

Bureau of Recovery Services

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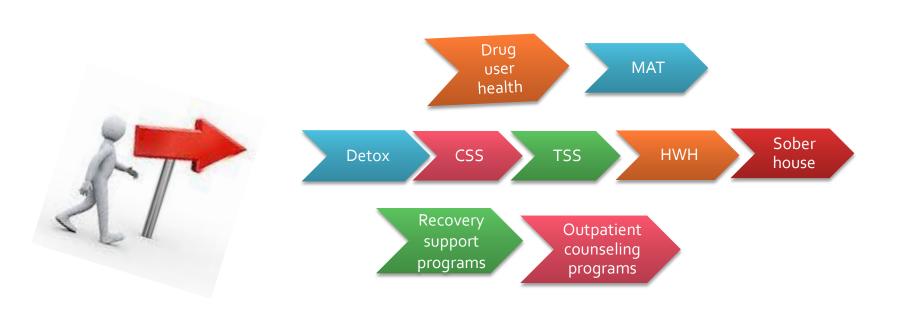
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BOSTON

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- A variety of treatment options exist for individuals seeking treatment for drugs and alcohol use
- Navigating this continuum, understanding the types of treatment available and appropriate level of care can be challenging

Levels of care: types of services available



What are common barriers for people seeking treatment?

- Co-occurring medical issues and SUD
- Co-occurring mental health and SUD
- Insurance coverage
- Medications
- Unstable housing/homelessness
- Program availability (no beds)
- Transportation
- Restriction from programs

Case scenario

- 31 yo SWM, homeless staying in shelter, presenting to PAATHS
- PP:help accessing post-detox services"
- DOC: Hx of heroin use 10 years, 2g IV daily
- 5 Ods in past 2 months
- Depression, bipolar lithium
- Asthma, diabetes, high blood pressure lost all medications for medical issues
- Current encounter: Pt was discharged from ATS yesterday to the street due to no bed availability at CSS/TSS
- No ID
- No PCP



- Walk-in services
- Assessment, referral, case management, advocacy
- Facilitate access to all levels of care
- Remove barriers that hinder access to care

- Coordinate treatment with medical and mental health providers
- Information and resources to families and friends
- Community support/TA
- O Hotline/ 311

January 1 2016 — September 1 2016

- Walk in visits
 - 5,444 walk in visits
 - 641 walk-in visits per month
- Hotline (2016)
 - 3,298 calls
 - 392 calls per month
- People placed in treatment:
 - Over 1500 treatment placements
- Services requested by levels of care: 50% detox, 35% CSS/TSS (post detox inpatient programs), 15% OPC/MAT
- Number of new clients:
 - Average 90 new clients every month

PAATHS walk-in hours:

- Monday: 7:30am—3:30pm
- Tuesday: 7:30am—3:30pm
- Wednesday: 7:30am—1:30pm
- Thursday: 7:30am—3:30pm
- Friday: 7:30am—3:30pm

774 Albany street, Boston MA 02118 (across from Boston Medical Center)

*** First come first served basis
*** Early registration highly encouraged

Hotline: 1-855-494-4057 or call 311 if in Boston



Case Scenarios Discharge planning

- Patient is admitted into ER and needs detox.
 Provider calls detox facilities and there are no beds available.
- Patient is admitted into ER/hospital after an overdose. Provider offers treatment but patient does not want to go to treatment.
- Patient comes in with family and/or friends and family and friends are the ones asking for resources/information.

Discharge planning:

- Safety plan
 - Do you have a safety plan?
 - Where are you going to stay tonight? (if the option exists, always give patients the option to leave in the morning as opposed to evening or night)
 - Is there anyone you can or need to call?
 - Do you need me to call the shelter for you?
- Overdose prevention education
- Where to access services (e.g. AHOPE, PAATHS)

*** If patient is being referred to PAATHS please call us and let us know before he/she is discharged