



# PCSS Projects

**Kathryn L. Cates-Wessel**

Executive Director, AAAP

PCSS-MAT and PCSS-O PI and Project Director

# Educational Objectives

**At the conclusion of this activity participants should be able to:**

- Describe the two SAMHSA-funded projects PCSS-O and PCSS-MAT
- Navigate both PCSS-O and PCSS-MAT websites to find educational resources available to the public
- Utilize free mentoring/coaching program that allows primary care providers direct access to clinical experts in addiction psychiatry and addiction medicine

# What is the Providers Clinical Support System Model?

**PCSS- Medication Assisted Treatment and PCSS for Opioid Therapies** are funded by SAMSHA to provide training and mentoring for primary care providers in prevention, identification and treatment of opioid use disorders.

**PCSS-MAT** focuses on prescribing medications approved by FDA - methadone, buprenorphine and naltrexone.

**PCSS-O** emphasizes the intersection of chronic pain and opioid use disorders.

P

C

MAT

TRAINING

S

S

PROVIDERS' CLINICAL SUPPORT SYSTEM

For Medication Assisted Treatment

**PCSS-MAT** is a collaborative effort led by **American Academy of Addiction Psychiatry** in partnership with: **American Osteopathic Academy of Addiction Medicine, American Psychiatric Association, American Society of Addiction Medicine, Association for Medical Education and Research in Substance Abuse, American College of Physicians, American College of Emergency Physicians, and National Association of Drug Court Professionals**

For more information visit: [www.pcssmat.org](http://www.pcssmat.org)

For questions email: [pcssmat@aaap.org](mailto:pcssmat@aaap.org)



Twitter: [@PCSSProjects](https://twitter.com/PCSSProjects)

*Funding for this initiative was made possible (in part) by Providers' Clinical Support System for Medication Assisted Treatment (grant nos. 5U79TI024697 and 1U79TI026556) from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.*



**PCSS-O** is a collaborative effort led by **American Academy of Addiction Psychiatry** in partnership with: **Addiction Technology Transfer Center, American Academy of Neurology, American Academy of Pain Medicine, American Academy of Pediatrics, American College of Physicians, American Dental Association, American Medical Association, American Osteopathic Academy of Addiction Medicine, American Psychiatric Association, American Society for Pain Management Nursing, International Nurses Society on Addictions, and Southeast Consortium for Substance Abuse Training.**

For more information visit: [www.pcass-o.org](http://www.pcass-o.org)

For questions email: [pcass-o@aaap.org](mailto:pcass-o@aaap.org)



Twitter: [@PCSSProjects](https://twitter.com/PCSSProjects)

*Funding for this initiative was made possible (in part) by Providers' Clinical Support System for Opioid Therapies (grant no. 5H79TI025595) from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.*

# PCSS Trainings and Resources

PCSS offers **no-cost** training resources with CME to health professionals (some with CE credits for nurses) through the use of:

- **Webinars** (Live and Archived)
- **Online Modules** - flipped classroom
- **Case Vignettes**
- **Podcasts**
- **MAT Chats and O-Chats**
- **MAT Waiver Trainings**
- **Clinical Coaching/Mentoring**
  - One-on-one and Small Group Discussions
  - List-serv for posting questions with Mentor on Call

# PCSS Mentoring Program

- A national network of experts in **medication-assisted treatment, addictions, clinical education** and **pain**.
- 3-tiered mentoring - allows every mentor/mentee relationship to be unique and designed to the specific needs of both parties.
- Small Group Discussions on specific clinical cases and topics.

**FREE      FREE      FREE**

**For more information to request or become a mentor visit:**  
[seth@aaap.org](mailto:seth@aaap.org)

# Take Aways

- **AA/NA and other mutual help groups can be a vital support throughout the continuum of care but they are NOT treatment - but support systems**
- **Relapse is real SUD (OUD) are chronic relapsing disorders.**
- **Stigma is HUGE – in the community and medical field**
- **All health professionals should be trained**
- **Reimbursement and prior authorizations are huge obstacles**
- **Naloxone/Narcan are life-saving BUT not treatment.**
- **Mental Health should NOT be ignored behavioral health/counseling is critical.**



# PCSS Program Highlights

## ● PCSSMAT

- 144 webinars and online modules
- 40,747 training participants
- 309 Buprenorphine waiver trainings with 5,397 training participants
- Next phase: local learning collaboratives

## PCSS-O

- 214 webinars and online modules
- 26,497 webinar and online module participants
- Release 14 core curriculum modules.

### **Mentee Feedback**

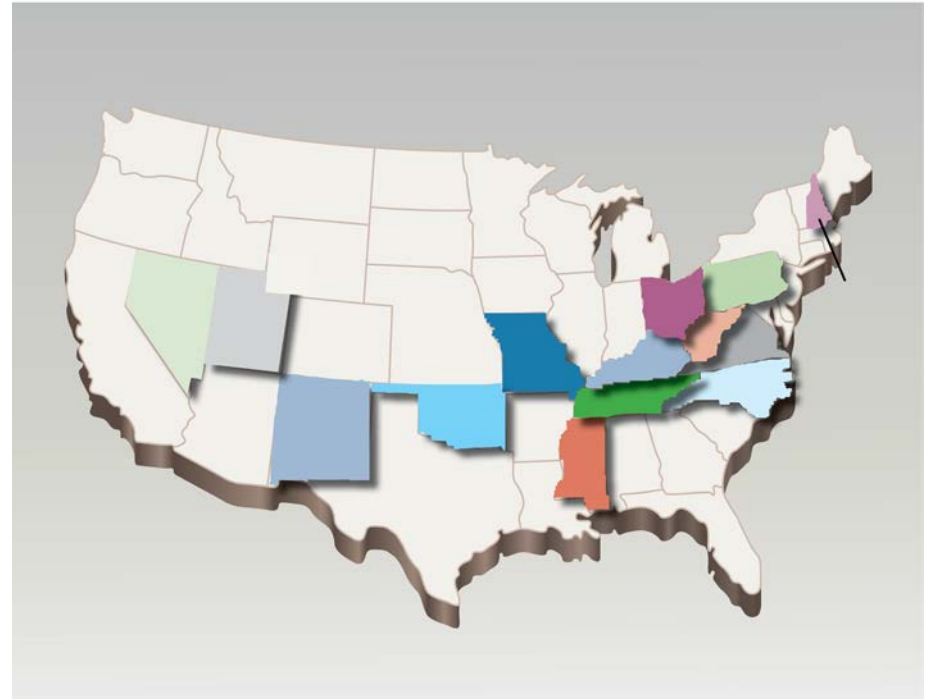
“I wanted to compliment my Mentor. I sent an email to him with a question...and within four hours I had not only his response but the input of four of his peers. This is a great service for those of us who are stretching the edges of what we would otherwise consider ‘comfortable.’”

– William Roberts, MD, Medical Director,  
Northwestern Medical Center Comprehensive  
Pain Management

# 14 State Initiative: Connecting the Dots

Enhance and extend local initiatives and provide resources (training and support) as defined.

- *SAMHSA and HRSA*
- *Define key organizations and individuals to form collaborative working efforts.*
- *FREE MAT- waiver training*
- *Identify local champions--sustainability*
- *Facilitate discussions among local groups.*
- *Create a website for sharing resources across states.*
- *Develop a state specific resource guide on MAT and local resources.*



## **States part of this pilot program:**

Kentucky, Mississippi, Missouri, Nevada, New Hampshire, New Mexico, North Carolina, Ohio, Oklahoma, Pennsylvania, Tennessee, Utah, Virginia, and West Virginia

# Take Aways

- **Collaboration is KEY**
- **Local is critical**
- **More than just educating prescribers**
  - *multidisciplinary teams (nurses, pharmacists, dentists, justice, counselors, psychologists, administrative/billing) are important.*
- **MAT does NOT = Bup/Suboxone other medications are effective**  
*Methadone, Naltrexone/ER – Vivitrol.*
- **What size does not fit all---treatment should be individual specific**
- **Systems and practical “how to’s” for health providers are needed to address the problem**

# YOU can make a difference Get Involved!

For more information about PCSS and request specific training and educational needs:

- [www.pcssmat.org](http://www.pcssmat.org) or [www.pcss-o.org](http://www.pcss-o.org)
  - [kcw@aaap.org](mailto:kcw@aaap.org)
  - (401) 524-3076