



UNC Extension for Community Healthcare Outcomes for Rural Primary Care Medication-Assisted Treatment (UNC ECHO for MAT)

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Description

Accidental overdose death rates from opiates in North Carolina exceed the national average and have been steadily increasing over the past 10 years. This project will use a multi-layered provider and practice engagement strategy to expand access to medication-assisted treatment (MAT) in rural, underserved counties. It will recruit providers to receive training on MAT and will provide a series of practice level supports and a state-wide learning community to address critical challenges in the field.

Specific Aims

1. Evaluate the effectiveness of the intervention for increasing MAT access in rural North Carolina
2. Examine the experience of primary care providers and practice staff in training, initiating, and delivering MAT
3. Evaluate the effectiveness of the intervention for addressing the barriers to MAT implementation in rural NC
4. Assess system-level supports providers need to successfully implement MAT in rural practices, such as having a continuum of substance abuse treatment services available in the community for patients receiving MAT
5. Evaluate how well case-based learning using the Extension for Community Healthcare Outcomes (ECHO) model, combined with didactic learning and 1:1 case consultation, increases PCP confidence and reduces provider-level barriers to MAT implementation

Findings/Implications

TBD—Launched September 2016

Main Objective

Increase understanding about how to overcome barriers to the implementation of MAT in primary care and evaluate strategies to overcome those barriers while expanding access to MAT in rural and underserved counties.

Health Condition Considered

Opioid Use Disorder

Treatment Service Considered

Medication-Assisted Treatment

Study Design, Data Sources, & Sample Size

The project will focus on participating practices within 22 eligible counties. The evaluation will use a RE-AIM approach and mixed-methods to analyze data from training participation, prescribing practices, quality of services, fidelity to guidelines/protocols, and effectiveness of the intervention.

Strategies Used

- DATA-2000 waiver training
- ECHO case-based learning
- Tools to support successful MAT implementation (e.g. patient care management tools, practice policies, etc.)