Program Development Work Group

November 5, 2020





Meeting Overview

- Distinguishing programs from services
- Programs update
 - Responding to PDWG feedback
- Defining key programs and services
 - Let's get on the same page



A Managed Approach

Core
Plus
Co-located & County/
Community
Partner
Provided



PROGRAMS

An intervention that has specific enrollment criteria and often operates under specific OAR related to staffing and licensing. Individuals at CATT will rarely receive support from two separate programs at the same time. Examples:

- Detox
- Residential Treatment

SERVICES

A clinical support offered within a program. A program may include multiple services.

Examples:

- Peer Support
- Family Engagement



Core

These programs provide critical treatment infrastructure and are foundational to the program design.

- Sobering
- Crisis Stabilization
- Respite
- Detox
- Residential
- Outpatient Stabilization (MAT induction)



Core Plus

Adding these programs when space and funding allow will be beneficial to individuals served at the CATT.

- Outpatient SUD Treatment
- Supported Employment
- Transitional Housing
- Mental Health Treatment
- Drop-in Center (Flex space)



Co-located & Integrated

These programs and services help clients address cooccurring needs. They should be integrated with CATT programs and located on the campus as space allows.

- Medical Care
- Dental Care
- Child Care
- Benefits and transportation assistance
- Pharmacy



Community/County Partner-Provided

These supportive services enhance the likelihood of client success. While not located on the CATT campus, partnerships and collaboration should be formally established with consistent referral back and forth.

- Supportive Housing
- Social Services
- Medical
- Dental
- Education / Family Support
- Animal Care
- Family Justice/Legal Services





Discussion: CATT Terminology



Detox (Withdrawal Management)

- Addresses physiological dependence on alcohol or opiates
- Medical monitoring and support
- Length of stay is typically short, and the client often transitions to a residential program



Residential

- Facility-based treatment program
- Individuals live in a supportive environment and learn skills to avoid relapse
- A 60-90 day stay is common



Medication Assisted Treatment (MAT)

- Medication used to support individuals in their recovery
- Ideally available and integrated into all programs
- May also be a stand-alone program
- Also known as Medication Supported Recovery



Outpatient Stabilization

- Short-term, rapid assessment and access program
- Heavily focused on MAT and peer support
- Rapid connection to treatment when residential services are not desired or indicated
- Short-term with transition to other services as indicated



Sobering

- Serves individuals acutely intoxicated with depressants such as alcohol or opioids
- Services:
 - Monitoring vital signs
 - Providing fluids & nutrients
 - Safe and supportive environment until client transitions to a different level of care

Crisis Stabilization (Meth Sobering)

- Serves individuals acutely intoxicated on stimulants such as methamphetamines
- Emphasis: minimizing harm to self and others while agitated
- Services:
 - Monitoring vital signs
 - Providing fluids & nutrients
 - Safe and supportive environment until client transitions to a different level of care

 Center for Addictions

Respite

- Flexible, short-term residential program
- Safe environment for an individual while waiting to access other residential care
- May be used to engage and connect people into services while waiting for an opening in the right level of care

Peer Support

- Supportive services provided by individuals with lived experience of substance use and/or a mental health condition
- Peer supports should be integrated into all programs



Co-occurring Services

- Individuals often experience both mental health and substance use disorders
- Co-occurring services address both by providing mental health and SUD together
- Services are blended and ideally provided by staff with training and/or experience in both areas
- Co-occurrence should be acknowledged and supported in all programs

 Center for Addictions

Family Engagement

- Intentional efforts and activities that include family members in treatment planning and delivery
- "Family" is defined by the client
- Acknowledges individuals do not live in isolation; support from others is essential in recovery



Outpatient SUD Treatment

- Clinic-based Substance Use Disorder Treatment
- Individuals identify patterns with their substance use; learn skills in achieving and maintaining sobriety.
- Treatment includes assessment, individual and group therapy, peer mentor services, medication management, and urinalysis

Supported Employment

 Focuses on developing skills to be competitive in the job market

Transitional Housing

 Temporary and of limited duration; provides a safe and stable environment while a more permanent arrangement is sought



Drop-in Center

- Flex space where individuals in recovery, and their supports, can congregate
- Provides opportunities for socialization, mutual support and development of peer networks
- Gathering place for support groups and affinity group activities



What Else?

- Measure 110: Assessment and Triage
 Center
 - Rapid intake and evaluation
 - Referral to CATT program
 - Referral to other programs



Next Steps

- Next meeting:
 - Thursday, December 3rd
 - 10:30-Noon
 - Topic: Size and Scale



Contact Information

CATT@co.washington.or.us

Kristin Burke, 503-846-4563

Kristin Burke@co.washington.or.us

Walt Peck, 503-867-1826

Walter Peck@co.washington.or.us

