

RECOVERY

*The official newsletter of the
Fletcher Group Rural Center Of Excellence*



Building Rural Recovery Ecosystems

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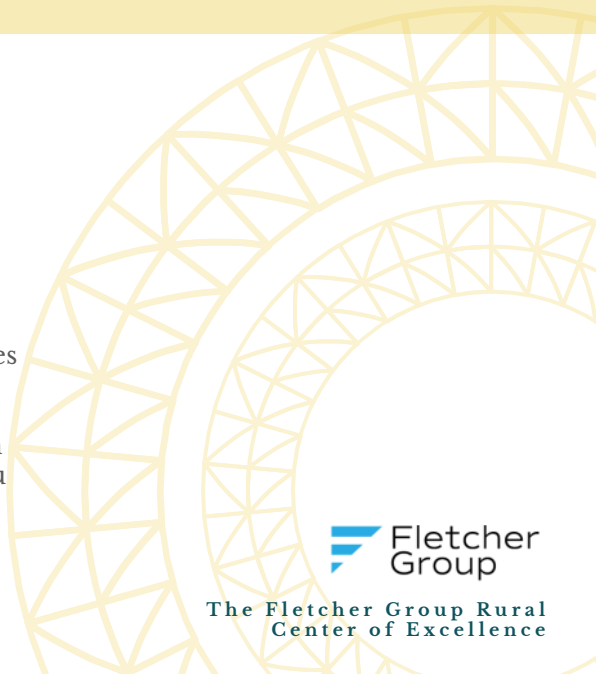
THANK YOU!

Combining a Covid pandemic with an opioid epidemic poses severe challenges for those in recovery, as well as those who help them.

In this issue of our newsletter, we highlight the preliminary findings of our latest nationwide survey and the recent success we've had helping identify at-risk adolescents. You'll also find a wealth of valuable resources to enhance your RH knowledge, skills, and capabilities.

Challenging times remind us that no one can do it all alone. With that in mind, we express our heartfelt gratitude for your support and salute you for the amazing work you do each day to make the world a better place.

— Dr. Ernie Fletcher, Founder and Chief Medical Officer





SURVEY SHOWS RH REELING FROM PANDEMIC

By Robin Thompson, Director of Research and Evaluation

The pandemic has taken a heavy toll on RH operators and their clients, according to a new nationwide survey conducted by the Fletcher Group RCOE. Created in partnership with Oxford House and the National Alliance of Recovery Residences, it shows that facilities have suffered a severe drop in revenue, with losses ranging in some cases over \$50,000.

Fewer Residents

The survey was prompted by a weekly census done by Kentucky Housing Authority Administrator Mike Townsend. His data from 18 Recovery Kentucky centers showed a 41% reduction in residents from March to July.

Methodology

The survey focused on individuals in Recovery Housing leadership roles (owner/operators, peer managers, house managers, house presidents, etc.) and concentrated on five key factors: operational/policy changes, implications for residents, economic implications, training and support, and RH general information.

Distribution

The survey was distributed electronically in June and July using contacts derived from existing email lists and social media sources. The respondents, 1,419 in all, hailed from all 50 states. An in-depth analysis is still underway, but here are the preliminary results.

COVID-19 Precautions

Recovery Housing leaders have made substantial efforts to reduce COVID-19 infection. Almost all respondents said they have a policy or procedure in place to address infection and have also implemented policies recommended by the Centers for Disease Control and Prevention (CDC).

New Residents

Fewer than 10% of respondents have stopped accepting new residents. The reasons include not having any vacancies and fear of infecting current residents.

Meeting Attendance

A large majority of residents said the pandemic is having “somewhat or a lot” of impact on their ability to attend meetings.

Financial Difficulties

The survey highlighted the severe financial challenges imposed on RH operators by the pandemic. It showed that financial support for the vast majority of RH facilities comes from resident fees or rent, but that many residents are now unable to pay those fees. Other challenges include a significant drop in donations and fundraising efforts compounded by reduced financial support from state and local governments.

More Challenging In Rural Areas

Operators in rural areas are being hit particularly hard. During the pandemic, many rural facilities report paying higher costs than urban facilities for personal protective equipment, food, staff, communications, and program operating costs.

Survey Update

We'll be updating Newsletter readers as soon as a more extensive analysis is completed.

Thank You!

It should be noted that the survey would not have been possible without the extraordinary support of Oxford House and the National Alliance of Recovery Residences (NARR).



EARLY INTERVENTION IS KEY

By Lori Baier, Director of Employment Services

Nine in ten American teenagers know someone who smokes, drinks or uses drugs during the school day. And half will use an illegal drug before graduating from high school.* Unfortunately, early substance use has huge long-term impacts, impairing healthy development, contributing to risky behaviors such as unprotected sex and dangerous driving, and setting the stage for the development substance use disorders when older.

Many parents are reluctant to talk with their adolescent children who may be shy and secretive one moment, distrustful and rebellious the next. That may make the child’s pediatric care provider a better resource for intervention. In fact, 65 percent of adolescents say they prefer discussing substance use with their doctors and the only reason they don’t is because they’re not asked.** With that opportunity in mind, the Fletcher Group is working with primary care practices to facilitate screening and treatment protocols.

At Coal Grove Pediatrics in Ironton, Ohio, Dr. Margaret Ng, a private-practice pediatrician, serves hundreds of low- and middle-income rural families in eastern Kentucky, southern Ohio, and southern West Virginia. She sought Technical Assistance from the Fletcher Group Rural Center of Excellence to develop a protocol that would help her better identify and address patients with substance use risks. The Fletcher Group provided her with a protocol that includes standardized screening instruments, scoring for risk factors, and guided interventions. In just two months, Dr. Ng has used it to successfully screen over 120 patients aged nine to 18, leading to interventions and counseling for roughly ten percent of the total.

“The beauty of it is there’s no pointing fingers or screaming,” says Dr. Ng. “They simply fill out a form while waiting for their appointment. It helps break the ice without putting anyone on the spot. The objective indicators

of risk promote matter-of-fact discussions with young patients and their parents, who seem to like it as much as the kids. Their typical reaction is, ‘Okay, my kid’s at risk; I need to be more careful and keep an eye on this.’ Often there’s a genuine sense of relief on the part of the kids as well as the parents.”

The standardized screening is catching at-risk children Dr. Ng might have missed before. “Sometimes you get answers from kids you didn’t expect, but that’s the beauty of it. You’re able to ask everyone. And if they’re honest it can really make a difference.”

Early is always better, says Dr. Ng. “Maybe the younger ones aren’t actually using any drugs or alcohol, but they’re already forming opinions. By engaging them early, we can affect the thinking that might go into a crucial decision later in life.”

Billings Help, Too

Screening and interventions cost money, but the Fletcher Group has helped in that regard, too, by showing Dr. Ng how to make insurance claims using appropriate billing codes. While reimbursement is limited, for the screening, it adds up and will help fund additional services for at-risk youth.

“It’s still early,” says Dr. Ng, “but I’m already doing a much better job of addressing the SUD risks of my adolescent patients. The Fletcher Group’s Technical Assistance has really made a difference.”

*Actual figures are 86% and 47% according to the National Center for Drug Abuse Statistics.

** Performing Preventive Services, A Bright Futures Handbook



CLICKABLE LINKS YOU MAY FIND HELPFUL

Compiled by the Fletcher Group Team

On the following pages of the Newsletter are links to valuable information and resources that appear under the following headings. We hope at least a few of these will prove helpful.

HELP FOR RH PROVIDERS

Information and resources that may be helpful to RH providers.

WEBINARS

A list of webinars on subjects pertinent to recovery and RH.

RURAL ISSUES

Challenges unique to rural areas include insufficiently funded and trained health care providers, long-distance travel costs, greater stigma due to decreased privacy, and higher rates of SUD incidence, morbidity, overdose occurrence, and mortality.

PANDEMIC CHALLENGES

Some of the most daunting challenges facing RH.

PANDEMIC TRENDS

Where are we and where will we be when the pandemic ends?

GRAPHS, INFOGRAPHICS, AND VIDEOS

Your effectiveness depends in part on self-promotion. These may help.

UNDERSTANDING THE OPIOID EPIDEMIC

A historical context for where we came from and where we are today.

STORIES

First-person accounts by those who know what it's really like.

CORRUPTION

Desperation unfortunately creates immense opportunities for fraud.

LITIGATION

Litigation battles continue to rage across the nation.

STIGMA

It can actually kill.

LANGUAGE

Stigma is also embedded in the words we use and the way we frame discussion.

CULTURE

Cultural sensitivity lets us respect, value, and work with others.

INSURANCE

What happens when you fall between the cracks?

WORKFORCE ADDICTION

Seldom talked about or treated.

INCARCERATION

The limits of punishment.

GENDER

Gender inequities and SUDs.

POLICY

Now and what may come.

OUTCOMES

The road back.

INNOVATION

The Fletcher Group RCOE is not the only organization willing to "think outside the box."

TELEHEALTH

Huge growth and what it may mean moving forward.