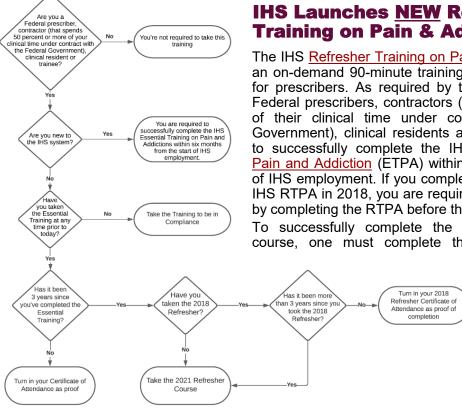
INDIAN HEALTH SERVICE (IHS) NATIONAL COMMITTEE ON HEROIN, OPIOIDS, AND PAIN EFFORTS (HOPE)

INDIAN HEALTH CARE: ENSURING A COORDINATED. HOLISTIC RESPONSE TO THE OPIOID AND HEROIN **EPIDEMIC**

IN THIS ISSUE:

IHS REFRESHER TRAINING, COVID-19 AND NALOXONE, EXPANDING ACCESS TO OPIOID USE DISÓRDER TREATMENT, AND SÁFEGUARDING **PRESCRIPTIONS**



IHS Launches NEW Refresher Training on Pain & Addiction

The IHS Refresher Training on Pain & Addiction (RTPA) is an on-demand 90-minute training that offers CME Credits for prescribers. As required by the IHM, Chapter 30: All Federal prescribers, contractors (who spend 50% or more of their clinical time under contract with the Federal Government), clinical residents and trainees are required to successfully complete the IHS Essential Training on Pain and Addiction (ETPA) within 6 months from the start of IHS employment. If you completed the IHS ETPA or the IHS RTPA in 2018, you are required to renew your training by completing the RTPA before the end of 2021.

To successfully complete the IHS Refresher Training course, one must complete the IHS specific training and the designated

CDC training.

 Review the flow chart to the left to determine training requirement.

 Additional **Training Opportunities** are available on HOPE's Opioids website.

COVID-19 Pandemic: Highlighting the Importance of Naloxone Access

The intersection of the COVID-19 and opioid epidemics has had a large impact on AI/AN communities. The intersecting crises have caused an increase in overdoses deaths and suicidal ideation in tribal communities. New research suggests that a recession caused by the pandemic may lead to 75,000 "deaths of despair" from drug overdose, alcohol abuse & suicide. This data has made increasing access to naloxone, the opioid overdose reversal agent, a priority for the IHS. The policy revision made to IHS Chapter 35 expands the definition of a first responder, which now includes any trained first responder. The policy updates help reduce barriers to accessing naloxone as a life-saving measure and harm reduction strategy for patients, family members, and community first responders. The update also includes a revision on record keeping practices that reduce the reporting burden for service units. These revisions will support community efforts to increase access to harm reduction services.

Subscribe to HOPE's LISTSERV here and search "Heroin, Opioids, and Pain

Efforts"

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• Learn more about naloxone and find a naloxone mentor in your area!

Expanding Access to OUD Treatment: A Collaborative Approach to Care

The IHS supports team-based approaches, known as Integrated Care Models, to enhance patient relationships, increase access to care, and improve coordination of care across the broader health care setting. Integrated care models promote treatment planning between providers and other medical disciplines while empowering patients to take an active role in their care. A holistic approach to patient treatment planning can include addressing substance use disorder in the Primary Care Medical Home to reduce barriers for patients seeking treatment.



The goal for opioid use disorder (OUD) treatment is to prevent relapse through a comprehensive treatment program that includes pharmacotherapy and psychosocial treatment. Primary care can provide an integrated approach to psychosocial and behavioral health services (components of comprehensive chemical dependency treatment) as a part of the patient OUD treatment plan or provide referrals to these services. These team-based care models can increase productivity, support relationship based care, and help reduce stigma surrounding mental health. The COVID-19 pandemic has impacted communities and substance use patterns and has increased the need to explore new care models. The IHS has develop an online learning community to share promising practices that address these unique challenges.

The June 2020 CDC provisional data reported over 83,000 drug overdose deaths in the United States within the preceding twelve months. This is the highest number of overdose deaths ever recorded in a twelve-month period and a 21% increase compared to the previous year. Recently, the U.S. Department of Health and Human Services announced it would be publishing Practice Guidelines for the Administration of Buprenorphine for Treating Opioid Use Disorder. The guidelines remove physician certification requirements needed to prescribe buprenorphine for OUD. The rise in opioid overdose deaths highlights the need for accessible evidence-based treatment services; the new guideline is intended to fill this treatment gap. There are many pathways to recovery, and each should be self-directed and empowering. Recovery is not a silo. It is a holistic approach that includes a community of individuals, including trained professionals, peers, and partners, offering a supportive environment. The IHS is working to create recommendations to support implementation of this guideline.

• The IHS is <u>committed</u> to supporting access to Medications for OUD. For more information, visit HOPE Committee's <u>Medication Assisted Recovery</u> webpage.

<u>Phoenix Area: Safeguarding Prescription</u> Medications in Tribal Communities

The <u>IHS Opioid Strategy</u> aims to improve perceptions and beliefs associated with substance use by promoting an appropriate, sensitive, and sympathetic message among health systems and the communities we serve.

An <u>example</u> of the IHS Opioid Strategy in action is the lock box distribution that took place in the Phoenix Area through collaboration with the IHS Division of Environmental Health Services. This team used a public health approach to raise awareness on safe prescription drug storage by distributing medication lock boxes for the homes of community members. Medication lock boxes offer a solution to opioid-related poisonings by reducing access to unused medications. Staff members educated, distributed, and installed permanent home use lock boxes; eight tribal communities participated in the project and the team installed fifty-five lock boxes.

Medication lock boxes are a great way to complement clinic-based activities aimed at addressing the opioid epidemic. This strategy has helped change behaviors and reduce unsecured and improperly stored prescription medications.

- To read more <u>best and promising practice</u> stories, visit HOPE Committee's <u>Opioids</u> website.
- Are you supporting the IHS Opioid Strategy? Contact the <u>HOPE Committee</u> to share your <u>story!</u>

<u>MAT Waiver</u> Training:

February 25th at 11am Eastern Register today!

Upcoming Pain & OUD ECHOs

For more information, visit: www.ihs.gov/opioids & www.ihs.gov/ painmanagement

