UVM CORA Opioid and Substance Use Treatment Training Scholarship Program Application

Start of Block: Intro

Opioid and Substance Use Treatment Training: An Intensive 2-Day Free Program for Rural Primary Care Practices

The Rural Center of Excellence on SUD Treatment at the University of Vermont Center on Rural Addiction (UVM CORA) is offering an Opioid and Substance Use Treatment Training Scholarship Program. Please read the <u>overview</u> before completing the application. We advise each practice to identify up to 4 members who will participate and complete the application together. <u>Submit only one application per practice</u>.

The UVM CORA Opioid and Substance Use Treatment Training Scholarship Program provides two consecutive days (January 30 – 31st, 2025) of in-person comprehensive training and consultation with faculty and staff experts from UVM CORA plus follow-up support from UVM CORA faculty for your whole practice after the program. It is intended for prescribing primary care providers and practice members from rural practices in Vermont. Up to 4 individuals from each practice may attend. We encourage interdisciplinary teams—in the past we have welcomed physicians, nurse practitioners, behavioral health specialists, RNs, etc. To confirm that your practice is defined as Rural by the Health Resources and Services Administration (HRSA), please check eligibility here: https://data.hrsa.gov/tools/rural-health.

UVM CORA's Scholarship Program is designed for rural practices with limited experience providing treatment for opioid use disorder (OUD). Our goals are to help practices: 1) Increase their comfort treating OUD. 2) Learn how to better support patients with complex needs related to OUD. 3) Receive training on topics related to OUD and other substance use disorders, with a specific focus on evidence-based best pharmacological practices and how to enhance prevention and treatment in rural communities. 4) Explore issues or challenges occurring within their own practices with other experts in the field and gain the skills and resources necessary to make improvements.

We will provide participants with lodging in Burlington and travel reimbursement, as well as CME credits for the training. Continuing education credits will be available, when possible, based on the needs and professional roles of the participants.

Application deadline: October 7

End of Block: Intro

Start of Block: Contact information 1
Please provide the name and website of your practice.
Name of Practice
O Practice website, if applicable
Please enter the address of your practice below.
Address of Practice
O Address of Practice Line 2
O Practice City/Town
O Practice Zipcode
Please select the state and county of your practice Practice State Practice County
▼ VT State other than VT ~ Only accepting applications from VT at this time.

End of Block: Contact information 1

Start of Block: Contact Information 2

Please enter the name and credentials of the primary contact below.

	O Primary Contact First Name	
	O Primary Contact Last Name	
	O Primary Contact Credentials	
Ple	ase enter the contact information for the primary contact below.	
	O Primary Contact E-mail	
	O Primary Contact Phone Number	

Please enter the names and credentials of up to four individuals who would be attending from your practice, including yourself if you will be attending. At least one of them must be a prescriber.

O Contact 1 Full Name
O Contact 1 Credentials
O Contact 2 Full Name
O Contact 2 Credentials
O Contact 3 Full Name
O Contact 3 Credentials
O Contact 4 Full Name
O Contact 4 Credentials

End of Block: Contact Information 2

Start of Block: Practice Information

Please provide the details of your practice in the following questions.

Page Break -

*

Approximately how many **miles** is your practice from the closest Opioid Treatment Program (OTP) Hub?

If you'd like to find the nearest OTP hub, type your address into the <u>Vermont Blueprint for</u> <u>Health's application</u> and filter for hub.

Please describe your practice (e.g. primary care versus specialty care; population served including community make-up and ages; practice personnel; setting, and any other descriptive attributes or characteristics): How many prescribing primary care providers work in your office at least one day per week? Of those prescribing providers, how many currently prescribe medications for opioid use disorder (MOUD)?

End of Block: Practice Information

Start of Block: Scholarship Program

The following questions ask about the issues your practice faces and your motivation for participating in the UVM CORA Opioid and Substance Use Treatment Training Scholarship Program.

Page Break -

What motivates your practice to participate in the UVM CORA Opioid and Substance Use Treatment Training Scholarship Program?

Page Break	

*

What are the top three knowledge gaps your practice is facing related to treating individuals with OUD?

*	
Please describe your first knowledge gap of concern.	
*	
Please describe your second knowledge gap of concern.	
*	
Please describe your third knowledge gap of concern.	

Deere	Drook	
Page	веак	

How do you hope your practice will change by participating in the UVM CORA Opioid and Substance Use Treatment Training Scholarship Program?

Is there anything else you would like our UVM CORA Clinical and Translational faculty and staff to know about your practice?

End of Block: Scholarship Program

Start of Block: Outro

*

Please provide contact information (name, email address and phone number) for your Clinic Director:

O Clinical Director's First Name	
O Clinical Director's Last Name	
O Clinical Director's Credentials	
O E-mail Address	
O Phone Number	

By initialing below, we confirm that the information we have provided is correct and, Our practice is designated rural by HRSA (see <u>https://data.hrsa.gov/tools/rural-health</u>). If selected, our practice will commit to participating in the UVM CORA Opioid and Substance Use Treatment Training Scholarship Program in Burlington Vermont on January 30 – 31st, 2025.

We have approval and support of our clinic director to participate. Type initials here:

End of Block: Outro