

ADVANCING THE SUBSTANCE USE DISORDER (SUD) TREATMENT CONTINUUM

DBHIDS Response to the Opioid Crisis

DBHIDS is continuing its concerted efforts to increase the availability of Medication Assisted Treatment (MAT) in all forms across all levels of care.

MAT Expansion

- Increased the availability of Buprenorphine from approximately 100 slots to more than 1,000 slots
- Increased availability of Buprenorphine and Naltrexone XR at Opioid Treatment Programs

Expanding Prevention Capacity

- Added 8 Early Intervention Programs
- Awarded fourteen Community Empowerment Mini-Grants

Expanding Capacity

- New homeless outreach team in Kensington
- Buprenorphine Waiver Trainings
- Increased capacity of DBH Funded Recovery Houses
- Increased CRAFT to 3 days/week to rapidly assess and link individuals to treatment
- Increased Housing First by 60 slots for individuals with OUD
- Added a co-occurring Partial Hospitalization Program offering MAT
- Added 24/7 Access Point offering same-day withdrawal management services
- Launched the Recovery Overdose Survivor Engagement (ROSE) Project through PRO-ACT at Temple Episcopal which employs Certified Recovery Specialists (CRS) to connect overdose survivors and at-risk individuals to treatment
- Launched a mobile engagement unit through Prevention Point Philadelphia (PPP) with staff from PPP, DBHIDS, and volunteer MDs/RNs, traveling in a medical van to hot spots to engage individuals displaced from Gurney Street in the Kensington/Fairhill area 3 days/week

SUD Treatment Continuum

Within DBHIDS, Community Behavioral Health (CBH) manages the behavioral health services for Medicaid beneficiaries while the Division of Behavioral Health (DBH) manages care for uninsured individuals and various recovery support services.



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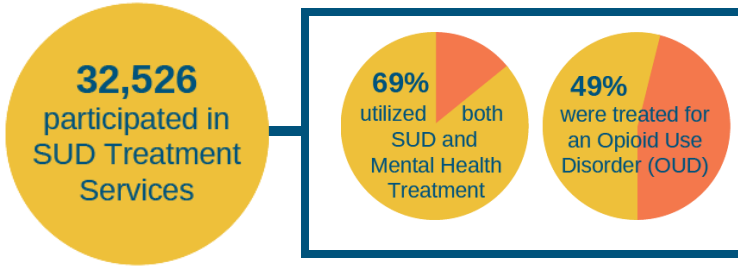
*Coordinated Response to Addiction by Facilitating Treatment (CRAFT)

**Federally Qualified Health Center (FQHC)

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SUD Utilization Data

(1/1/17 - 12/31/17)



52%

of individuals who used detoxification were recidivists to high acuity levels of care; which increases overdose risk.

MAT System Transformation

DBHIDS is using detoxification to capacity and has added beds where possible. DBHIDS is employing a more comprehensive response by transforming the practice of detoxification to withdrawal management.

Detoxification

- Isolated level of care; Siloed programs
- Emphasizing detox as the major entry point for treatment strains the perceived availability of treatment
- Individuals who receive only detoxification are at greater risk of relapse and overdose
Inconsistent with current evidence based practice



Withdrawal Management

- A medical intervention offered in every level of care, including outpatient hospital settings
- Emphasis placed on recovery initiation, MAT stabilization, and engagement in sustained treatment
- Expansion of withdrawal management in various settings will reduce perceived unavailability of treatment slots

Multiple studies have proven that Medication Assisted Treatment in combination with psychosocial treatment is effective in:

DBHIDS is linking individuals to a MAT treatment provider to align with best practice and out of concern that numerous individuals are cycling through detox and residential treatment.

- ✓ Reducing mortality
- ✓ Lessening illicit opioid use
- ✓ Increasing retention in treatment
- ✓ Lowering criminal justice consequences of substance use
- ✓ Diminishing overall health care and societal costs

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