Opioid Grants Forum

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OWD Project Managers
How to get Technical Assistance?

Website: http://jfs.ohio.gov/owd/WorkforceProf/OpioidGrants.stm

Mailbox: OpioidRelief@jfs.ohio.gov
Review of the Opioid Grants:

- Workforce Opportunity for Rural Communities for Appalachian Designated Counties (WORC - DOL decision pending)
- State Opioid Response Grant (SOR - awarded by OMHAS/SAMHSA)
- Trade & Economic Transition National Dislocated Worker Grant (Opioid 2 - $8 million awarded by DOL)
- Disaster Recovery National Dislocated Worker Grant (Opioid 3 - $11 million awarded by DOL)
Purpose of Opioid Emergency Recovery Grant

• Facilitate community partnerships that are central to dealing with this complex public health crisis;
• Provide training that builds the skilled workforce in professions that could impact the causes and treatment of the opioid crisis: addiction treatment, mental health, and pain management
• Ensure the timely delivery of career, training, and support activities to eligible participants to promote successful reemployment; and
• Create temporary disaster-relief employment that addresses the “Community” impacts.
16 Blue Counties
- Participating in the Transition DW Grant
- May use the Disaster-Relief Grant only for individuals not eligible for or services not allowable under Grant 2.

**DISASTER-RELIEF GRANT (Grant #3) – DOL Approved**
- Available in all 88 counties
- $11 million available statewide
- See TEGL 4-18 & TEGL 2-15
- Cannot pay for in-patient drug rehab

**Eligible Participants**:
- Dislocated Workers
- Long term unemployed (defined in WIOA PL 17-06)
- Individuals laid off due to the opioid emergency
- Self-employed individuals who are unemployed or under-employed due to opioid emergency
*Do not need to be using or directly impacted by drug addiction to qualify

**Allowable Services**:
- All services allowed under the Transition DW Grant →
- Disaster-Relief Employment:
  - Up to 2,040 hours
  - Alleviate issues caused by crisis
  - Provide humanitarian assistance

**TRANSITION DW GRANT (Grant #2) – DOL Approved**
- $8 million for 16 counties
- See TEGL 2-18
- Cannot pay for in-patient drug rehab

**Eligible Participants**:
- Dislocated Workers
- Do not need to be using or directly impacted by drugs

**Allowable Services**
- **Career Services**
  - Soft-skills and other pre-vocational svc.
  - Career planning
  - Work experiences
  - Any other WIOA career services
- **Supportive services**
  - Addiction treatment
  - Other WIOA supportive services

- **Training**
  - On-the-Job Training
  - Classroom training, prioritizing in-demand jobs that could address addiction (counselor, social worker, etc.)
  - Apprenticeships
  - Customized training
  - Transitional Jobs
  - Entrepreneurial training
Grant 3 Eligible Participants*:

- **Dislocated Workers**
- Long term unemployed (defined in WIOA PL 17-06).
- Individuals laid off due to the opioid emergency.
- Self-employed individuals who are unemployed or under-employed due to opioid emergency.

*Do not need to be using or directly impacted by drug addiction to qualify.*
Allowable Services:

1. Training Services and Work-based Training Modules including but not limited to:
   • Apprenticeship programs
   • On-the-job or customized training
   • Occupational skill training:
     a. Individuals who indicate they, a family member or a friend have a history of opioid use may be provided occupational skills training in ANY in-demand field.
     b. Individuals who indicate they, a family member, or a friend do NOT have a history of opioid use and those who refuse to answer may be provided occupational skills training only in the following specific approved fields:
        i. Addiction treatment
        ii. Mental health treatment focused on conditions that can lead to or exacerbate opioid addition
        iii. Pain management services and practices
        iv. Other occupations approved by DOL specific to each Community, based on the opioid impacts.
Allowable Services (con’t):

2. Career Services including but not limited to:
   - Soft skills training
   - Evaluation to identify barriers and develop individual employment plans

3. Supportive Services including but not limited to:
   - Items necessary to perform disaster relief employment
   - Outpatient health, mental health and addiction treatment
   - Linkages to partner services

4. Disaster-Relief Employment (ONLY in Emergency Recovery Grant 3)
   - Aimed at alleviating humanitarian needs created by the opioid crisis.
   - Up to 2,040 hours can be worked per participant
   - Allowable job types are dependent upon “Community” assignment

Unallowable Services:

- In-patient drug treatment and rehabilitation programs
Definitions (refer to attachment A of draft Policy Letter):

- Disaster Relief Employment
- Dislocated Workers as defined in 20 C.F.R. 687.170(a)(1)(i)-(iii).
- Dislocated Homemaker as defined in WIOAPL 15.02 sec 3(16)
- Long-Term Unemployed as defined in WIOAPL 17.06
- Underemployed as defined in WIOPL 15-08.1
- Opioid Emergency Recovery Grant Communities
Opioid Impacts by Communities:

Counties are grouped into nine “communities” that have the same combination of one or more of the following four key impacts related to the opioid crisis:

Impact A) Overdose deaths of 13 per 100,000 or higher
Impact B) Costs per capita of opioid abuse of $500 or more
Impact C) Limited or no access to medication-assisted treatment
Impact D) 9% or higher of children entering children services custody due to parental opioid use

Refer to Draft Policy Letter Attachments B & C (Map of Communities)
Refer to Draft Policy Letter Attachment D (Allowable Disaster Relief Job Types)

Refer to “How Community Assignment Impacts Two Allowable Activities”
OWD Opioid Toolkit Overview:

Pillars of Success
1. Strong Local Partnerships
2. Holistic Care Management
3. Steps to Success
4. Recovery-Friendly Workplaces
5. Knowledgeable Staff

- Pillar 1: Strong Local Partnerships
  - Establishing positive working relationships with entities representing Legal, Mental Health, Physical Health, Children Services, Housing, Peer Support, and Education and Training.

- Pillar 2: Holistic Care Management
  - Changing from a "case management" approach that concentrates solely on employment needs to a "care management" philosophy that addresses the needs of the individual as a whole.
### 3. Steps to Success and Future Enhancements:

<table>
<thead>
<tr>
<th>Client Name: Jane Doe</th>
<th>Date: 1.31.19</th>
<th>Prepared By: John Smith</th>
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<tbody>
<tr>
<td><strong>Steps to Success</strong></td>
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<tr>
<td><strong>PAUSING</strong></td>
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<td>Client is not enrolled due to active addiction or significant barrier(s) that must be addressed/overcome</td>
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<td><strong>PREPARING</strong></td>
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<td>Client is enrolled and has identified a plan to address/overcome barrier(s) - infrequent setbacks may occur</td>
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<td><strong>PRACTICING</strong></td>
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<td>Client is actively addressing/overcoming barrier(s) - infrequent setbacks may occur</td>
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<td><strong>PERFORMING</strong></td>
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<td>Client has addressed/overcome all barrier(s) - setbacks no longer occur</td>
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<th>Legal</th>
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<td>Failing to meet, or waiting to receive, court requirements</td>
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<th>Mental Health</th>
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<td>Having substantial mental health obstacle(s)</td>
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<th>Physical Health</th>
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<td>Having substantial physical health obstacle(s)</td>
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<th>Children Services</th>
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<td>Having a validated report of child abuse, neglect, or court-ordered removal</td>
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<th>Housing</th>
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<td>Lacking suitable or stable housing</td>
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<th>Peer Support</th>
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<td>Lacking a support system</td>
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<th>Education and Training</th>
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<td>Having substantial education and/or training obstacle(s)</td>
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<th>Workforce</th>
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<td>Having substantial employment obstacle(s)</td>
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**Enrolled 1.15.19.** This is the first Care Management Team meeting. Jane passed her court-ordered drug test on 1.19.19 and is meeting with her parole officer as required. She is anxious to find a new place to live and indicates she wants to remain drug-free. (She is currently living with a boyfriend who is opioid dependent.) Mental Health & Addiction Services is providing therapy services and is helping her find alternative temporary housing. Children Services has helped her arrange to have her children temporarily live with her sister. Jane is interested in exploring careers and developing an Individual Employment Plan (IEP). Care Management team will meet again next week to discuss progress and next steps based on her IEP and other information.
4. Recovery Friendly Workplaces:

- The National Safety Council reports that 75 percent of surveyed employers say their workplace has been impacted by opioids, but only 17 percent feel well-prepared to deal with the situation. [Source](https://ohsonline.com/articles/2019/03/20/nsc-survey-workplace-opioids.aspx)

Some key elements of a recovery-friendly workplace include:

- Having written policies and procedures regarding the rights and responsibilities of employers and employees regarding drugs
- Providing workplace drug education and outreach programs that include information about available resources
- Conducting drug testing to objectively determine if an employee has been misusing a substance
- Coordinating with employee assistance, wellness, and benefits programs
- Providing 24/7 confidential access to peer recovery support for the employee or loved ones
- Hosting co-workers in recovery peer support groups
- Having Human Resources support, including supervisor training to assist with identification of substance dependency and intervention methodologies
- Offering a pathway to sustained employment in the event of a reoccurrence of use
5. Knowledgeable Staff:

- The Ohio Chamber of Commerce in cooperation with Working Partners has created an Employer Opioid Toolkit that includes training and tools that workforce personnel can use to help cultivate recovery-friendly workplaces. [https://ohiochamber.com/opioid-toolkit/](https://ohiochamber.com/opioid-toolkit/).

- Additionally, the OHMAS also offers a variety of valuable e-learning courses that educate employers about individuals in recovery. [www.ebasedacademy.org](http://www.ebasedacademy.org)

- The Ohio Department of Health has created Project DAWN (Deaths Avoided With Naloxone), a community-based overdose education and naloxone (Narcan) distribution program. Training locations are found at: [https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/violence-injury-prevention-program/resources/list-project-dawn-sites](https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/violence-injury-prevention-program/resources/list-project-dawn-sites).

  DAWN participants receive a Narcan kit along with the following training:
  - Recognizing the signs and symptoms of overdose
  - Distinguishing between different types of overdose
  - Performing rescue breathing
  - Calling emergency medical services
  - Administering intranasal Naloxone

Naloxone (also known as Narcan) is a medication that can reverse an overdose caused by an opioid drug (heroin or prescription pain medications).
OWD Opioid Toolkit:

• Toolkit crosswalk of important areas that were identified by Workforce Directors (posted on our webpage).

• Let’s hear what’s working well from your peers.
Developing Local Implementation Plans:

- Review the suggested example of implementation plan activities and expected timelines.
- Review and discuss local areas implementation plan template.
Enrollments and Expenditures Expectations with recommended timelines and fiscal codes (see handouts and descriptions in your folder).
Questions?

Mailbox: OpioidRelief@jfs.ohio.gov