

Submission Title: Community Health Worker-led Substance Use Prevention Model for Recently Incarcerated Persons

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1) Describe the model's population of focus.

The focus of the model is recently incarcerated (i.e., within past three years or currently participating in probation) adults with or without a primary care provider residing in a rural county in southeastern Arizona. Those answering "yes" to either of the following questions will be screened for substance use risk: 1) "In the past three years, have you spent more than 2 nights in a row in a jail, prison, detention center, or juvenile correctional facility?" or "Are you currently participating in community supervision (probation)?"

2) Describe the screening process.

The model addresses risk and protective factors and substance use behaviors. The Protocol for Responding to & Assessing Patients' Assets, Risks & Experiences (PRAPARE®) Screening Tool and the Tobacco, Alcohol, Prescription medication, and other Substance use (TAPS) will be administered. Community health workers will administer both as clinician-administered electronic screeners prior to the patients' scheduled primary care visits.

3) Describe the preventive services available.

Several preventive services are available, including, for example, in-depth clinical interviews, motivational interviewing, counseling, and referrals to support groups. The types and number of preventive services will depend on risk level and types of substances. Prevention interventions may be delivered within the primary care practice site or the surrounding communities (i.e., a location more conveniently located for the patient), including mobile or web-based programs.

4) Describe the location/practice type providing the screening and prevention services.

The model will be implemented within three primary care clinics, all affiliated with a critical access, community hospital, and located close to the US-Mexican border. Approximately 20,000 people are seen annually across sites, including two other associated primary care clinics. Partnerships with non-primary care providers may be necessary and individuals will be referred as needed (e.g., for behavioral interventions).

5) Describe the model's key factors supporting screening and prevention services implementation and sustainability.

Community health workers are already employed within the three primary care clinics at which the model will be implemented; therefore, substance use screening and prevention will be incorporated into their existing workload. Evidence-based and necessary screening and preventive services for adults, delivered by certified community health workers within Arizona, are reimbursable through Arizona Medicaid. This reimbursement mechanism is crucial for supporting the utilization of CHWs and facilitating sustainable screening and prevention efforts. Health system executives and managers from

the health system that operates the three primary care clinics will support the implementation of the proposed model, including the clinical managers from each clinic location.

Figure. Community Health Worker-Led Substance Use Prevention Model for Recently Incarcerated Persons

Legend: PCP=primary care provider; CHW=community health worker; PRAPARE=Protocol for Responding to & Assessing Patients' Assets, Risks, & Experiences; TAPS=Tobacco, Alcohol, Prescriptions medication, and other Substance use tool.