

Treatment for Individuals who Use Stimulants Provider Readiness Application – 2022

Context:

The Indiana State Opioid Response grant will address substance use disorders – with a focus on opioid and stimulant use disorders – through expanded treatment and harm reduction approaches. **Contingency management** is an evidence-based treatment strategy that involves delivering motivational incentives to clients in response to completion of objectively assessed recovery-related target behaviors as an alternative source of reinforcement other than substance use. To increase the availability of CM in Indiana, several opportunities for no-cost CM training and technical assistance are being offered in 2022. The current opportunity (TRUST) is intended to be delivered in clinics or agencies that treat people with stimulant use disorders (StimUDs). For information about additional opportunities focused on implementation of CM with adolescents or people who use opioids and other substances, please contact IUaccess@iu.edu. This work is being carried out by Indiana University School of Medicine with generous support the Indiana Division of Mental Health and Addiction.

Current Opportunity:

Treatment for Individuals who Use Stimulants involves a client motivational incentive program (TRUST-IP) targeting treatment attendance or reduced stimulant use, as well as components related to motivational interviewing, cognitive behavioral therapy, community reinforcement approach, exercise, continuing care, and retention in treatment.

Participating sites will be trained in the TRUST model and will receive ongoing technical assistance and mini-grant support to implement TRUST in their clinics. TRUST mini-grant funds may be dedicated to client reinforcement (i.e., gift cards) and associated administrative costs.

TRUST Implementation information and requirements:

- Clients eligible for TRUST will include those who have a diagnosis of a stimulant use disorder (ex: cocaine, methamphetamine).
- Due to federal regulations from SAMHSA and the Office of the Inspector General, total dollar amount available for TRUST-IP reinforcement is limited to \$75 per client per year and a maximum of \$15 per occasion.
- TRUST-IP incentives are to begin at a client's initial session and to be given thereafter for one of two target behaviors:
 - Attendance/participation in treatment and recovery services

- Reduced stimulant use (i.e., negative drug screen)*

* Although reduced stimulant use may be used as a TRUST-IP target behavior, several considerations should be made prior to adopting this target. These include the fact that the overall magnitude of reinforcement available (\$75) is might not be sufficient to engender a significant period of abstinence, the need to provide evidence of abstinence (i.e., urine screens) at regular intervals, and potential organizational/logistical barriers abstinence determination and reinforcement

- Clinics will be expected to work with the training team to determine a target TRUST-IP behavior and reinforcement schedule. Additionally, reinforcement is to be provided in close proximity to demonstration of the target behavior.
- Documentation for TRUST-IP shall include receipts for purchases and a perpetual inventory log with clients' signatures (if providing virtual services, obtain verbal consent to treat via phone, video, web-based service like zoom, etc.). Organizations may provide TRUST-IP reinforcement via outside vendors (e.g., TangoCard) as long as appropriate financial controls and record keeping are in place.
- Providers from programs receiving TRUST funding will be expected to 1) attend 8 weekly 2-hour Zoom training sessions, 2) attend 12 implementation sessions conducted over the subsequent 10 months, and 3) complete periodic program evaluations/surveys. The training and implementation sessions will provide rationale, training, and assistance for TRUST implementation at both provider and organizational levels, while the evaluations/surveys will contribute to both the determination the program's effectiveness and the justification for funding future evidence-based training opportunities.

Readiness Evaluation:

The purpose of this request for proposals is to help determine applicants' readiness for the delivery of an evidence-based StimUD intervention programming. Responses also will be used to inform the development of appropriate training and technical assistance materials. These providers will be eligible to receive mini-grants to help defray costs associated with TRUST-IP incentives, administrative costs, and related expenses at the organization's discretion. Each provider submitting an application agrees to participate in training and evaluation efforts for TRUST and to provide a point-of-contact within the specific site where TRUST will actually be implemented.

Anticipated timeline:

- Feb 20, 2022: TRUST applications due to the IU CM Team by February 20, 2022. Please submit this document with responses included to: iuaccess@iu.edu.
- Feb 28, 2022: Notification about application status will be provided after a review by the IU CM Team and training partners.
- Spring 2022: TRUST training will begin, with allocation of mini grants and implementation launch to follow.

PLEASE RESPOND TO THE QUESTIONS BELOW REFERRING TO THE PHYSICAL SITE WHERE TRUST SERVICES WILL BE DELIVERED

Agency Name:
Site Address(es):

Identified Staff to Support TRUST

Full name	Site location	Position (i.e., Counselor, Peer)	Describe the staff member's role in TRUST delivery/management (including participation in training/implementation sessions)

1. Please describe the landscape of substance use disorder (SUD) at your agency/site(s) and in your community. For example, what proportion of your clients have an SUD? What are the primary substances used (e.g., opioids, methamphetamine)? What other resources are available in your community (e.g., needle exchange, peer recovery coaches)?
2. Please describe your current approach to StimUD treatment, include both medical and psychosocial aspects of treatment. What challenges or obstacles is your agency experiencing in regards to this treatment that TRUST can address? For example, what do you expect will change with the implementation of TRUST. What differences are you hoping to see among clients and staff when using TRUST? What are the primary outcomes you hope to achieve?
3. Please provide a general description of how you plan to develop and implement TRUST. (Implementation sessions will later help refine this plan as needed.) Please indicate which target behavior (attendance or abstinence) you plan to reinforce via TRUST-IP and the rationale for its selection. What will be the role of key staff?

4. Selected agencies/sites will actively engage individuals in TRUST-IP upon the initiation of treatment. Please describe your strategies for engaging StimUD clients at the outset of treatment and keeping them engaged throughout the TRUST program. What barriers do you foresee, and how will you overcome them?

5. Given that individuals with StimUD often have other medical health care needs and stressful life situations that can negatively impact recovery, please outline your approach to care coordination to adequately address participants' various needs (e.g., primary care, housing, psychiatric stabilization)? What community partnerships do you have in place to ensure these connections are made and clients' needs are met?

6. People from racial and ethnic minority groups tend to have less access to evidence-based SUD treatment options and are experiencing disproportionately high rates of drug-involved deaths. Please describe the organization's strategies for enrolling and engaging non-White clients in TRUST treatment (i.e., reducing this health disparity).

7. Please describe what experience, if any, your clinical staff and administrators have had designing and implementing motivational incentive programs.

By signing below, you agree to work with Indiana DMHA and IU CM Team SOR personnel to increase access to evidence-based treatment for individuals with StimUD through a chronic disease management approach. Should evaluation of services suggest lack of adherence to grant requirements or to the SOR TRUST protocol or sufficient progress toward full adherence, you acknowledge your agency may lose access to SOR StimUD/TRUST-IP funds until issue(s) are resolved.

	Executive Director
Printed Name:	
Signature:	
Date:	