in Sweet Home and continuing to provide support at the Hope Center and Family Clinic in Sweet Home (11/17/2022) 3/1/2023 – 8/31/2023 FTRN increased services by 2 The Church of Nazarene location across the street from Sweet Home Family Medicine now houses the Therapeutic Early Childcare Program (TECP) classrooms and respite care for families. This location staffs 2 employees on altering days so someone is there	

									<p>daily. Staff coordinate services and assess clients within the community. Additionally, the Nurturing Parenting activities have expanded into the rural area and in the near future Parent Café supports will be held at Sweet Home locations .</p>
<p>Goal 4: Strengthen and sustain the activities of the Mental Health Substance Abuse Subcommittee of the CCCWN beyond the grant period.</p>									
<p>Provide effective communication about SUD/ODU prevention, treatment, and recovery activities to stakeholders throughout project period.</p>	<p>4a</p>	<p>3</p>	<p>Convene monthly meetings of the RC-SWAY Consortium to guide activity coordination among organizations and within the Consortium.</p>	<p>Improve coordination of services women and youth with SUD/ODU</p>	<p># of people in attendance</p>	<p>PD-DC</p>	<p>Monthly, Q1-Q12</p>	<p>In Progress</p>	<p><u>MH/SUD Regional Coalition Meeting:</u> 10/19/2021: 22 attendees 11/18/2021: 20 attendees 12/16/2021: 18 attendees 1/10/2022: 20 attendees 2/14/2022: 19 attendees 3/14/2022: 21 attendees 4/11/2022: 25 attendees 5/16/2022: 24 attendees 6/13/2022: 28 attendees 7/11/2022: 29 attendees 8/8/2022: 31 attendees 9/12/2022: 35 attendees 10/10/2022: 33 attendees 11/14/2022: 26 attendees 12/12/2022: 26 attendees 1/9/2023: 33 attendees 2/13/2023: 33 attendees 3/13/2023: 31 attendees 4/10/2023: 31 attendees 5/8/2023: 24 attendees 6/12/2023: 27 attendees 8/14/2023: 24 attendees</p> <p><u>RC-SWAY Team Meeting:</u> 12/6/2021: 7 attendees 3/7/2022: 9 attendees 6/6/2022: 5 attendees 9/14/2022: 7 attendees 10/19/2022: 3 attendees 12/21/2022: 3 attendees 1/26/2023: 4 attendees 3/8/2023: 5 attendees</p>

	4b	3	Provide bimonthly activity progress updates, lessons learned and successes to the CCCWN Steering Committee and full CCCWN.	Improve access to services and increase SUD/OD support for women and youth	Bi-monthly progress reports	PD-DC	Q1-Q12	In Progress	<p>7/21/2023: 3 attendees 8/1/2023: 7 attendees 8/7/2023: 3 attendees</p> <p>PIMS Team Meeting: 2/3/2022: 11 attendees 3/10/2023: 7 attendees 8/31/2023: 6 attendees</p> <p>CCCWN Steering Committee Meeting: 10/13/202: 12 attendees (3 CCCWN Network Members) 12/8/2021: 16 attendees (7 CCCWN Network Members) 2/9/2022: 13 attendees (4 CCCWN Network Members) 4/13/2022: 15 attendees (7 CCCWN Network Members) 6/8/2022: 11 attendees (4 CCCWN Network Members) 8/10/2022: 12 attendees (2 CCCWN Network Members) 12/14/2022: 14 attendees 2/8/2023: 14 attendees 4/12/2023: 14 attendees 6/14/2023: 13 attendees 8/9/2023: 12 attendees</p> <p>CCCWN Network Meeting: 11/10/2021: 20 (11 CCCWN Network Members) 5/17/2022: 29 (12 CCCWN Network Members) 11/2/2022: 22 attendees 5/24/2023: 22 attendees</p>
	4c	3	Provide copies of the biannual progress reports, the sustainability plan and the final performance / closeout reports to the CCCWN Steering Committee and the full CCCWN.	Improve coordination of services for women and youth with SUD/OD	Biannual reports submitted, Sustainability plan complete, Final report submitted	PD-DC	Q1-Q12	In Progress	<p>Biannual Progress Reports: 3/31/2022: Submitted 9/30/2022: Submitted 3/29/2023: Submitted</p> <p>PIMS: 5/31/2022: Submitted 9/30/2022: Submitted</p>

											3/29/2023: Submitted Sustainability Plan: 9/30/2022: Submitted 8/28/2023: (Sustainability #2 Draft submitted to PO & TA)
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