# Welcome

### Plan:

\*About me Bethel update

\*Treatment

\*Questions

## Background

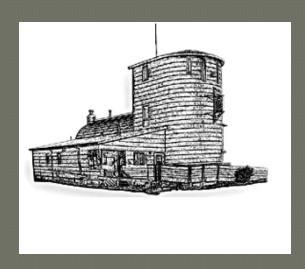
Born and raised in Bethel

### **Education history:**

- Bachelor's of Health Sciences
- Master's of Counseling Psychology
- Licensed Professional Counselor
- Certified Clinical Trauma Professional
- Work history:
- Mental Health Specialist at a residential tx facility in Anchorage
- Lead intensive outpatient treatment provider in Anchorage
- Emergency services and intake clinician at YKHC
- Full-time clinician at Bethel Family Clinic

## Bethel Family Clinic

- Federally Qualified Health Center
- Accept private insurance, self-pay,
   Medicaid/Medicare, Sliding Fee Scale
- Medical services (MD & PA)
- Pharmacy
- X-Ray
- Lab
- Behavioral Health
- 631 Main Street



### Questions

Feel free to ask questions throughout the presentation

I encourage discussion

### Bethel

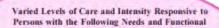
- Increased heroin use
- Increased crime
- Method is mainly smoking
- Prescription pain pills > heroin transition
- Prices
- Demographics
- Social connections
- Dysfunction of support groups
- Lack of education/knowledge about addiction and recovery of family members and community

### Levels of Care

- 0.5 Early Intervention education only, not treatment
- 1.0 Outpatient- 1-3 hours a week (group OR individual)
- II.1 Intensive Outpatient- 9 hours a week (group & individual therapy combined)
- III.1- Low Intensity Residential tx
- III.3- Medium Intensity Residential tx
- III.5- High Intensity Residential tx
- III.7- Medically monitored detoxification center

### Core Therapeutic Elements of Residential Treatment of Substance Use Disorders

Residential Treatment is a normative pervasive environment supporting a 24 hour-per-day culture and milieu of beliefs and ideology which values respect for the inherent goodness of the individual, the capacity to change, personal responsibility and the reliance on the treatment community as a therapeutic agent. The following four core elements are identified in the literature and correlated with its effectiveness although is less clear how and why they are effective.



Deficits (ASAM Patient Placement Criteria)

### Level 111.1 Functional deficits and needs include:

- Problems in the application of recovery skills
   -Lack of connectivity to the world od work, education, family life
- Person in "pre-contemplation" who are living in an environment "too toxic" to permit treatment in an outpatient basis

### Level 111.3 Functional deficits and needs include:

- Person for whom the effects of substance use disorders are so significant that they result in a level of impairment for which outpatient services are not feasible or effective
- Functional deficits are primarily cognitive and can be temporary or permanent which require treatment at a slower pace, more concrete and repetitive until cognitive impairment subsides
- Responsive to person with such severe deficits in interpersonal and coping skills that treatment focuses more on "habilitation" rather than "rehabilitation"

### Level 111.5 Functional deficits and needs include:

- Responsive to needs of persons with significant social and psychological problems who can benefit from the treatment community as a therapeutic agent
- Functional deficits: chaotic, often abusive, non-supportive interpersonal relationships
- More serious or lengthy criminal history
- Limited or significantly sporadic work and educational history
- -Treatment interventions are matched to person's readiness to change:

For some it is "discovery"

For some it may focus on maintaining abstinence and preventing relapse

For some preventing a return to antisocial behavior

For some it is developing a sense of personal responsibility and positive character change For some it is "habilitative"

For some it is "rehabilitative"

-Anti-social value systems characterized by:

Impulsivity, deficient anger management skills

Hostile or violent acting out,

Resistance and antagonism to limits, problems with authority

Hyperactivity and distractibility

### Structure and Stability

Daily regimen of scheduled activities: Meals

Community meetings Didactics

Recreational/physical Reflective time

Group therapy Individual therapy

Defined policies procedures and clinical protocols Specified roles for staff, residents and family Predictable times to practice recovery and coping skills

### Safety and Separateness

Safety from: Alcohol and other drugs Dominate drug culture Drug places Chaos

Safety to: Practice recovery and coping skills Controlled experiential community environment separate from larger society Microcosmic representation of larger society providing a social context to alter thinking, feelings, behaviors

### Therapeutic Processes and Outcomes

- -Structured recovery environment
- -Provides sufficient stability to prevent and minimize
- -Provide treatment and community structure to practice and integrate

recovery and coping skills

-Community and treatment settings build upon residents imitative

tendencies to learn through role modeling

- -Build upon the social nature of persons (Social
- Learning, Social control, Stress and Coping, Theories)
- -Development is dependent on reciprocal interaction in a
- safe and separate community setting.
- -The use of a separate community as a means of personal and spiritual transformation requires a shift from the self-centeredness of the personal identity, which characterizes addiction thinking, feeling and behaving
- to "letting go" to a power greater than oneself
- -The resident finds healing not isolation but in communion with others

### Standard of Care

- Assessment
- Detox
- Level III.5 Residential
  - >>Opiate Replacement Therapy's place in treatment
- Intensive Outpatient step down
- Outpatient
- Relapse Prevention
- Peer led support groups

# Options for Care in Bethel

- Assessment
- Level III.3 Residential
- Level I Outpatient
- No functioning support groups currently

- Note:
- You may see patient's on Opiate Replacement Therapy medication who are accessing services out of Bethel or on the black market

# Helping those with opiate addictions

ALWAYS provide treatment resources when treating or managing withdrawal symptoms

Addicts don't get sober from treating withdrawals, they get sober from the standard of care treatment process, continuity of care, accountability.

### Provider options in Bethel

- Bethel Family Clinic- Teri Davis (907-543-3773)
  - -Medicaid
  - -Insurance
  - -Self pay \$175-\$260
  - Sliding fee scale (nobody is denied services due to their inability to pay- low income qualify for discounted services)
- Sarah Angstman, PhD- private practice (907-545-5330)
  - -Insurance
  - -Self pay- \$250 for an assessment
- YKHC Behavioral Health- 907-543-6101
  - -Medicaid
  - -Insurance
  - -Native beneficiaries

### Process for treatment admission

- Each treatment center varies in their admission requirements.
- Phone assessment (out of state programs)
- Typical admission requirements:
- Behavioral Health/Substance Use Assessment
- 2) Medical exam/physical-cleared for treatment (within 30 days)
- 3) TB test (within 3 months)
- 4) Release of information for referring agency
- 5) Some programs have additional paperwork

Due to the paperwork and time, it's most beneficial for the client for you to connect them with a BH provider to do the assessment and facilitate treatment admission.

## Treatment Options

# Residential treatment options for adults Bethel

Level III.3-YKHC PATC- (907) 543-6730

### <u>Anchorage</u>

Multiple short and long term treatment centers that accept Native Beneficiaries or Medicaid however they tend to have longer wait times

### Out of state

Require Medicaid, insurance or self-pay

\*\*HANDOUTS AVAILABLE\*\*

# Healthy Connections Opiate Recovery Group

- Starting August 15<sup>th</sup>
- EVERY Wednesday 5:15pm-6:15pm
- 1815 Chief Eddie Hoffman Hwy Table of Grace Lutheran Church

# Healthy Connections Opiate Recovery Group

- Peer led with professional support present
- Designed to enhance treatment, not be primary treatment
- Free
- Open to the public
- For anyone seeking recovery from prescription pain medication or heroin

### Thank You

• Questions??