



# *SAMHSA-HRSA Center for Integrated Health Solutions*

## The ATTC Network



ATTC

Addiction Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

CELEBRATING **20** YEARS

PCBHI Grantee Meeting

Traci Rieckmann, PhD, Northwest ATTC

February 10, 2014

Seattle, WA



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# ATTC Network Structure 2012 - 2017

## 10 ATTC Regional Centers



(MAP NOT TO SCALE)

## 4 ATTC National Focus Area Centers

National Frontier & Rural ATTC

National Native American & Alaskan Native ATTC

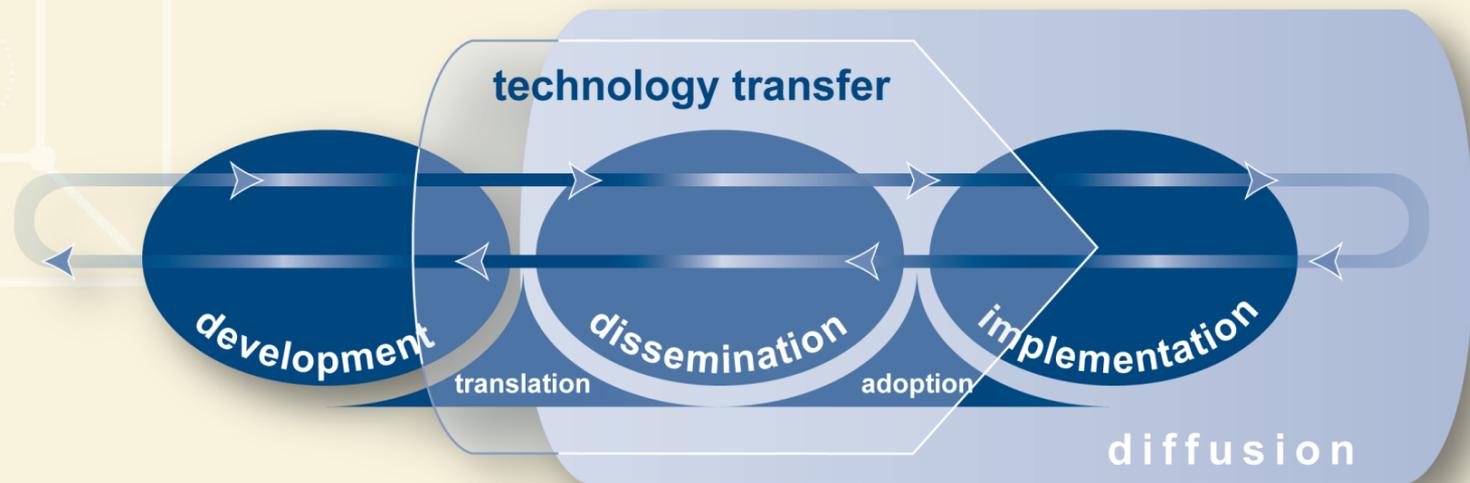
National SBIRT ATTC

National Hispanic & Latino ATTC

1 ATTC Network Coordinating Office

## ATTC Three-Part Mission:

1. Accelerate adoption and **implementation** of evidence-based and promising substance abuse treatment and recovery-oriented practices and services



The ATTC Network Model of Technology Transfer  
in the Continuum of the Diffusion of an Innovation

## ATTC Three-Part Mission:

2. Heighten the awareness, knowledge, and skills of the **workforce** that addresses the needs of people with substance use or other behavioral health disorders



## ATTC Three-Part Mission:

3. Foster regional and national alliances among culturally diverse practitioners, researchers, policy makers, funders, and the recovery community



## Key Points:

1. There is a continuum of substance use disorders from no/low risk to dependence.
2. There are many pathways to recovery.
3. Addiction is a chronic condition, like other chronic health conditions.
4. Addressing substance use disorders in an integrated care setting is an integral part of addressing wellness, resilience, and the Triple Aims of better health, better quality and cost management.

# Key Point 1:

There is a continuum of substance use disorders and a continuum of interventions to address them.



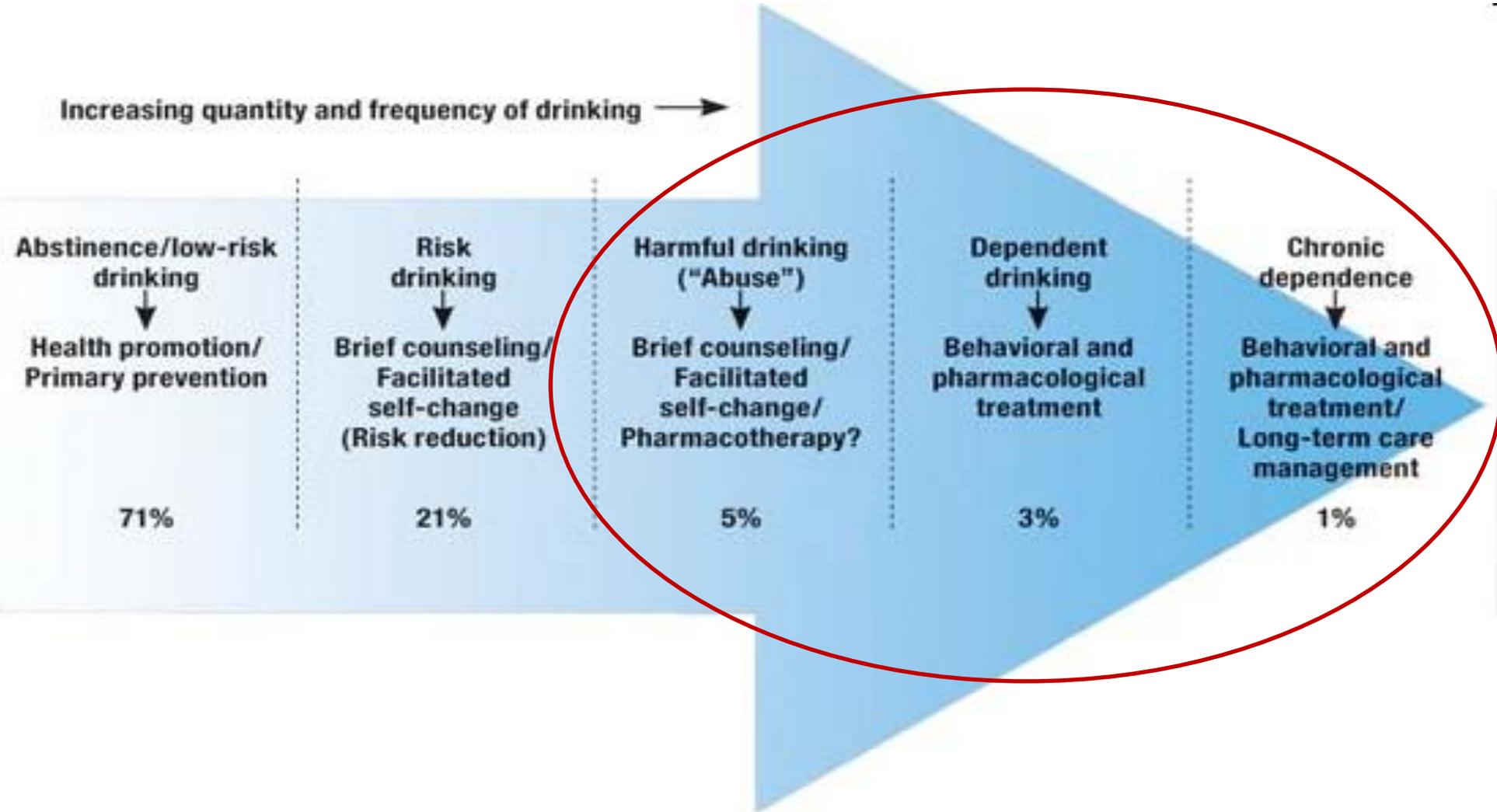
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Source: Gumbley, S.

Reference: Willenbring, M. Continuum of care for excessive drinking and alcohol use disorders. (Percentages represent the approximate proportion of the U.S. population age 18 and older in each category in any given year.)



# The Public Health Model corresponds with SBIRT and Provides a Continuum of Interventions

- **Primary Prevention** – Precluding or delaying the onset of substance use.
- **Secondary Prevention and Intervention** – Providing time, cost, and labor sensitive care to patients who are at risk for psycho-social or healthcare problems related to their substance use choices.
- **Tertiary Treatment** – Providing time, cost, and labor intensive care to patients who are acutely or chronically ill with a substance use disorder.

# Key Point 2:

There are many pathways to recovery and not everyone needs specialty treatment.



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# WHAT IS RECOVERY?

A process of change through which individuals improve their health and wellness, live a self directed life, and strive to reach their full potential.

-- SAMHSA



# THERE ARE MANY PATHS TO RECOVERY

- Mutual Support groups
- Other peer support
- Professional treatment
- Nontraditional methods
- Medical interventions
- Medication-assisted treatments
- Family support
- Faith
- On your own
- And more

**Example:**



Source: Gumbley, S. New England ATTC

# Key Point 3:

Addiction is a chronic condition and is as prevalent as other chronic health conditions.



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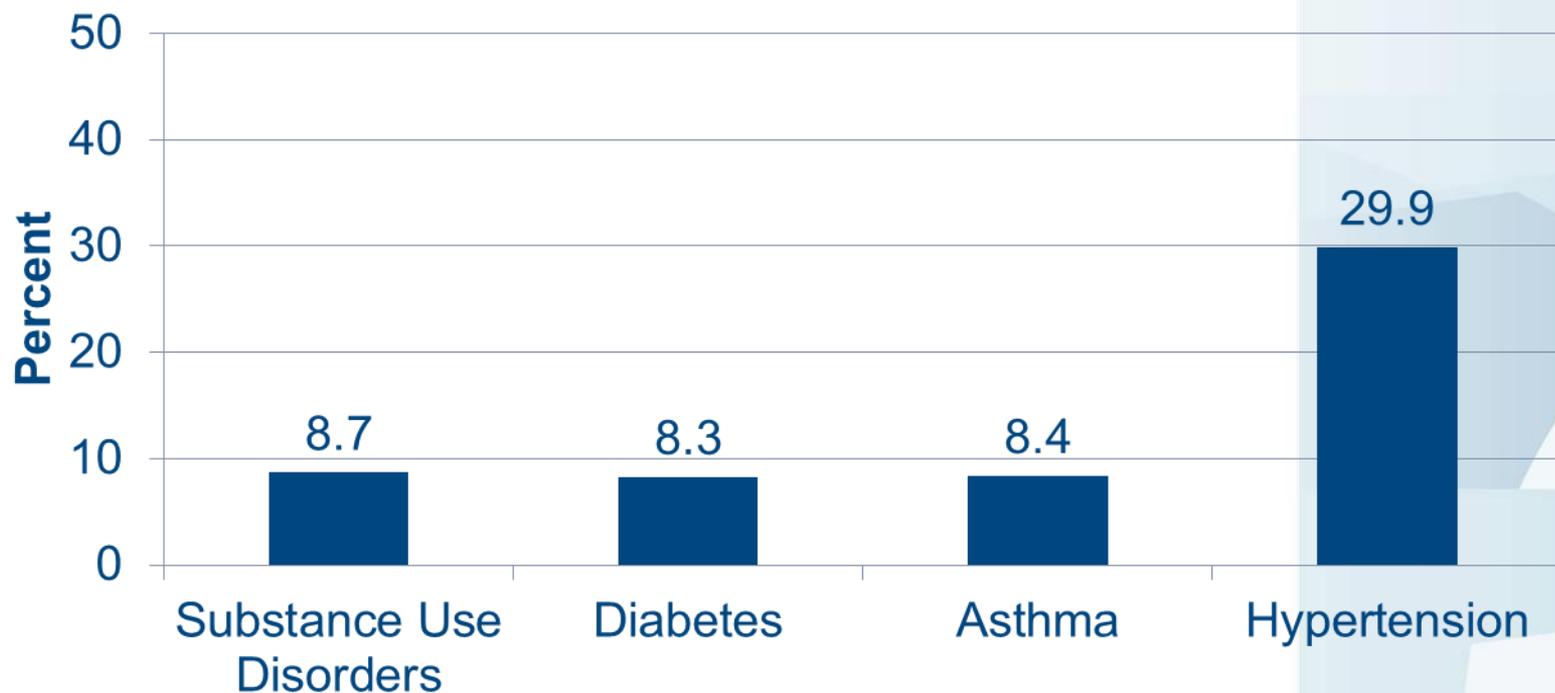
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# Substance use disorders are as prevalent as other chronic health conditions



# Key Point 4:

Addressing substance use disorders in an integrated care setting is an integral part of addressing whole health, wellness and resilience and the triple aims.



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# THE SHARED GOAL OF RECOVERY IN MENTAL HEALTH AND SUBSTANCE USE CONDITIONS

**A meaningful  
and fulfilling  
life in my  
community**



# Comparison of Key Principles of Recovery-Oriented Systems of Care and Integrated Behavioral Health and Primary Care Settings

<b>Recovery-Oriented Systems of Care</b>	<b>Behavioral Health – Primary Care Integration</b>
Chronic Care Approach	Chronic Care Approach
Sustained healing relationships, post-tx monitoring, support and early re-intervention	Ongoing relationship with care provider
Individualized approaches with a focus on dose, scope and quality	Individualized, stepped care
Attraction via assertive outreach/engagement and focus on earlier intervention	Enhanced access via open scheduling, enhanced hours, new mechanisms for communication, universal screening
Holistic Services	Whole person orientation
Community Health and wellness	Public health approach focused on population health outcomes

# Comparison of Key Principles of Recovery-Oriented Systems of Care and Integrated Behavioral Health and Primary Care Settings

<b>Recovery-Oriented Systems of Care</b>	<b>Behavioral Health – Primary Care Integration</b>
Strengths Based Approaches	Solution focused approaches
Integration of Recovery support Services	Care Management, “Enabling Services”
Peer Support (navigating systems, linkage to community resources, coaching, recovery planning, problem solving, etc).	Wellness Programs
Collaborative service relationships	Collaborative care and shared decision making
Expanded composition of service teams	Shift from individual practitioner model to team-based approach
Expanded locus of service delivery, services delivered in natural environments	Person Centered health homes
Choice, Self direction	Activated patients (Patient education and self management/ self-care)

## **ATTC Resources of Note:**

- **HealthKnowledge.org**
- **Regional Resources**
  - **NWATTC and Pacific Southwest ATTC**
- **National SBIRT ATTC**
- **Find more at ATTCnetwork.org**

### Login

Username

Password

Remember username

Login

## Welcome to the new HealthKnowledge.org

Already have an account with **ATTCeLearn.org**? *DON'T PANIC!*

Your account and the status of your current enrollments have not been affected by this change.

Along with a **new name and look**, we also have a **new, simpler navigation**. In addition, in the coming weeks you will continue to see more changes as we add **expanded course offerings** on a variety of related topics essential to today's health professional.

## FREE Self-paced Online Courses

- Foundations of SBIRT
- Essential Substance Abuse Skills: Foundations for Working with Addictions
- Medication-Assisted Treatment with Special Populations
- and More!



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Network Home | What We Do | Who We Serve | Find an ATTC | Quick Links

National Screening, Brief Intervention & Referral to Treatment

Search the Network  GO

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Welcome to the National Screening, Brief Intervention & Referral to Treatment (SBIRT) ATTC

**Products and Resources**  
Learn about products and resources available in this focus area.

**Contact Us**  
Find contact information for this National Focus Area Center.

**National SBIRT Links**

- Home
- Trainings & Events
- Products & Resources
- Special Topics
- SBIRT Trainers Registry
- SBIRT Suite of Services
- Partners
- Distance Education

**The National Screening, Brief Intervention and Referral to Treatment Addiction Technology Transfer Center**

**The National SBIRT ATTC** is funded to advance SBIRT as a timely public health model worthy and in need of advancement to reach its full potential impact on the health of Americans. With our partner (NORC), we hope to help healthcare providers utilize the public health model of screening for substance use and providing advice or counseling to their patients who use alcohol or other drugs in risky or harmful ways.

Network Home | What We Do | Who We Serve | Find an ATTC | Quick Links

National Screening, Brief Intervention & Referral to Treatment

Search the Network  GO

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- Advisory Board
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**Registry of SBIRT Trainers**

**Find a SBIRT Trainer**

The Registry allows you to search for a training provider by the name of the trainer, by state, or by region. Enter a name or state below, or to search by region, click on a region in the map below the form.

Search By:

First Name:

Last Name:

State:

**The SBIRTAlert**

Part of the National SBIRT ATTC Suite of Services

**ATTC** National Screening, Brief Intervention & Referral to Treatment  
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An occasional email update from the [National SBIRT ATTC](#)

**Webinars**

**SBIRT in Action, our implementation series, continues in 2014**

**January 15, 2014 1:00 - 2:30 PM EST**  
**Implementing SBIRT in Two Primary Care Clinics**  
*Presenter: Chris Fareninos MD, MPH, CAQIC II*  
Dr. Chris Fareninos of De Paul Treatment Centers will share her experience collaborating with Legacy Health, one of the largest health care systems in Oregon, to secure a grant and implement SBIRT using a co-location model. Implementation steps, dos and don'ts, and specific metrics and sustainability strategies will be discussed. [Register](#)

**February 19, 2014 2:00 - 3:30 PM EST**  
**A Nursing Response to the Full Spectrum of Substance Use**  
*Presenters: Deb Finnell, BSN, MS, PhD and Lauren Broyles, PhD, RN*  
Presenters will provide an overview of alcohol SBIRT and discuss its fit with nursing roles, responsibilities, and practice across settings and specialties. [Participants will](#)

January 7, 2014

**Our Blogroll**

- The Institute Blog
- Expanding SBIRT to Hospitals
- Alcohol IBA (UK)
- WIPHL Blog
- SBIRT Training

Subscribe to *The SBIRT Alert*

Funded by SAMHSA, the National

Visit the website for the **Suite of Services:** webinar series, resources and tool kits.

Check out the **National Trainers Registry** – expert trainers for every region.

Sign up for email **alerts** on SBIRT trainings and news.

**www.attcnetwork.org/sbirt**



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# Northwest ATTC Services

## Integrated Care: Evidence-Based Practices

- Motivational Interviewing training and TA (73)
- Medication Assisted Treatment for SUD
- SBIRT Training (38)
- Integrated care assessments for agencies/clinics
- Developing a trauma-informed care workshop
- Viral Hepatitis Initiative (resources, networking)
- Computer-based & technology driven interventions



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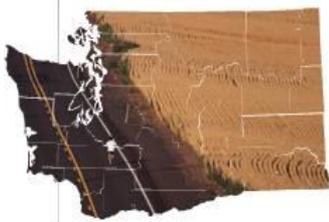
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# Northwest ATTTC Partners

**wasbirt·pci**

Improving health through substance abuse intervention in primary care settings



Screening, Brief Intervention and Referral to Treatment  
**Primary Care Integration**



Washington State  
Department of Social & Health Services

**RDA** Research & Data Analysis Division



**King County**



## Screening Brief Intervention & Referral Training and Technical Assistance

- SBIRT WA Project
  - Training and TA for 8 FQHCs, 2 Emergency Departments, and 2 TANF County SBIRT Projects
- Provide 4-hour WA Health Care Authority
  - Approved SBIRT training for Medicaid billing
- SBIRT Training and TA packages to implement SBIRT into Primary Care (8 Providence Clinics)
- Participated in the SBIRT Oregon Residency Grant



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# NWATTC Resources

## Check-out our web-page:

[http://www.attcnetwork.org/regcenters/index\\_northwest.asp](http://www.attcnetwork.org/regcenters/index_northwest.asp)

## Resources on:

- SBIRT
- Health Care Integration
- Hepatitis
- Motivational Interviewing
- On-line courses
- Medication-Assisted Treatment



# Pacific Southwest ATTC Integration Activities

- CATES Training Series: *The Changing Behavioral Health Care Landscape: Integration, Innovation and Financing Models for Success* (2013)
  - <http://www.uclaisap.org/slides/presentations-psattc-cates-2013-2008.html>
- Culture of Integrated Services Webinar Series (2013)
  - <http://www.uclaisap.org/dmhcod/html/archived-trainings.html#innovations>
- SBIRT Training and Implementation Technical Assistance (ongoing)
  - <http://www.psattc.org>



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## **For more information:**

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[www.ATTCNetwork.org](http://www.ATTCNetwork.org)