# **Policy Forum**

January 22, 2021

### Policy Forum

On January 22, 2021 Project HOPE (<u>Healing Opioid Use Disorder Through Prevention and Expertise</u>) hosted an online event for community members and professionals who serve in the Project HOPE 10-county area. The 2.5-hour interactive event included a keynote address, panel discussion, and facilitated discussion focusing on policy related to telehealth for persons with a substance use disorder (SUD).

The keynote address, "The Use of Telehealth for Treatment of People with SUD" was presented by Dr. Stephen Loyd. The panel discussion, "Further examination of barriers and facilitators to telehealth uptake and how state policy can be used as a lever to extend uptake" was presented by Robin Smith, Tennessee General Assembly representative, Mary Shelton, TennCare representative, Dr. Robert Pack, associate dean at East Tennessee State University, and Jeremy Mercer, UnitedHealthcare representative. The facilitated discussion, "Actionable Policy Priorities and Next Steps" was facilitated by Dr. Carole Myers, professor at The University of Tennessee, Knoxville.

#### **Attendees**

Project HOPE service area includes 5 counties of East Tennessee: Scott, Claiborne, Cocke, Jefferson, and Campbell. The consortium is co-led by the University of Tennessee, Knoxville and has almost 100 members. Invitations for the Policy Forum were emailed to all consortium members, distributed via Twitter by Dr. Myers, and placed on the RCORP-ETC website: <a href="https://tnopioid.utk.edu/">https://tnopioid.utk.edu/</a>. Fifty-six individuals attended.

#### **Evaluation**

28 of 56 attendees completed the evaluation survey. The majority of attendees (54%) heard about the policy forum through a colleague or friend, followed by email (38%), and through grant work and collaboration (8%). The attendees reported working in or serving 15 counties: Anderson, Blount, Campbell, Claiborne, Cocke, Davidson, Grainger, Hamblen, Jefferson, Knox, Morgan, Scott, Sevier, Roane, Union.







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The attendees identified as working at a healthcare organization (28%), non-profit organization (24%), educational institution (21%), community-based organization (7%), or faith-based organization (3%). "Other" was selected by 17%.

## **Evaluation of Training**

The overall experience of the Policy Forum was well regarded among attendees, as most (96%) of participants would recommend the training session to a colleague. Many attendees described the policy form as very informative with meaningful and thoughtful conversations. They appreciated the expertise and professionalism of the presenters, urged other individuals to attend, and couldn't think of ways to improve the event. One attendee from a rural and underserved county expressed thankfulness, sharing that this initiative was much needed.

Attendees indicated how important each of the agenda items were in relation to the goals for the event: gaining a multi-perspective and deeper understanding of priority problems and foster collaboration to identify and promote policy options related to opioid use disorder. Possible answers ranged from *not at all important* (1) to *extremely important* (5). Overall, attendees indicated that all agenda items were extremely important (Keynote address, panel discussion, and facilitated discussion=4.7).

Attendees indicated how satisfied they were with the policy forum; possible answers ranged from *very dissatisfied* (1) to *very satisfied* (5). On average, participants' answers ranged between *satisfied* (4) and very *satisfied* (5) on every question. Attendees were very satisfied with the knowledge of the presenters (4.9), relevance of the policy forum to their needs (4.8), the policy forum content (4.8), and engagement of the policy forum (4.7).

Attendees indicated how much they knew before (retrospectively) and after the training session for a series of learning objectives. Possible answers ranged from *nothing at all* (1) to *a whole lot* (4). On average, attendees reported knowing between *a little bit and a lot* before the training (grand mean=2.6) and between *a lot and a whole lot* after the training (grand mean=3.4). There were significant reported increases in knowledge for every learning objective (Table 1).

Table 1.

Learning Objectives	Pre- Score	Post- Score	Mean Difference	p- value
Describing the challenges associated with providing treatment for people with substance use disorders in Tennessee underserved areas.	3.04	3.69	0.66	<.0001
Discussing how Telehealth has been used during the Covid-19 pandemic to extend treatment for people with substance use disorders in Tennessee underserved areas.	2.61	3.58	0.96	<.0001
Examining persistent problems and facilitators associated with Telehealth uptake.	2.31	3.31	1.00	<.0001
Prioritizing actionable policy opportunities.	2.39	3.23	0.85	<.0001
Discussing possible policy solutions to addressing barriers and capitalizing on facilitators.	2.54	3.31	0.77	<.0001

## Suggestions from Attendees

To improve the policy forum for other professionals, attendees provided the following suggestions: 1) have more discussion around the interface of SUD and psychiatric diagnoses and utilization of collaboration to reduce barriers, 2) increase representation of elected officials, and 3) host the policy forum more frequently.







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