

2020

## Healthy Acadia MeHAF Addiction Care Program. Year Three Summary

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### Recommended Citation

Smith, M. L., Rosingana, K., Ali, E., Gallo, R., & Egeland, T. (2020). Healthy Acadia MeHAF Addiction Care Program. Year Three Summary. University of Southern Maine, Muskie School of Public Service, Cutler Institute.

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# Healthy Acadia MeHAF Addiction Care Program

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YEAR 3 SUMMARY

# Background

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In 2017, Healthy Acadia was awarded a three-year grant from MeHAF to create a hub-and-spoke system for Integrated Medication-Assisted Treatment (IMAT) – in Hancock and western Washington Counties.

“The Hub provides initial care for people struggling with opioid use, coordinates with addiction specialists during initiation and stabilization. This system connects to the Spokes of primary care practices, delivering MAT to individuals after stabilization at the Hub.” –*Healthy Acadia MeHAF grant application*

Year 1

April 2017 – March 2018

Year 2

April 2018 – March 2019

Year 3

April 2019 – March 2020

# Healthy Acadia's Downeast Opioid Treatment Hub and Spokes Project

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## Project Goal:

- Increase provider and practice capacity to deliver Medication-Assisted Expand access and enhance MAT services in Downeast Maine

## Project Components:

- Hub and Spoke model of care: Hub is Downeast Treatment Center
- Support, training and technical assistance to PCP spoke sites
- Healthy Acadia is convener of partners
- Peer Recovery Coaching (volunteer)

# Overview

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- The Maine Health Access Foundation (MeHAF) contracted with the Cutler Institute at the University of Southern Maine to provide evaluation services for the Addiction Care Program for three years. Evaluation data was collected from a variety of sources, including surveys, continuous quality improvement data, and focus groups.
- Additionally, as part of a subsequent federal grant, Healthy Acadia and their partners completed a Partnership Self-Assessment during Year 3 of the MeHAF project.
- This presentation compiles data collected in Year 3 of Healthy Acadia's grant, to include: a focus group with stakeholders and the Partnership Self-Assessment Survey.

# Data Sources

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## Change Team Focus Group

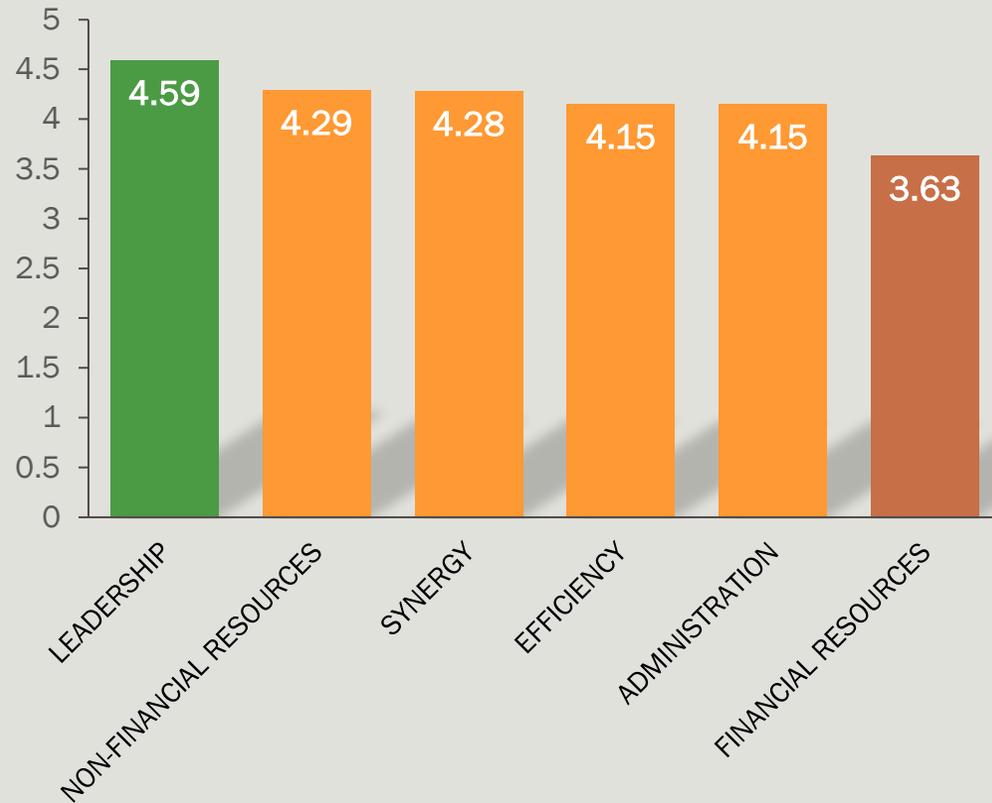
- Conducted by the Cutler Institute on March 26, 2020 via Zoom teleconference
- Engaged 5 stakeholders leading MAT expansion and implementation within Healthy Acadia and partner organizations



## Partnership Self-Assessment Survey<sup>1</sup>

- Deployed by the Cutler Institute to Healthy Acadia partners in Fall 2019
- n=8, 67% response rate
- Standardized questionnaire to examine the strengths and weaknesses of a partnership across 6 domains

# Overview of Partnership Self-Assessment



## Scoring:

**Target Zone:** Partnership currently excels in this area and needs to focus attention on maintaining a high score

**Headway Zone:** Partnership is doing pretty well in this area but has potential to progress even further

**Work Zone:** More effort is needed in this area to maximize partnership's collaborative potential

**Danger Zone:** Area needs a lot of improvement

**Key Takeaway:** The leadership domain scored the highest among respondents

# Overview of Change Team Focus Group

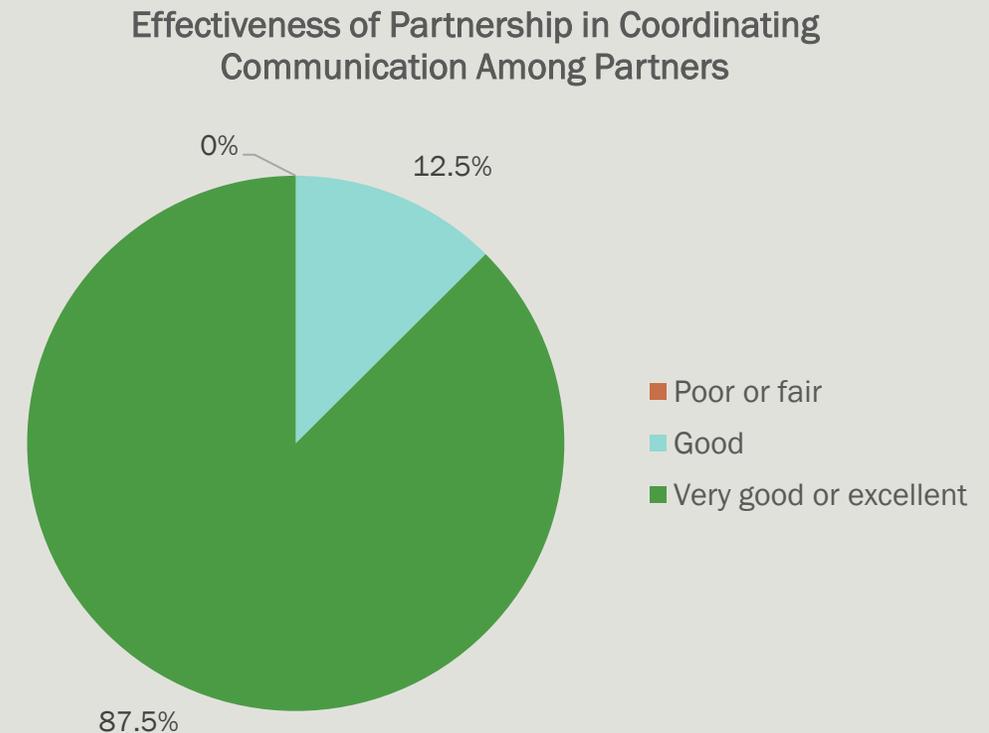
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- The Downeast MAT expansion project Change Team is charged with overseeing the implementation of the initiative
- Focus group engaged key stakeholders (Change Team members) involved with MAT expansion and implementation
- Stakeholders reported on:
  1. Partnership and Collaboration
  2. Expanding MAT
  3. Patient-Centered Care
  4. Adapting to COVID-19
  5. Resource Strategies

# Partnership and Collaboration

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- Hub-and-spoke team encompasses broad and diverse provider types with shared goals.
- Partnership's insight create better awareness of challenges in the recovery community.
- **87.5%** of partners indicate that effectiveness of partnership in coordinating communication among partners is **very good or excellent**.



# Partnership and Collaboration, *cont.*

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- **Strong communication and relationships between partner organizations leads to improved quality of care for patients.**
  - Collaboration targets the challenges associated with payment, needing peer support, transportation, program expansion, gaps in resource availability, etc.

*“There have been examples of patients seeking recovery arriving at one of the spokes and running into challenges with payment or needing peer support or transportation or meeting other barriers. Then the power of the collaborative gets turned on and that person is walked around those barriers or over those barriers and enters treatment.”*

# Expanding MAT

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Healthy Acadia change team acted as a catalyst to bring together organizations and implement the **Downeast Treatment Center**

- Acts as a hub to partner organizations
- Successful expansion attributed to strong partnership and efficient resource-sharing

*“We launched the entire Downeast Treatment Center, so we launched a whole new treatment program as a result of this collaborative, a whole new treatment center. Then [...] moving through these three years, this change team as well as the hub-and-spoke clinical advisory committee and others have continually responded to the needs that arise, the questions that come up, the learning, shared learning.”*

# Patient-Centered Care

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- **Shifting Policies**
  - Changing hours in response to patient need
  - Treatment plans with varying levels of in-person support
- **Assessing and responding to the geographic infrastructure needs of patients**
  - Implementing a satellite hub supported by telehealth in Stonington

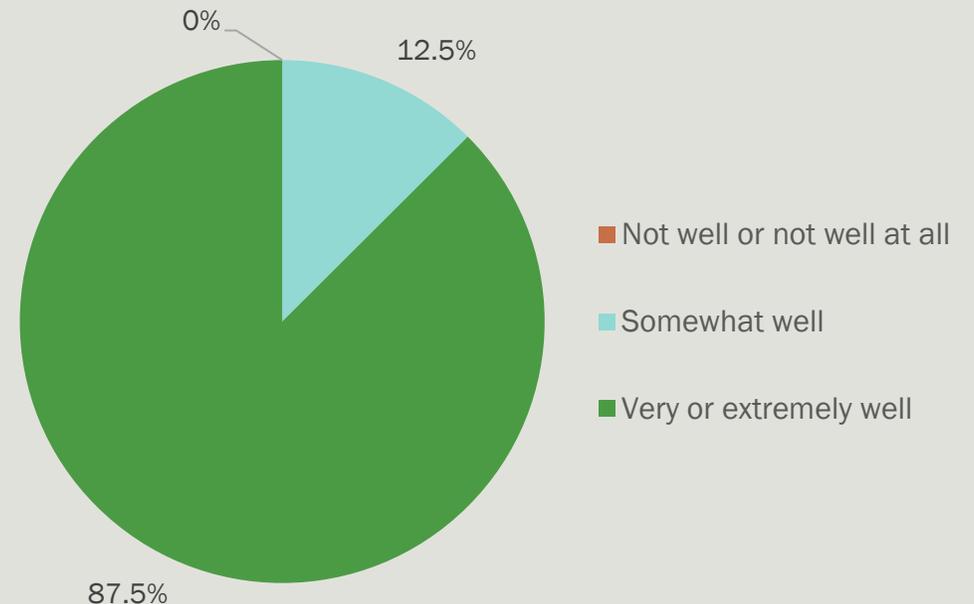
*“[Our policies are] continually evolving in terms of understanding what can we do with urine test screens? When they come back how do we respond to those issues that come up? How do we best make it a treatment issue as opposed to penalizing? How do we best move people through the process?”*

# Patient-Centered Care cont.

- Implementing recovery coaches
  - Peer mentors and advocates
  - Coaching integrated into partner and hub sites
  - Collaboration between recovery coaches and providers contributes to better understanding of patient needs

*“Many of our recovery coaches are in recovery. They're recovery allies, meaning someone in their life is someone in recovery or with a substance use disorder. And they represent all the people that they work with. So those voices are always in the room.”*

By working together, how well are these partners able to include the views and priorities of the people affected by the partnership's work?

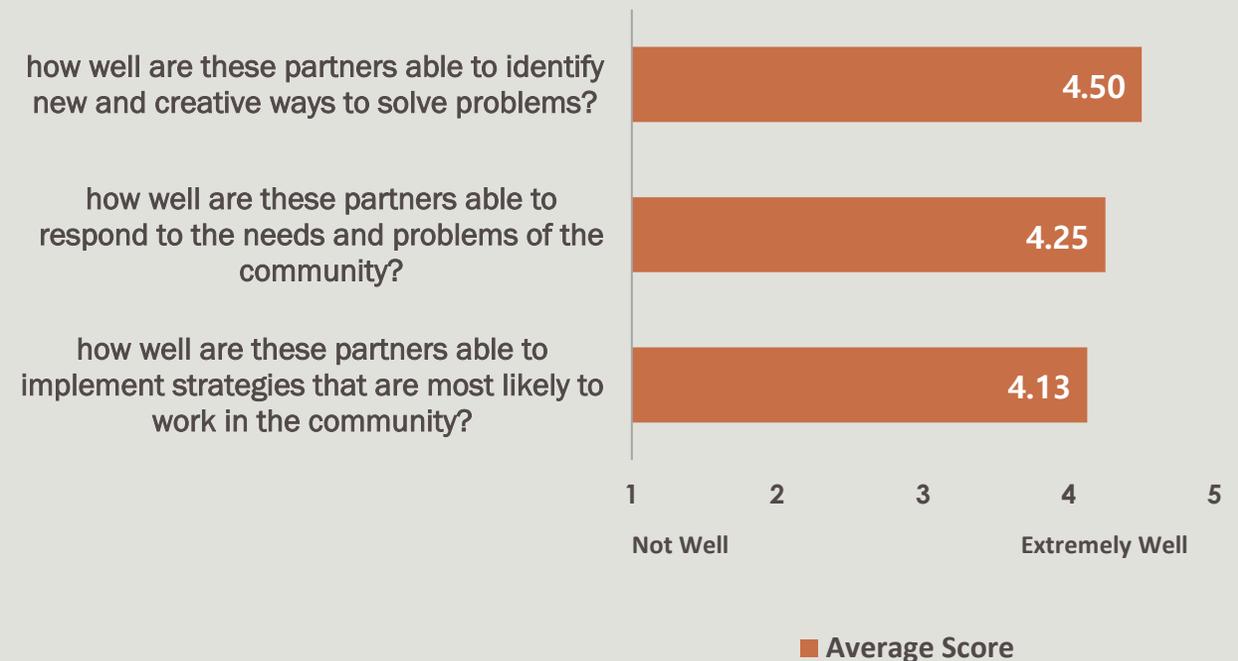


# Adapting to COVID-19

- COVID-19 has disrupted scheduled appointments and services.
- Healthy Acadia leadership is emphasizing increased patient engagement during this time by jointly leveraging:
  - Peer recovery coaches
  - Telehealth

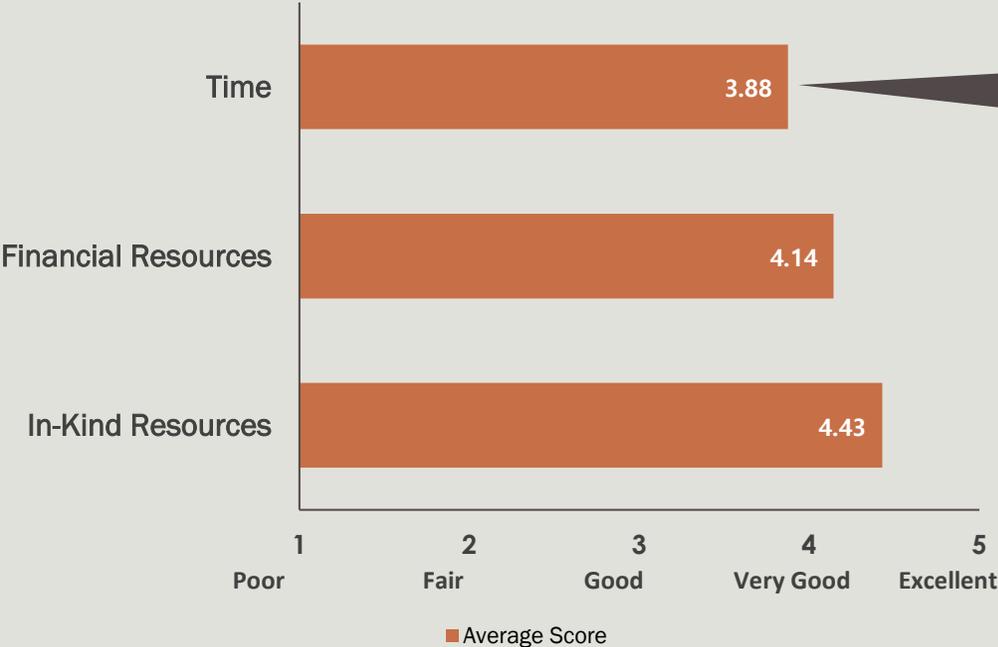
*"[...]this is a time when we should be having more increased contact with these folks. They're isolated, they're anxious, they're worried, they're concerned. It's not the time to be pulling back. We think that's a good idea. We're in the process of working that out."*

*Survey responses on partnership synergy indicate strong ability to solve emerging problems at the benefit of their community, as Healthy Acadia is doing in response to COVID-19.*



# Resource Strategies

Efficiency: Rate How Well Your Partnership Uses the Partner's...



*“the larger the [partnership], the more time it takes, the more coordination it takes, and that can slow down growth”*

*“[...]there’s a lot of investment of time to develop those relationships”*

# Resource Strategies

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Key findings from focus group with implementation partners include:

- Healthy Acadia attributes much of its success to leveraging resources across multiple organizations
- **100%** of survey respondents rated the effectiveness of the partnership in applying for and managing grants and funds as **very good or excellent**
- **85.7%** of respondents reported that they had received additional financial support from participation in the partnership

*“Financial resources are shared. A cost basis budget is put together and is very transparent to all the organizations. Financial staffing, across-the-board resources are shared to really have a partnership collaborative program that comes together”*

# Next Steps

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- **Continue to pursue telehealth implementation and expansion to serve patients with OUD**
  - There have been early successes given the disruptions of regular service due to COVID-19
  - Telehealth greatly improves overall accessibility for service populations in remote locations or without convenient transportation.
- **Continue to explore most efficient and effective uses of existing organizational resources**
  - Continue to dedicate time for relationship building between partners

# Key Findings

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- Peer recovery coaching is integrated at all levels of care (Hub and Spokes) and treatment within the network.
- Creation of flexible treatment protocols and policies that include interventions specific to the tasks and challenges faced by patients at each stage of the treatment, maintenance and recovery are critical to ongoing treatment engagement.
  - This has increased HA's ability to "pivot" during challenges of face-to-face treatment during COVID-19.
- The MeHAF funding, resources, and support has led to other opportunities for collaboration and funding, strengthening the OUD treatment and recovery network within Hancock and Washington Counties.
  - The existing change team is a form of sustainable collaboration that will continue to lead to new opportunities.

# Contacts

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