Recovering Together: A Community Partnership to Support Families Recovering Opioid Use Disorder

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Session Objectives

- Discuss the formation of multi-sector community partnerships to improve outcomes for families recovering from opioid use disorder
- Describe the essential components of successful multisector community partnerships
- Share examples of "lessons learned" from our multi-sector community partnerships

Bexar County

- Highest rate of NAS in the state
- 1/3 of cases
- 300-400 families impacted
- Lengthy/costly hospital stay
- \$53,000+ compared to \$9500
- Community response
- Program development-Mommies Program
- Toolkit and statewide trainings
- In-Patient residential treatment facility
- NAS Symposium-
- UT Health SON
- Research
- Program development

The Mommies Toolkit: Improving Outcomes for Families Impacted by Neonatal Abstinence Syndrome



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DSHS Mommies Toolkit

DSHS Funded Research

- Kangaroo mother care study
- Maternal-Infant Interaction, Stress, & Attunement (MIISA) Study
- Maternal Opioid Morbidity Study



Bexar County NAS Collaborative

- •To improve the well-being of families impacted by NAS through education, research, practice, social equity, and community engagement
 - Focus on outcomes that matter to families
 - Partnership between researchers, clinicians, community stakeholders and <u>families we serve</u>



Patient Centered Outcomes Research Institute (PCORI)

Community Conversations

Our Partners KeepingFamiliesTogether.org



UT Health San Antonio, School of Nursing Department of Family Protective Services TX Health & Human Services Commission TX Department of State Health Services

Crosspoint The Doctors for Social Responsibility New Season

San Antonio Council on Alcohol and Drug Awareness UT Health San Antonio, School of Medicine



Metro Health University Health System Baptist Health System Methodist Health System South West General MedMark Treatment Centers

Our parent/family partners: Yolanda, Vaeh & Andrew 3rd, Candace & McKayla; Aaron, Emily, Mia & Aaron Jr.; Donna & Moses; Sophia & Leland; Misty



Children's Hospital of San Antonio Alpha Home The Center for Health Care Services San Antonio Fire Department The Office of Judge Nelson Wolff The Office of Representative Ina Minjarez The Office of Councilwoman Shirley Gonzales

Women as Caregivers



- •Few women who are caregivers seek treatment
- Stigma
- Fear
- •70% of women entering treatment have children
- Few treatment facilities offer beds for women and children
- •Women who stay with children during treatment, are more likely to complete treatment and remain in long-term recovery
- When children are present in recovery housing, everyone benefits

Casa Mia: Recovery Residence for Women & Children



- •Women are accessing intensive, outpatient treatment; 20 residents
- All paths to recovery including Medication Assisted Recovery
- •Crosspoint provides recovery expertise and 24 hour staffing
- •The School of Nursing is offering primary care, women's health, and nutrition services
- Part-time maternal-newborn nurse and dietician
- Undergrad. population health students provide education

Funding from TX HHSC, the Baptist Foundation, the Sisters of the Holy Spirit



Historic home in downtown San Antonio





Casa Mia: Recovery Residence for Women & Children

•Focus on education completion, gainful employment, and stable, housing













San Antonio Women's Wellness Campus

- •Coming soon...
- One campus-multiple women's programs
- Casa Mia
- Primary care center
- UT Health SON
- Newborn withdrawal nursing care facility
- Jail diversion
- Esperanza court



Collective Impact

Improvement of OUD treatment and outcomes at community, state, and national level

- State policy Rep. Ina Minjarez's HB405
- National policy

Academy of Nursing, AWHONN, AIM Opioid Bundle

• SA to DC trip February 2020





American Academy of Nursing Releases Policy Brief on Pregnant and Parenting Women with a Substance Use Disorder

Nursing Recommendations for Enduring Therapeutic Practice

Washington, D.C. (April 8, 2019) — The American Academy of Nursing (the Academy) today released its policy brief calling for an end to criminal prosecution and punitive civil actions against pregnant and parenting women based solely on their substance use in favor of a public health response.

At the forefront of the national stage for the past several years, the opioid epidemic has expanded the public's awareness of substance use disorders (SUDs) and treatments for all Americans in this public health emergency. For pregnant women with SUDs however, punitive actions in place of a public health response have resulted in criminal charges, arrests, and incarceration for these women. This has reinforced a culture of fear and barriers to essential health services. Early entry into maternity care plays a vital role in indepretime health and social outcomes. Recoveryoriented public health responses are urgently needed to shift the culture of punishment to one of enduring therapeutic interfor for women and their infants, children, and familiae affected by SUDs.

"Through this timely brief, the Academy is helping to shape the conversation around providing care to pregnant and parenting women and reducing the stigma of SUDs in the age of the opioid epidemic," said Academy President Karen Cox, PhD, RN, FACHE, FAAN, "Gne of the Academy's policy priorities is to advance health equity and champion wellness. To do this, providers must incorporate multi-disciplinary, culturally- and trauma-responsive models of care.

The Academy's policy brief, "Pregnant and Parenting Women with a Substance Use Disorder: Actions and Policy for Enduring Therapeutic Practice," was published in the March/April 2019 issue of the Academy's journal, *Nursing Outlook*.

The Academy puts forth recommendations at the federal, state, and provider level. At the federal level, the Academy recommends increased funding for the Substance Abuse Mental Health Services Administration (SAMHSA); increased dissemination of SAMHSA's Clinical Guidance for Treating Pregnant and Parenting Women with Opioid Use Disorders; the advancement of ongoing training and technical assistance to ensure cultural competence and sensitivity in SUD treatment; and the collection of comprehensive data on maternal deaths due to overdoes by the Centers for Disease Control. At the state level, the Academy recommends increased funding and the integration of services related to community-based treatment for women, their children, and families affected by substance use. Finally, the Academy recommends strategies for nursing leadership to safeguard accurate and comprehensive clinical assessment and provider practice consistent with a therapeutic health jusice approach.



Questions/Discussion