



DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
DIVISION OF SUBSTANCE ABUSE AND MENTAL HEALTH

# RESHAPING DELAWARE'S BEHAVIORAL HEALTH TREATMENT SYSTEM



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Director



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# DELAWARE STATISTICS



# DELAWARE OVERDOSE DEATHS



**172**  
IN  
2012

**188**  
IN  
2013

**223**  
IN  
2014

**229**  
IN  
2015

**308**  
IN  
2016

**345**  
IN  
2017

**400**  
IN  
2018

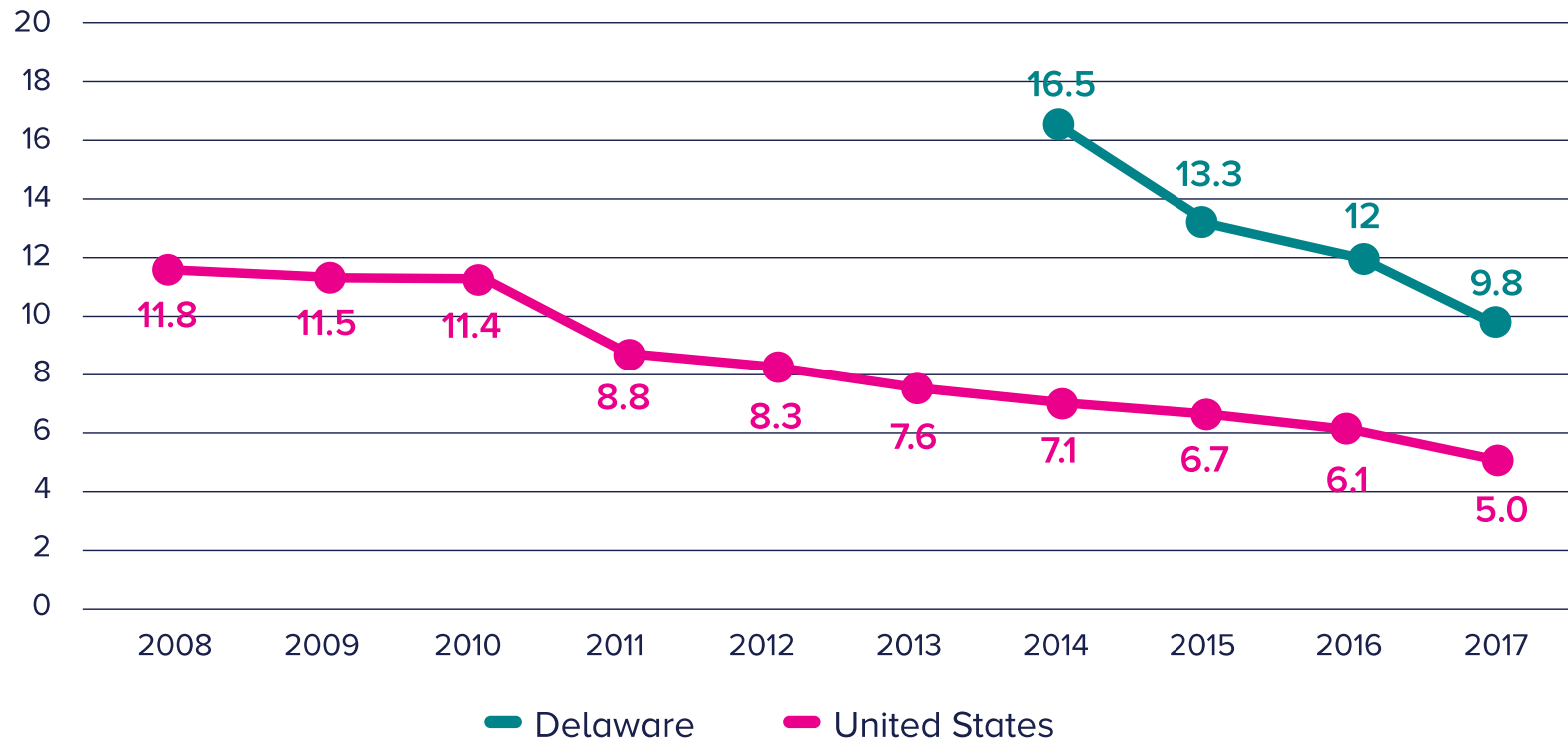




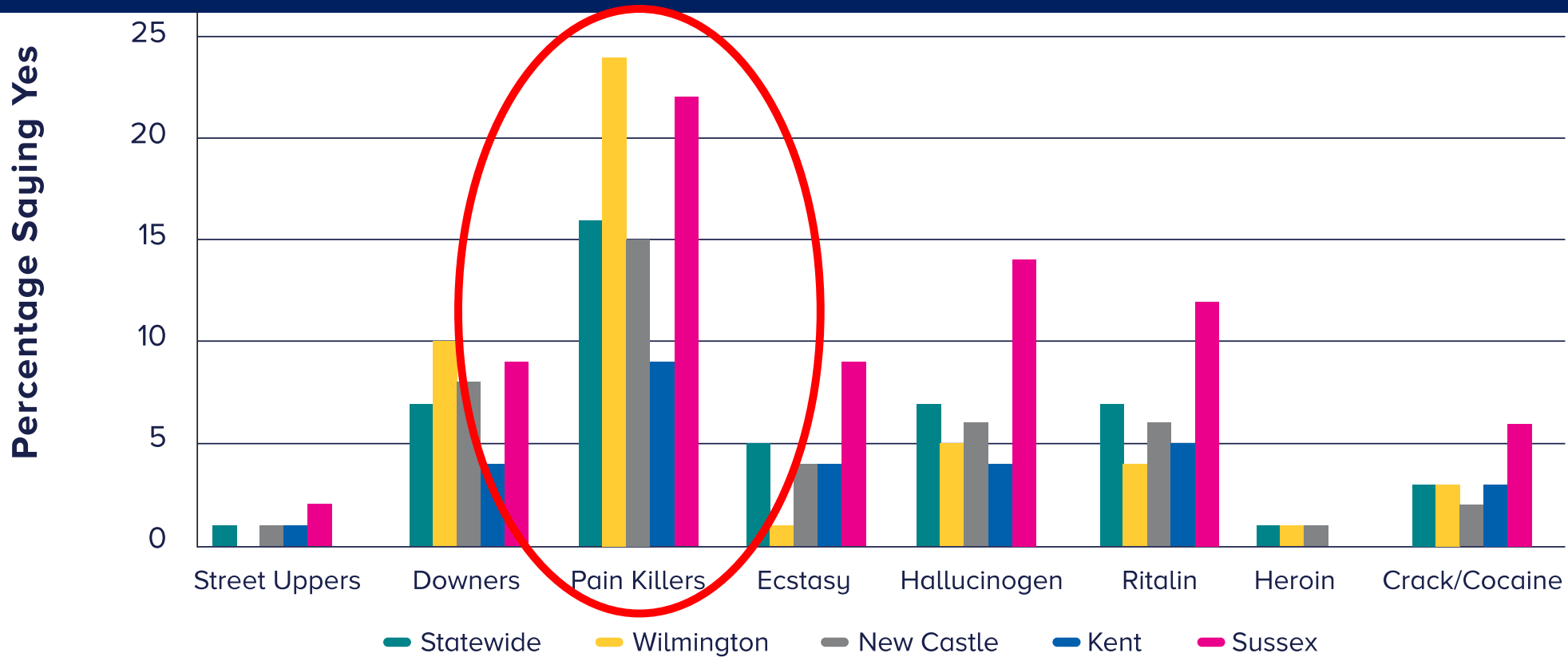
# DELAWARE RANKED FIRST IN THE NATION FOR HIGH-DOSE OPIOID PRESCRIPTIONS



ANNUAL HIGH-DOSE ( $\geq 90$ MME/DAY) PRESCRIBING RATES PER 100 PERSONS



# PAST YEAR USE OF ILLEGAL SUBSTANCES AMONG DELAWARE 11<sup>TH</sup> GRADERS



# CURRENT TREATMENT AND ENGAGEMENT: BUILDING ON OUR EXISTING PERFORMANCE

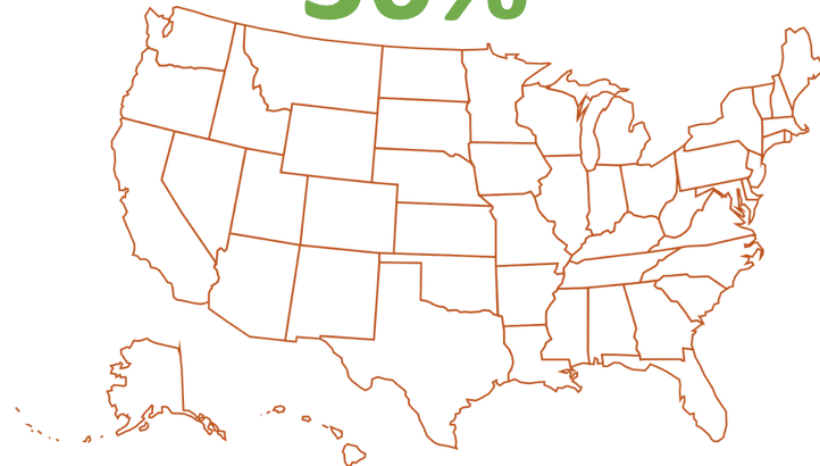


## Initiation of Alcohol & Other Drug Dependence Treatment: Age 18 & Older

DELAWARE  
**38%**



UNITED STATES  
**36%**



*Source: CMS Adult  
Core Set for  
Medicaid, 2016*



# CURRENT TREATMENT AND ENGAGEMENT: BUILDING ON OUR EXISTING PERFORMANCE

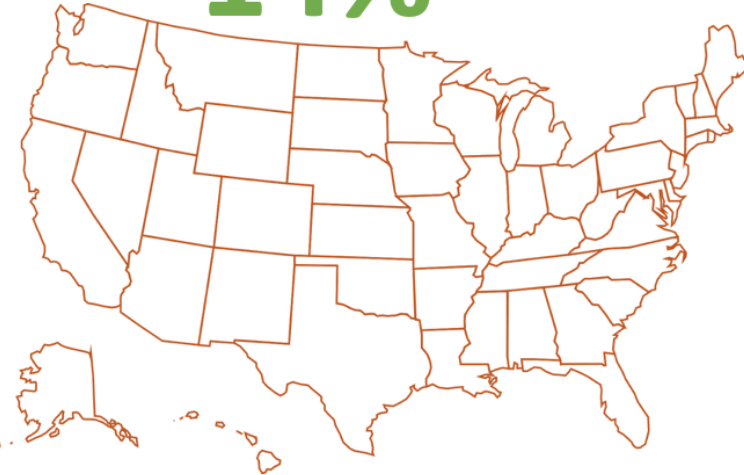


## Engagement of Alcohol & Other Drug Dependence Treatment: Age 18 & Older (Engagement Rate)

DELAWARE  
**16%**



UNITED STATES  
**14%**



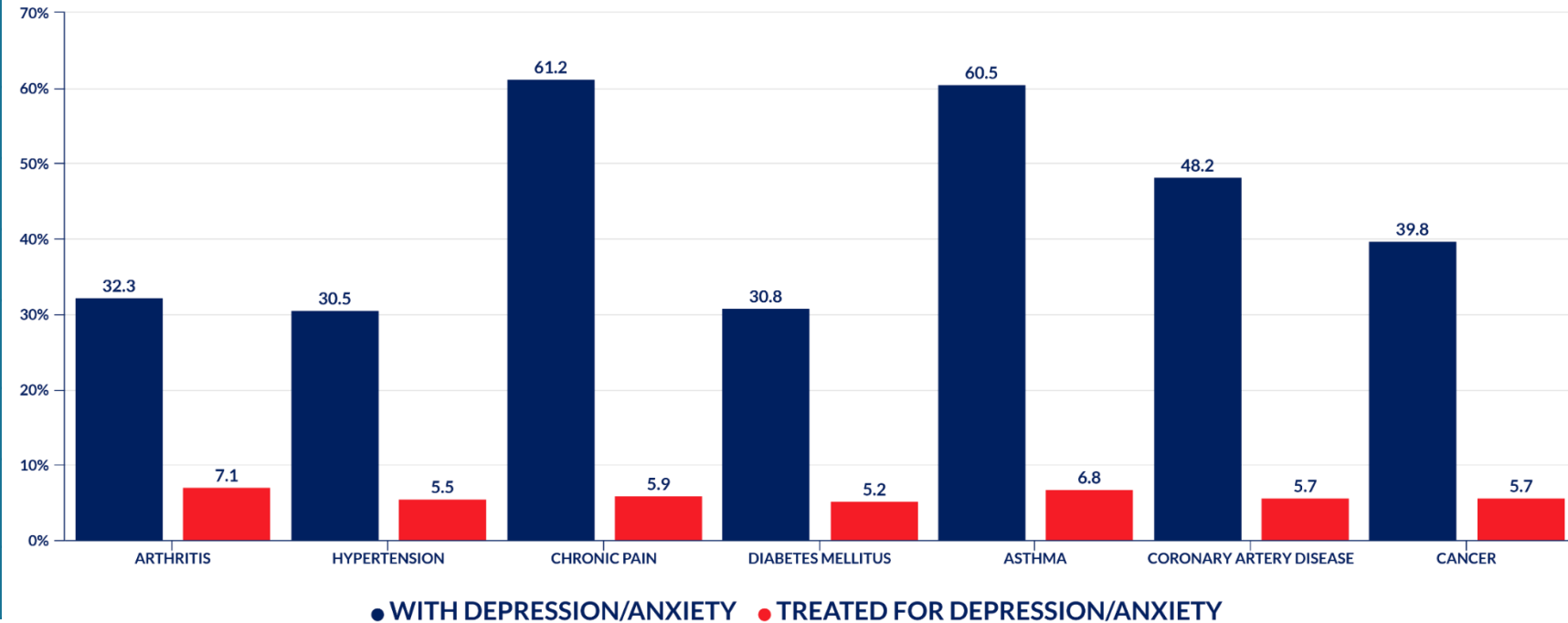
*Source: CMS Adult  
Core Set for  
Medicaid, 2016*



# STARTING SOONER BEHAVIORAL HEALTH & CHRONIC DISEASE



Chronic Medical Condition	% With Depression / Anxiety	% Treated For Depression / Anxiety
Arthritis	32.3%	7.1%
Hypertension	30.5%	5.5%
Chronic Pain	61.2%	5.9%
Diabetes Mellitus	30.8%	5.2%
Asthma	60.5%	6.8%
Coronary Artery Disease	48.2%	5.7%
Cancer	39.8%	5.7%



**SOURCE:** National Council for Behavioral Health and The American Hospital Association (2019).







# DELAWARE'S TREATMENT SYSTEM

SUBSTANCE USE TREATMENT AND RECOVERY TRANSFORMATION (START) INITIATIVE

DELAWARE TREATMENT AND REFERRAL NETWORK (DTRN)



# BEHAVIORAL HEALTH CONSORTIUM

25 member Consortium creating a streamlined approach to improving Delaware's behavioral health system.

The Consortium, through public meetings and focus groups, work with the local community to identify the most pressing issues facing the State in the behavioral health arena.



# THREE -YEAR ACTION PLAN

- Access and Treatment
- Changing Perceptions and Stigma
- Corrections and Law Enforcement
- Data and Policy
- Education and Prevention
- Family and Community Readiness



# THE INDIVIDUAL IS CONSIDERED ABOVE ALL — TREATMENT IS PERSON-CENTERED

## START SYSTEM OF CARE

THE GATEWAY TO CARE HAS MULTIPLE POINTS OF ENTRY



### OVERDOSE SYSTEM OF CARE

Connecting those in crisis due to an overdose with immediate care through:

- Hospitals
- Emergency Medical Services
- Urgent Care
- Police Officers
- Department of Correction
- Recovery Program
- Family
- Doctor
- Self

24/7 PEER SUPPORT IS THERE FROM THE BEGINNING



LEVEL-OF-CARE ASSESSMENT AND PERSONALIZED TREATMENT REFERRAL HAPPENS INSTANTLY



TREATMENT CAN TAKE MANY FORMS

- Acute Care
- Subacute Care
- Ongoing Chronic Care

SOCIAL SERVICES MEET OTHER LIFE NEEDS



GOAL SETTING • HOUSING • TRANSPORTATION • EMPLOYMENT • ACTIVITIES FOR DAILY LIVING

POST-TREATMENT SCREENING LEADS TO COMMUNITY SERVICES REFERRAL



REENTRY TO COMMUNITY, WITH ONGOING CARE

RESULTING IN THE BEST LIFE POSSIBLE



# START & DTRN



## START

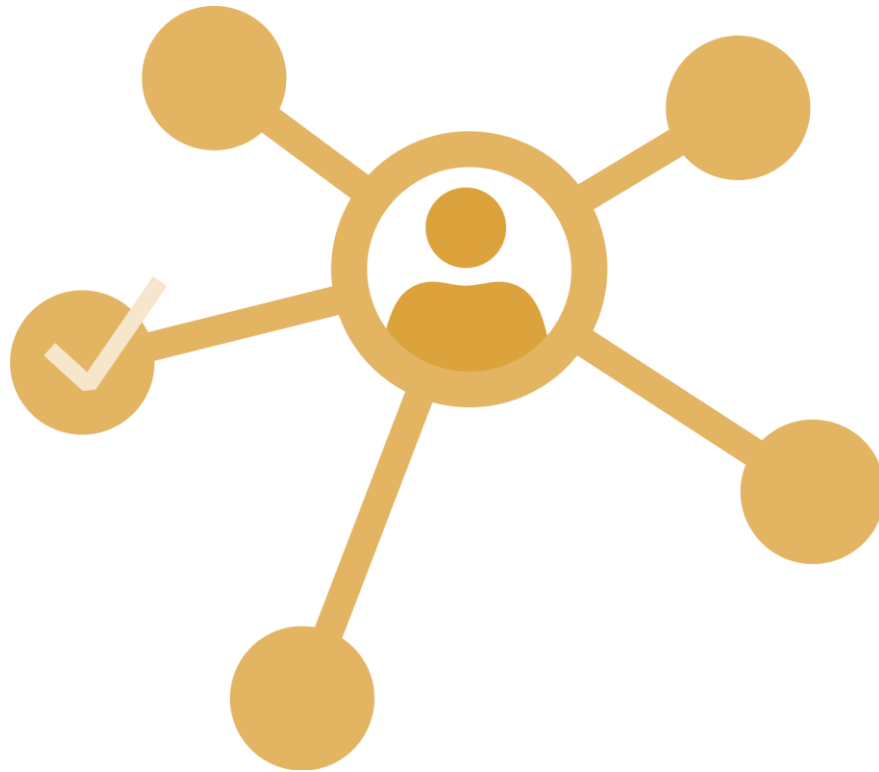
- Substance Use Treatment and Recovery Transformation (START) Initiative
- START is the recovery pathway

## DTRN

- Delaware Treatment and Referral Network (DTRN)
- DTRN is the software program that connects patients who enter START for treatment.



# DELAWARE TREATMENT AND REFERRAL NETWORK



## INSTANTLY CONNECTING PEOPLE IN CRISIS WITH THE CARE THEY NEED

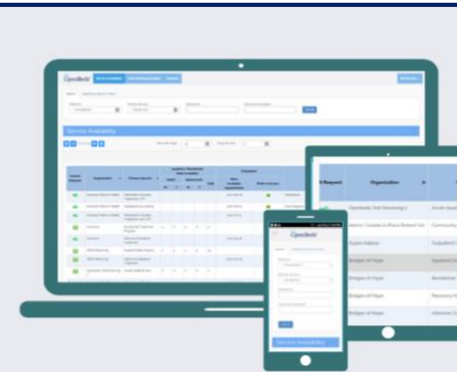
- A transparent, efficient, and effective flow between primary and emergent care and behavioral health specialty care
- Matches a patient with services and resources
- Improves transitions of care
- Improves and enhances patient and care provider experience
- Gives patients a better chance to live the best life possible



# ACCOMPLISHMENTS TO DATE



- 47 Organizations Live
  - Behavioral Health
  - Out of State
  - Primary Care
  - Pediatric
- Enhancements to make more efficient
  - Close the Loop
  - ASAM tool
  - Highlights for START Participants
  - Uploading Forms



**DTRN IS ACCESSIBLE ON  
MULTIPLE PLATFORMS.  
ONLY AN INTERNET  
CONNECTION AND A  
WEB BROWSER ARE  
NEEDED TO ACCESS  
THIS SECURE SERVICE.**



**Instantly connect patients in  
crisis with the care they need.**

**Delaware Treatment and Referral Network (DTRN)  
is a statewide, comprehensive referral network for  
behavioral health and substance use disorder treatment.**

Health care providers in Delaware have partnered to support members of our community's need for behavior and substance use disorder health services. Using a digital referral system to expedite placement for patients, providers can eliminate the need for manual processes while seeking appropriate care. DTRN's automated system provides an online inventory of services and wait times in order to meet patients' needs 24 hours a day, seven days a week. Once available services are identified, referring care teams can electronically transfer patients to providers around the state that match the level of care needed. DTRN's electronic referral process also allows the sending and receiving care teams to coordinate supporting services such as transportation, housing, and employment, making the patients' transition as smooth as possible.

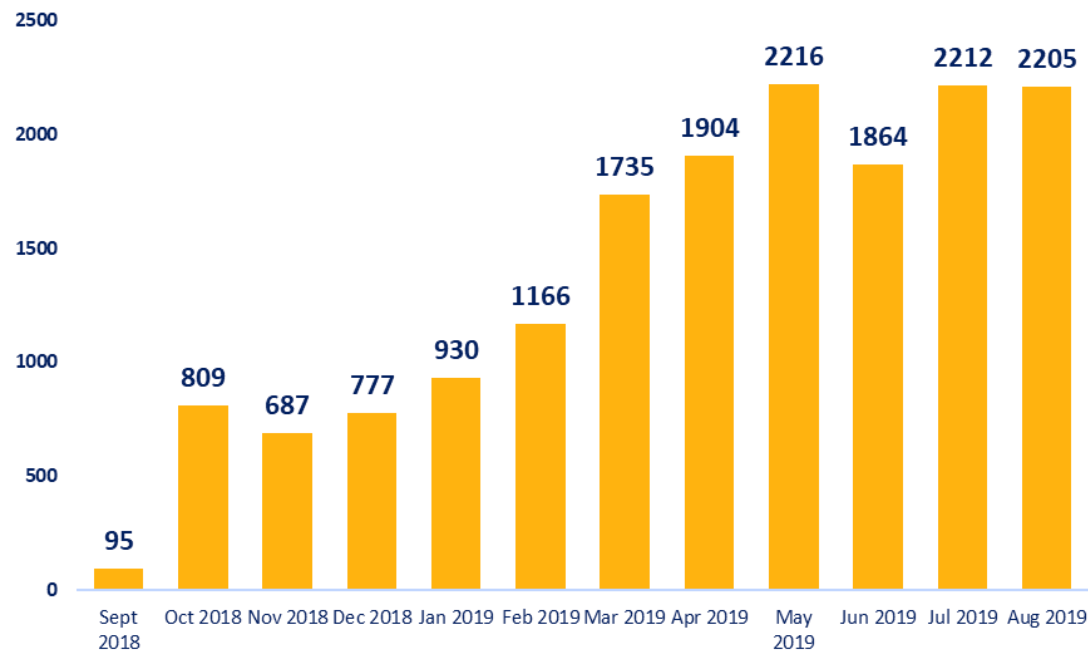


# UTILIZATION: TOTAL REFERRALS

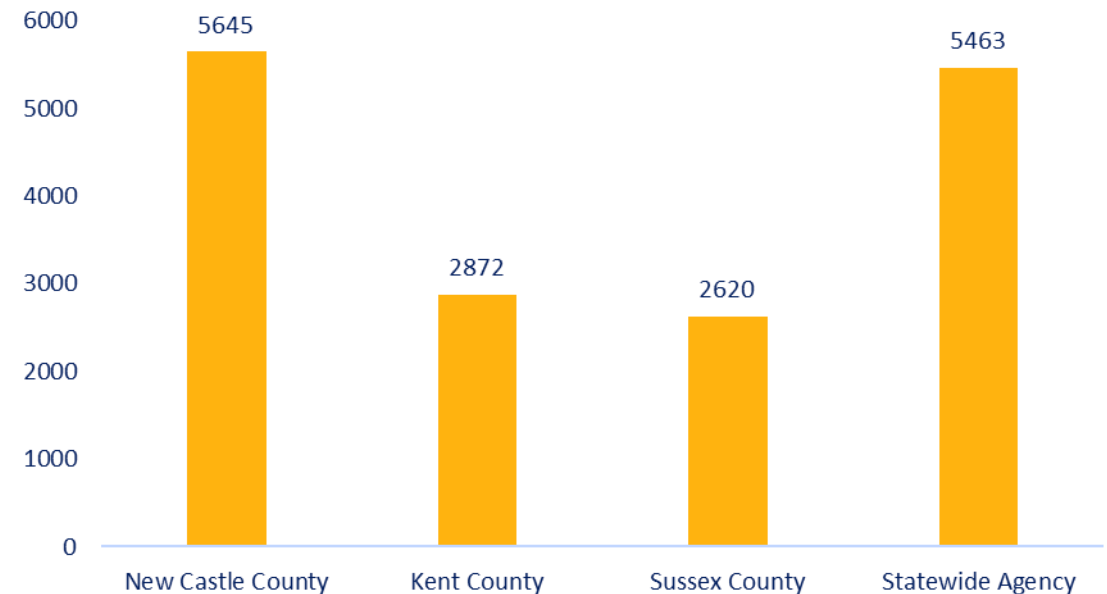


September 2018 through August 2019  
16,600 Referrals

### Total Referrals by Month

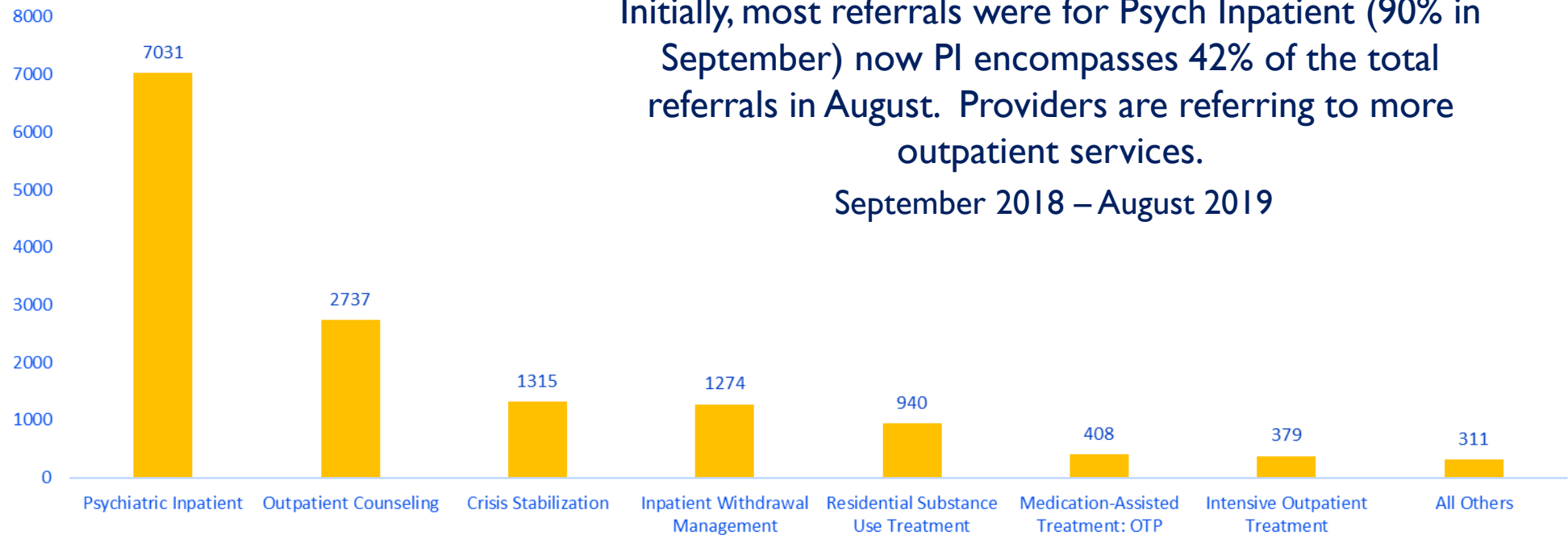


### Total Referrals by County and Statewide Agencies

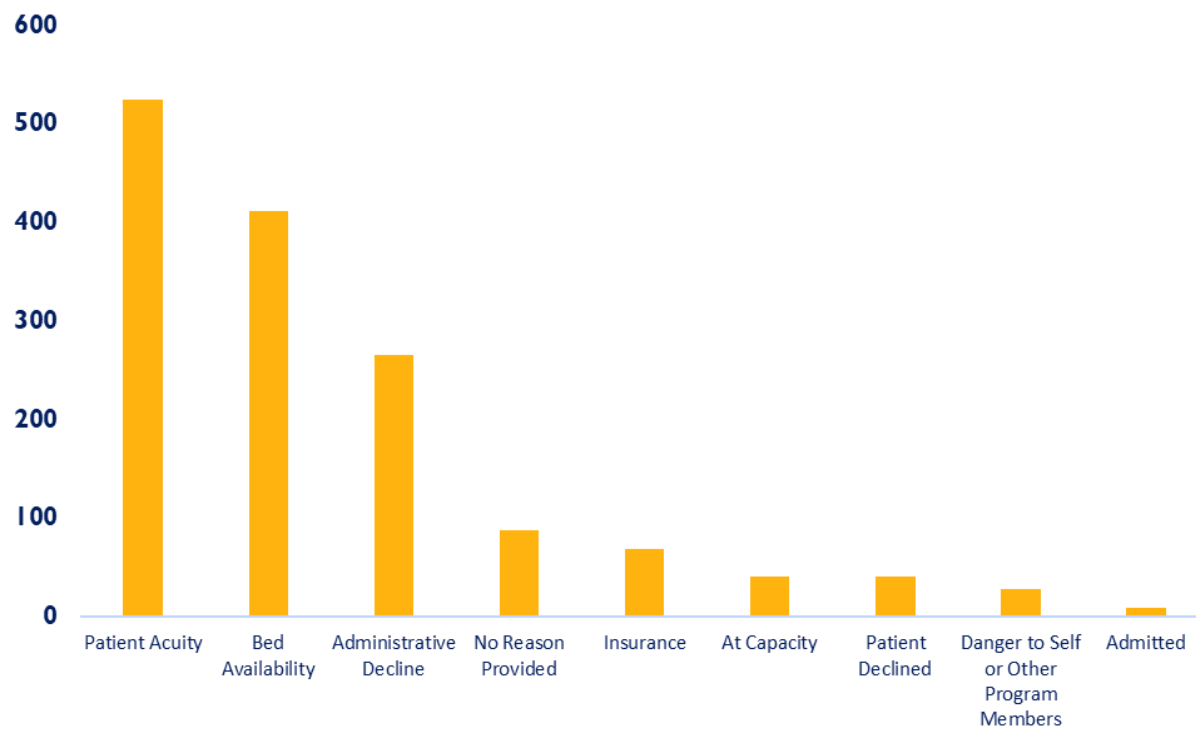




# UTILIZATION: BY SERVICE



# UTILIZATION: DECLINES



- Most declines were due to Patient Acuity “not admitted due to pre-existing medical conditions”.
- The largest decline within bed availability was for “providers not able to treat more acute patients”.
- There were 99 declines related to age/sex.
- Top declines by County:
  - New Castle: Patient acuity--Due to medical condition
  - Kent: Bed availability--No acute beds available
  - Sussex: Patient acuity--Due to medical condition





**OpenBeds®**

**Technology driving DTRN  
Founded by Physician  
HIPAA Compliant & Cloud Based**

DELAWARE TREATMENT AND REFERRAL NETWORK



# DTRN REFERRAL DASHBOARD



OpenBeds® **Service Availability** Update Service Availability Referral Request Status Analytics DC2Rec3b1 User ▾

Search  Additional Search Criteria

Distance:  Primary Service:  Substance:  Payments Accepted:

My Profile  
 Change Password  
 Manage Users  
 Service Administration  
 Help  
 Sign out

### Service Availability

Submit Request	Organization ▾	Primary Service ▾	Inpatient/Residential Beds Available					Outpatient		Comments	Contact and Service Info	Last Updated ▾
			Adult		Adolescent		Total	Next Available Appointment	Walk-in Access			
			M	F	M	F						
	DC2Rec	Inpatient Detoxification-1	10	10	10	10	40					07:40 02-08-2018
	DC2Rec	Inpatient Detoxification-2	10	1	11	0	22					07:40 02-08-2018
	DC2Rec	Intensive Outpatient Treatment						12-19-2017				02:10 02-07-2018
	DC2Rec	Residential Treatment Program	0	0	0	0	0					07:40 02-08-2018
	DC2Rec	Inpatient Detoxification-3	0	0	0	0	0					07:40 02-08-2018
	BC2Rec	Inpatient Detoxification	0	0	0	0	0					08:34 01-31-2018



# DTRN: CLINICAL DECISION SUPPORT



## Global Assessment Tool

Enter Patient Details (Optional)

THIS FORM IS ONLY FOR OPENBEDS NAVIGATORS



Dimension 1: Acute intoxication and/or Withdrawal Potential

- (0) No signs of withdrawal/intoxication present.
- (1) Mild/moderate intoxication, interferes with daily functioning. Minimal risk of severe withdrawal. No danger to self/others.
- (2) May have severe intoxication but responds to support. Moderate risk of severe withdrawal. No danger to self/others.
- (3) Severe intoxication with imminent risk of danger to self/others. Risk of severe manageable withdrawal.
- (4) Incapacitated. Severe signs and symptoms. Presents danger, e.g., seizures. Continued substance use poses an imminent threat to life.

Help Me Decide

User is walked through scoring the six ASAM Dimensions with "Help Me Decide"

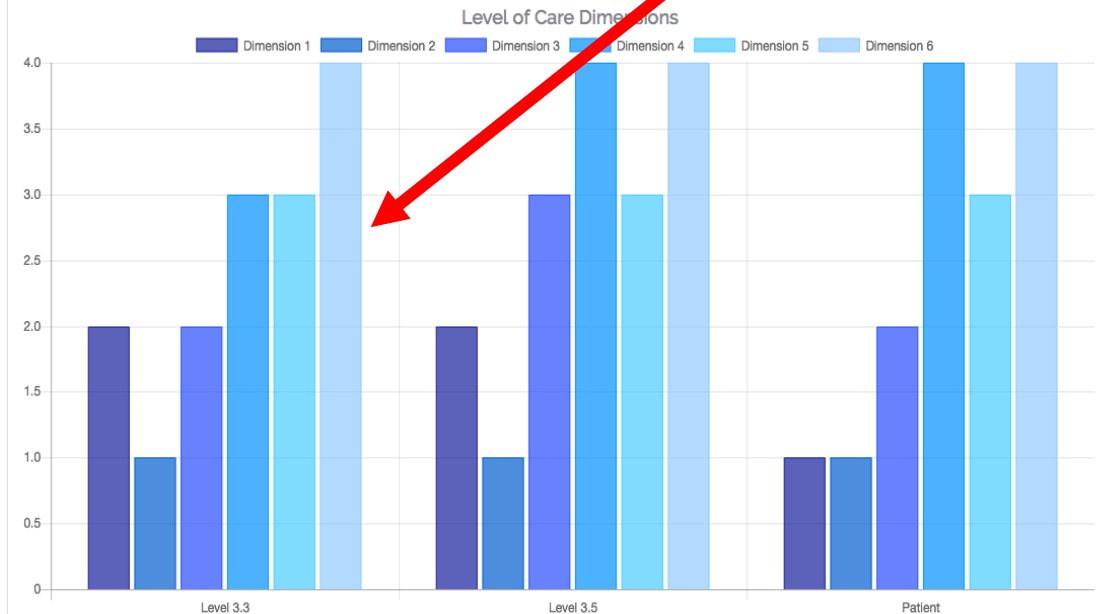
Next

- Output is level of treatment recommendation.
- Patient's profile could lie between two levels.

## Level of Treatment Results

Recommended Level of Care : Level 3.3 - Clinically Managed Population-Specific High-Intensity Residential Services

Alternate Level of Care-1 : Level 3.5 - Clinically Managed High-Intensity Residential Services



# PATIENT FACING PORTAL



OpenBeds® [Login/Join Provider Network](#) [About](#) | [Privacy](#) | [Login / Sign-up](#)

## Find Substance Use Disorder Treatment

Your searches are confidential

Zip Code  Distance  Substances  Treatment Type

[Search](#)

[Education Materials](#) [Self Assessment for Treatment](#)

Production Deployment (Mergin) x OpenBeds - Unit Availability x OpenBeds PFS x

https://pfscarma.openbeds.net/list

OpenBeds® [Search](#) [Login/Join Provider Network](#) [About](#) | [Privacy](#) | [Login / Sign-up](#)

### Substance Use Disorder Treatment Facilities

Use filters to narrow down your search results and find treatment facilities.

58 matches found based on your selection

**Filters** [Clear Filter](#)

Substances

- Alcohol
- Benzodiazepines
- Cannabidiol
- Cocaine
- Dextromethorphan
- Hallucinogens
- Heroin
- Inhalants
- Methamphetamine
- Other Opioids
- PCP
- Stimulants
- Tobacco

Gender And Age

- Adult - Male
- Adult - Female
- Youth (17 and under) - Male
- Youth (17 and under) - Female
- Children 12 and Under

**Appriss Health - Inpatient Withdrawal Management**  
Details  
[More Info](#)

555 Somewhere Lane, NULL, Louisville, KY 40241  
☎ (555) 555-5555 🌐 google.com 📍 465.26 miles from your zip code

🟢 Taking Patients Currently  
Last update on 09-14-2022 [Enquire About Treatment](#)

**DC2Rec - Inpatient Withdrawal Management**  
IWM along with Outpatient  
[More Info](#)

1150 K St NW, Apt 711, Washington, DC 20005  
☎ (555) 555-5555 🌐 DC2Rec.org

🟢 Taking Patients Currently  
Last update on 04-16-2022 [Enquire About Treatment](#)

**DC2Rec - Intensive Outpatient Treatment-1**  
Test PFS IOT Innet DE

DELAWARE TREATMENT AND REFERRAL NETWORK



# START SERVICES ARE MARKED BY A RED ASTERISK



Service Availability

Update Service Availability

Referral Request Status

Analytics

Surendra Rawat

Search Criteria

Additional Search Criteria

Search by Distance

Primary Service i

Substance

Payments Accepted

Search by ZIP

Search

## Service Availability

Submit Request	Organization	Primary Service	Inpatient/Residential Beds Available				Total	Outpatient		Comments	Contact and Service Info	Last Updated
			Adult		Adolescent			Next Available Appointment	Walk-in Access			
			M	F	M	F						
→	Add to 'Unable to Place Patient List'	Recovery Support Services							●	Having trouble referring a client? Submit a form without identifiers. We keep a list to improve care delivery.	<span>i</span>	17:09 05-23-2019
→	Addiction Medical Facility	Medication-Assisted Treatment: OTP					03-27-2019		●	1309 Bridgeville Hwy Seaford, De 19973	<span>i</span>	11:27 03-24-2019
→	Addiction Medical Facility	Intensive Outpatient Treatment							●		<span>i</span>	11:27 03-24-2019
→	* Aquila of Delaware	Intensive Outpatient Treatment-1					08-28-2019		●	At Wilmington- availability for 32 IOP	<span>i</span>	14:05 08-26-2019
→	* Aquila of Delaware	Intensive Outpatient Treatment-2					09-18-2019		●	At Georgetown	<span>i</span>	14:06 08-29-2019
→	Aquila of Delaware - Dover	Intensive Outpatient Treatment					09-05-2019		●		<span>i</span>	10:03 09-03-2019
→	Argo Institute - the Refuge	Intensive Outpatient Treatment							●		<span>i</span>	05:16 08-27-2019
→	Argo Institute - the	Sober Living	6	7	-	-	13				<span>i</span>	05:16 08-27-2019



## Intake forms can be uploaded at Manage Services

Wilmington Delaware (DE) 19805

Contact preference to receive referrals  
E-Mail

Dedicated phone number to receive referrals\*  
(302) 656-2348

Dedicated email to receive referrals\*  
fricketts@brandwinecounseling.org

Substances Treated  
\*All

Special Populations (Choose all that apply)  
\*Adults (18 and older) \*Criminal Justice \*LGBTQ \*Pregnant Specialty

Gender and Age Focus\*  
\*Adult - Male \*Adult - Female

Service Details\*  
Wilmington location

Check if Service has walk-in hours  
Walk-In: Walk-in during following hours

Day	Frequency	From	To
Mon	All day	05:00 AM	07:00 AM
Tue	All day	From	To
Wed	All day	05:00 AM	07:00 AM
Thu	All day	05:00 AM	07:00 AM
Fri	All day	From	To
Sat	All day	From	To
Sun	All day	From	To

Check if referrals are not taken via OpenBeds  
Enter hours when referrals are taken from OpenBeds

Day	Frequency	From	To
Mon	All day	05:00 AM	13:00 PM
Tue	All day	05:00 AM	13:00 PM
Wed	All day	05:00 AM	13:00 PM
Thu	All day	05:00 AM	13:00 PM
Fri	All day	05:00 AM	13:00 PM
Sat	All day	From	To
Sun	All day	From	To

Providers on site  
\*Physician on site \*Psychiatrist on site

Difficult to Place Medical and Psychiatric Conditions

Payments Accepted  
\*All

Intake form  
Click to upload intake form

## Intake forms can then be downloaded from Service info

Contact

Website	<a href="http://DC2Rec.org">http://DC2Rec.org</a>
Primary Service	Partial Hospitalization
Service Address	1021 NY unit 1, Washington, DC, 20004
Service e-mail	randhir.carmatec+dc2rec3b1@gmail.com
Service Phone	(111) 111-1111
Additional Services	START
Substances Treated	Alcohol, Cocaine, PCP, Hallucinogens, Inhalants, Stimulants, Heroin, Other Opioids, Cannabis, Methamphetamine, Benzodiazepines, Tobacco, Dextromethorphan
Gender and Age Focus	Adult - Male, Adult - Female, Youth (17 and under) - Male, Youth (17 and under) - Female
Intake form	<a href="#">Sample document.docx</a>

Service Details  
test

Close





# DIGITAL INITIATIVES



- DHIN Data Exchange – Bi-directional health summary exchange between the state exchange (DHIN) and DSAMH (all behavioral health providers)
- Behavioral Health Smart Alerts – Clinical alerts to providers when their patients are admitted/discharged for BH care throughout the state
- Electronic Medical Record (Cerner) – EMR for the DSAMH Division which includes 2 hospitals, Mental Health services, Crisis and Bridge Treatment.
- Care Coordination Platform- system to facilitate the appropriate delivery of care across multiple agencies caring for clients with Behavioral Health disorders. The case management application will help organizations identify, track, and better assist clients by removing the barriers of care around social, economic, and behavioral determinants of health.
- Delaware Treatment and Electronic Referral Network – Automated coordination of Substance Abuse and Mental Health referral messaging throughout the state
- Payer Project – Integrate Medicaid payment systems in EMR, revenue cycle management, care coordination software, patient tracking and care management across organizations.



# THE INDIVIDUAL IS CONSIDERED ABOVE ALL — TREATMENT IS PERSON-CENTERED

## START SYSTEM OF CARE

THE GATEWAY TO CARE HAS MULTIPLE POINTS OF ENTRY



### OVERDOSE SYSTEM OF CARE

Connecting those in crisis due to an overdose with immediate care through:

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- Emergency Medical Services
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- Police Officers
- Department of Correction
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- Family
- Doctor
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24/7 PEER SUPPORT IS THERE FROM THE BEGINNING



LEVEL-OF-CARE ASSESSMENT AND PERSONALIZED TREATMENT REFERRAL HAPPENS INSTANTLY



TREATMENT CAN TAKE MANY FORMS

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SOCIAL SERVICES MEET OTHER LIFE NEEDS



GOAL SETTING • HOUSING • TRANSPORTATION • EMPLOYMENT • ACTIVITIES FOR DAILY LIVING

POST-TREATMENT SCREENING LEADS TO COMMUNITY SERVICES REFERRAL

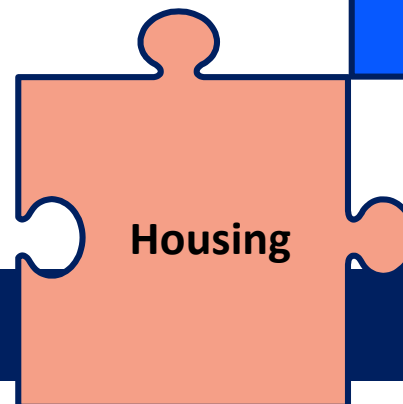
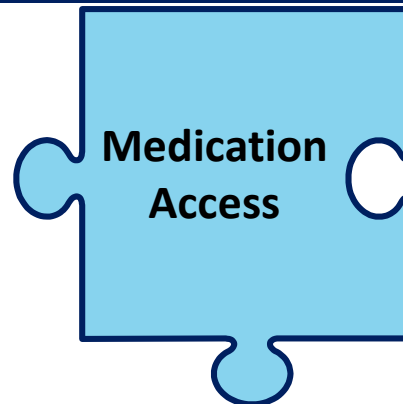
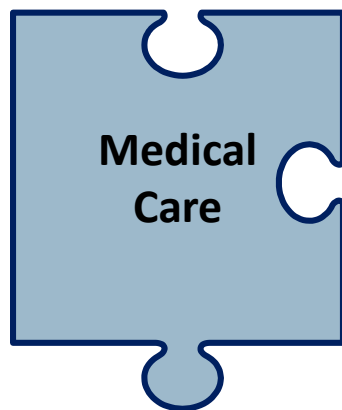


REENTRY TO COMMUNITY, WITH ONGOING CARE

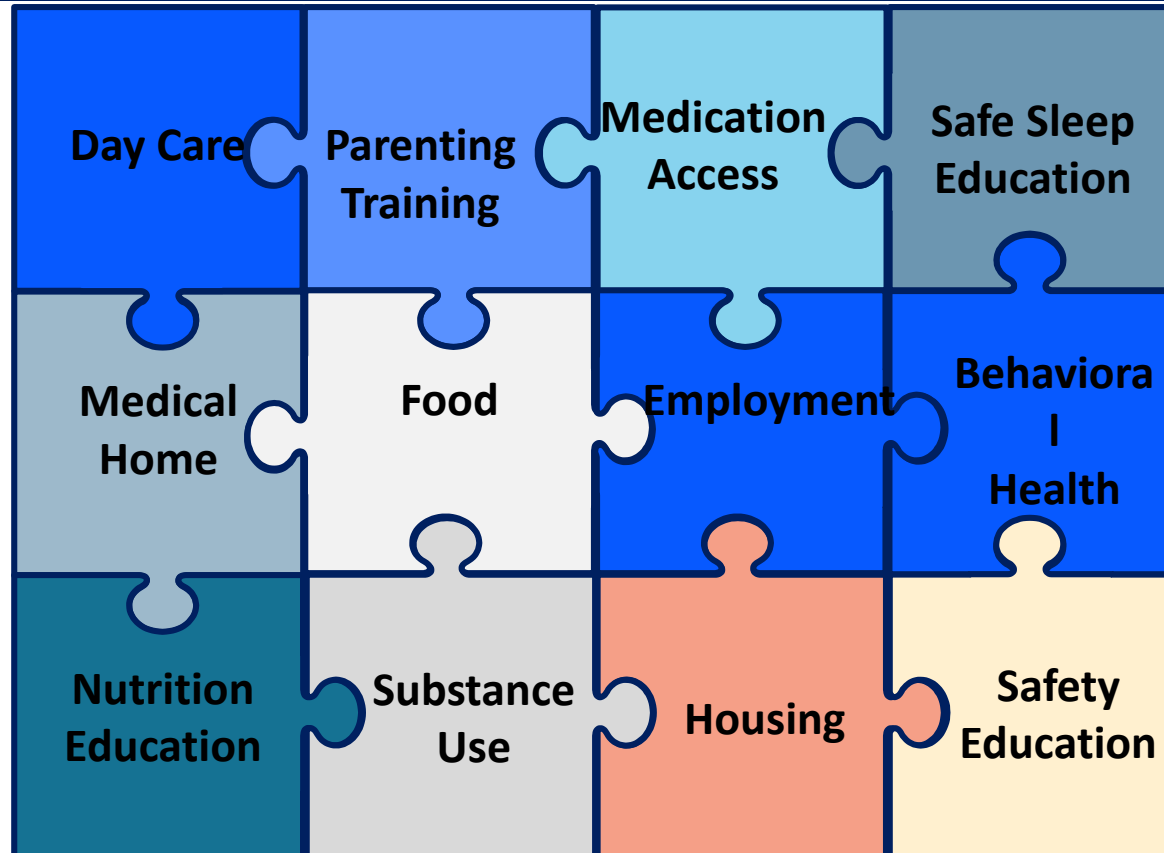
RESULTING IN THE BEST LIFE POSSIBLE



# FRAGMENTED APPROACH



# WHOLE PERSON CARE COORDINATION



# COMMUNITY CARE COORDINATION



- Find those at greatest risk
- Engage & identify individually modifiable risk factors
- Confirm that “packages of intervention” are delivered and risk factors are addressed



## Client Needs Assessment Form

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Visit Location: \_\_\_\_\_

What could you use help with today? (Check all that apply)

Check here if you don't need help. \_\_\_

Household Lead  Yes  No

FAMILY – Household lead completes this section	INDIVIDUAL
<i>(You are the main contact for your household or you live alone)</i>	<b>Help with everyday activities</b> (bathing, getting dressed, making meals)
<b>Housing</b>	<b>Help with completing forms</b> (reading and understanding them, filling out)
Not safe (not living in a safe place)	<b>Clothing and personal items</b>
Not stable (need a permanent place to live)	<b>Financial Coaching</b> (budgeting, taxes, debt collectors, home ownership)
<b>Food</b>	<b>Legal help</b> (housing, identification paperwork, parole status, citizenship)
WIC/SNAP/Food Stamps	<b>Safety</b> (feeling safe in my home, neighborhood, work)
Not enough food	<b>Employment</b> (getting a job, finding a better job)
Hard to get healthy food (overweight or underweight)	<b>Education</b> (completing school, GED, training program, college)
<b>Utilities</b>	<b>Sad, depressed, angry, stressed, worried, grieving</b> (behavioral health issues)
Don't have	<b>Substance use</b> (evaluation or treatment, alcohol, tobacco, other drugs)
Will be turned off	<b>Behavioral problems with child</b> (anger, acting out, temper tantrums)
<b>Financial</b>	<b>Child(ren)s connection to family member</b> (mom, dad, sibling, grandparent)
Need help with applying for SSI/SSDI/TANF	<b>Getting along with others in my home</b> (fighting or abuse of any kind)
Can't pay medical bills	<b>Health insurance</b>
Can't pay bills	<b>Healthcare</b> (family doctor, specialist)
<b>No Phone</b>	<b>Medical home</b> (place to go for regular health care)
<b>No Internet</b>	<b>Dental care</b> (teeth or gums)
<b>Transportation</b>	<b>Vision</b> (eye sight, glasses)
No transportation	<b>Medication problems</b> (taking medications, getting medications, side effects)
Car needs repairs	<b>Chronic disease</b> (diabetes, heart disease, cancer, asthma)
<b>Day Care</b> (Child Care/Elder Care)	<b>Pregnancy</b>
<b>Respite Care</b>	<b>Family planning</b> (birth control, family spacing)
<b>Household items</b>	<b>Development concerns about child</b> (delay with walking, talking)
<b>Guardianship/Custody</b>	<b>Immunizations</b> (shots)

Are any of your issues urgent? \_\_\_ Yes \_\_\_ No



# Client Needs Assessment Form

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Not safe (not living in a safe place)	<b>Help with completing forms</b> (real estate, insurance, etc.)
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Will be turned off	<b>Substance use</b> (evaluation or treatment, alcohol, tobacco, other drugs)
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<b>Household items</b>	<b>Family planning</b> (birth control, family spacing)
<b>Guardianship/Custody</b>	<b>Development concerns about child</b> (delay with walking, talking)
	<b>Immunizations</b> (shots)

If single – complete both family and individual columns. Household lead is used when working with several members in a household.

Are any of your issues urgent? \_\_\_\_ Yes \_\_\_\_ No



Strengths I bring:

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Other things I want to talk about today:

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Care coordinator's notes:

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Next Home Visit Date: \_\_\_\_\_

Goals for Next Home Visit:

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\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Care Coordinator's Signature





# AREAS OF FOCUS



- Department of Corrections
- Hospitals
- Law Enforcement
- Education system
- Youth in Transition
- Custodial Parents and Pregnant Women
  - Children
- Aging
- Social Service Agencies
- Medicaid



# THE INDIVIDUAL IS CONSIDERED ABOVE ALL — TREATMENT IS PERSON-CENTERED

## START SYSTEM OF CARE

THE GATEWAY TO CARE HAS MULTIPLE POINTS OF ENTRY



### OVERDOSE SYSTEM OF CARE

Connecting those in crisis due to an overdose with immediate care through:

- Hospitals
- Emergency Medical Services
- Urgent Care
- Police Officers
- Department of Correction
- Recovery Program
- Family
- Doctor
- Self

24/7 PEER SUPPORT IS THERE FROM THE BEGINNING



LEVEL-OF-CARE ASSESSMENT AND PERSONALIZED TREATMENT REFERRAL HAPPENS INSTANTLY



TREATMENT CAN TAKE MANY FORMS

- Acute Care
- Subacute Care
- Ongoing Chronic Care

SOCIAL SERVICES MEET OTHER LIFE NEEDS



GOAL SETTING • HOUSING • TRANSPORTATION • EMPLOYMENT • ACTIVITIES FOR DAILY LIVING

POST-TREATMENT SCREENING LEADS TO COMMUNITY SERVICES REFERRAL



REENTRY TO COMMUNITY, WITH ONGOING CARE

RESULTING IN THE BEST LIFE POSSIBLE





# Rating System for Addiction Treatment Programs

**SHATTER  
PROOF™**  
STRONGER THAN ADDICTION

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STRONGER THAN ADDICTION

**Provide reliable and transparent information on the quality of addiction treatment programs to:**

Incentivize high-quality care

Inform treatment selection

Improve quality and align with Principles

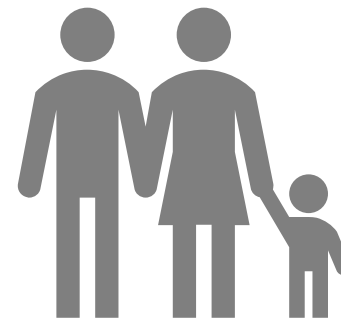
Identify high-quality care



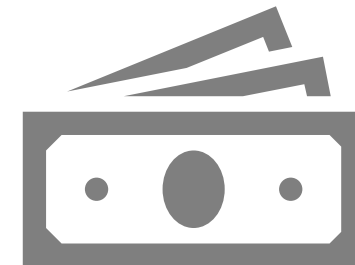
**States**



**Providers**



**The Public**



**Payers**

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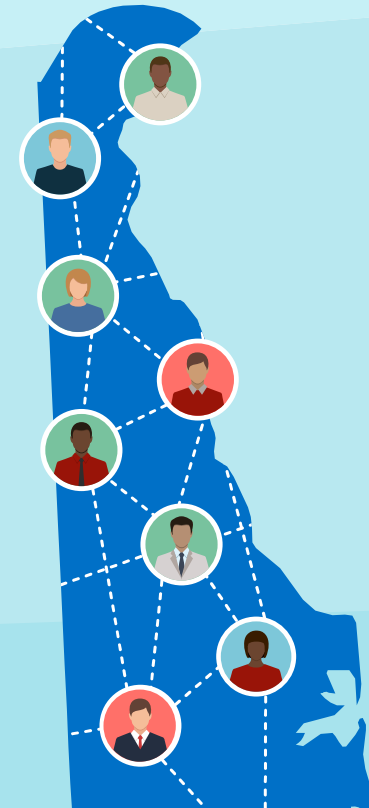


# RE-ENTRY TO COMMUNITY WITH ONGOING CARE



**CARE CONTINUES AS THE PATIENT RE-ENTERS LIFE IN THE  
COMMUNITY, TO HELP THE PATIENT STAY IN RECOVERY**

- Referral to mental health and substance use disorder community services
- Continuing Medication-Assisted Treatment (MAT), with or without counseling
- Peers stay engaged throughout



# DELAWARE: ENGAGEMENT AND ONGOING SUPPORT



## INTEGRATION OF PRIMARY AND BEHAVIORAL HEALTH CARE

### Goals and Objectives

- Promote full integration and collaboration in clinical practice between primary and behavioral healthcare
- Support the improvement of integrated care models for primary care and behavioral health care to improve the overall wellness and physical health status of adults with a serious mental illness (SMI) or children with a serious emotional disturbance (SED)
- Promote and offer integrated care services related to screening, diagnosis, prevention, and treatment of mental and substance use disorders, and co-occurring physical health conditions and chronic diseases





**Partnership for Drug-Free Kids and the Delaware Department of Health and Social Services** now offer evidence-based resources for Delaware families!

- Personalized support to families
- Help in creating an action plan to help a child work toward recovery
- Website, phone number and digital platforms with specific resources available in Delaware



*DELAWARE HEALTH AND SOCIAL SERVICES*  

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*Division of Substance Abuse and Mental Health*

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# HELPLINE



- This dedicated Helpline for Delaware families gives a place for parents and caregivers to connect with Parent Support Specialists by phone, text or e-mail.
- The Partnership for Drug-Free Kids masters-level specialists will listen to families over the phone or chat with them digitally to help them develop an action plan, and make them feel supported through their difficult journey with a loved one's substance use.
- The specialists are trained in Delaware-specific resources so that they can direct families towards help in their region.



# PARENT COACHING



- After speaking a Helpline specialist, a parent can be offered the option of peer support with another Delaware parent who has also struggled with a loved one's substance use
- By speaking with someone who has “been there”, parents can learn how to stay connected to their loved one, and get the support and encouragement they need and deserve
- Parent coaching takes place over the phone for about 5 phone calls, where parents can feel supported by someone who truly understands what they're going through, because they have been on this journey as well
- The parent coaches from the Partnership for Drug-Free Kids are specially trained to be able to help and listen to another parent affected by a loved one's substance use



# ONE-ON-ONE SUPPORT FOR YOUR FAMILY



CALL  
1-855-DRUGFREE

**Speak with a Family Specialist**

M-F: 9am-12am ET  
Weekends: 12pm-5pm ET



TEXT  
HopeDE to 55753

**Text a Family Specialist**

Receive a response  
within 24-48 hours



VISIT  
[drugfree.org/delaware](http://drugfree.org/delaware)

**Connect via email  
with our Family Specialists**

**Get Delaware-specific resources**

6/17/2019



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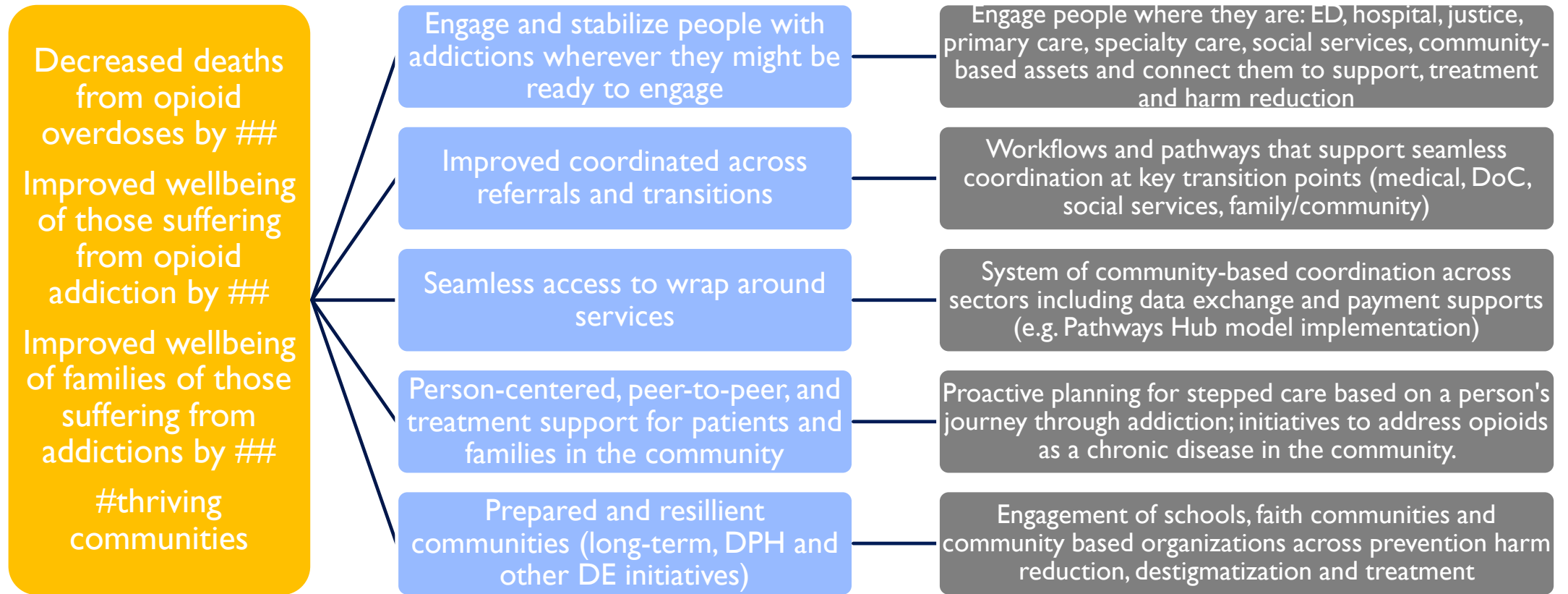


REENTRY TO COMMUNITY, WITH ONGOING CARE

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# DELAWARE START DRIVER DIAGRAM



# Well-being in the Nation Measures



*Explore data about every community in the United States.*



Well-being of  
People



Well-being of  
Places



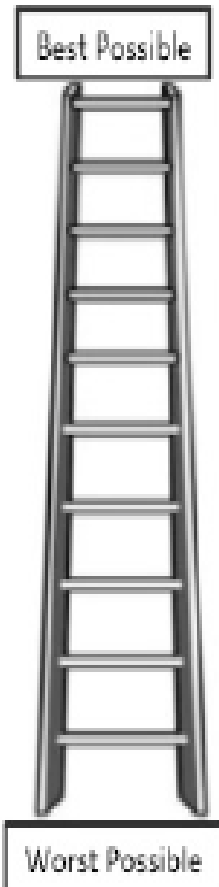
Equity



# PEOPLE REPORTED WELL-BEING



## Common Measures for Adult Well-being



1. Please imagine a ladder with steps numbered from zero at the bottom to ten at the top. The top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you.

Indicate where on the ladder you feel you personally stand right now.

0 1 2 3 4 5 6 7 8 9 10

2. On which step do you think you will stand about five years from now?

0 1 2 3 4 5 6 7 8 9 10

3. Now imagine the top of the ladder represents the best possible financial situation for you, and the bottom of the ladder represents the worst possible financial situation for you. Please indicate where on the ladder you stand right now.

0 1 2 3 4 5 6 7 8 9 10

% people thriving  
% people suffering  
% people with hope

Age  
Sex  
Race/Ethnicity  
Education  
Zip code  
Veteran status

- Two simple questions
- Administered 2.7 million times, highly validated
- Relate to morbidity, mortality, cost
- Useful for risk stratification
- Work across sectors



# WELL-BEING AND IMPROVED PERCEPTION OF LIFE



## Adult Well-Being Assessment

For the first three questions please imagine a ladder with steps numbered from zero at the bottom to ten at the top. The top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you.

1. Indicate where on the ladder you feel you personally stand right now.

0 1 2 3 4 5 6 7 8 9 10

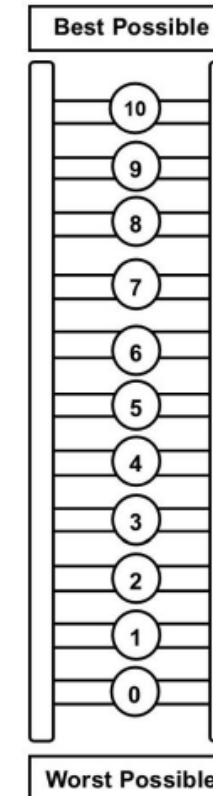
2. On which step do you think you will stand about five years from now?

0 1 2 3 4 5 6 7 8 9 10

3. Now imagine the top of the ladder represents the best possible financial situation for you, and the bottom of the ladder represents the worst possible financial situation for you. Please indicate where on the ladder you stand right now.

0 1 2 3 4 5 6 7 8 9 10

4. In general, how would you rate your physical health?





# DELAWARE PERCEPTION OF WELLBEING



## PEOPLE'S PERCEPTION OF THEIR WELL-BEING

How many Delaware residents are thriving? How many are struggling or suffering?

Thriving (2017)



Struggling (2017)



Suffering (2017)





### Cantril's Ladder at Present: Mean Response (2017)

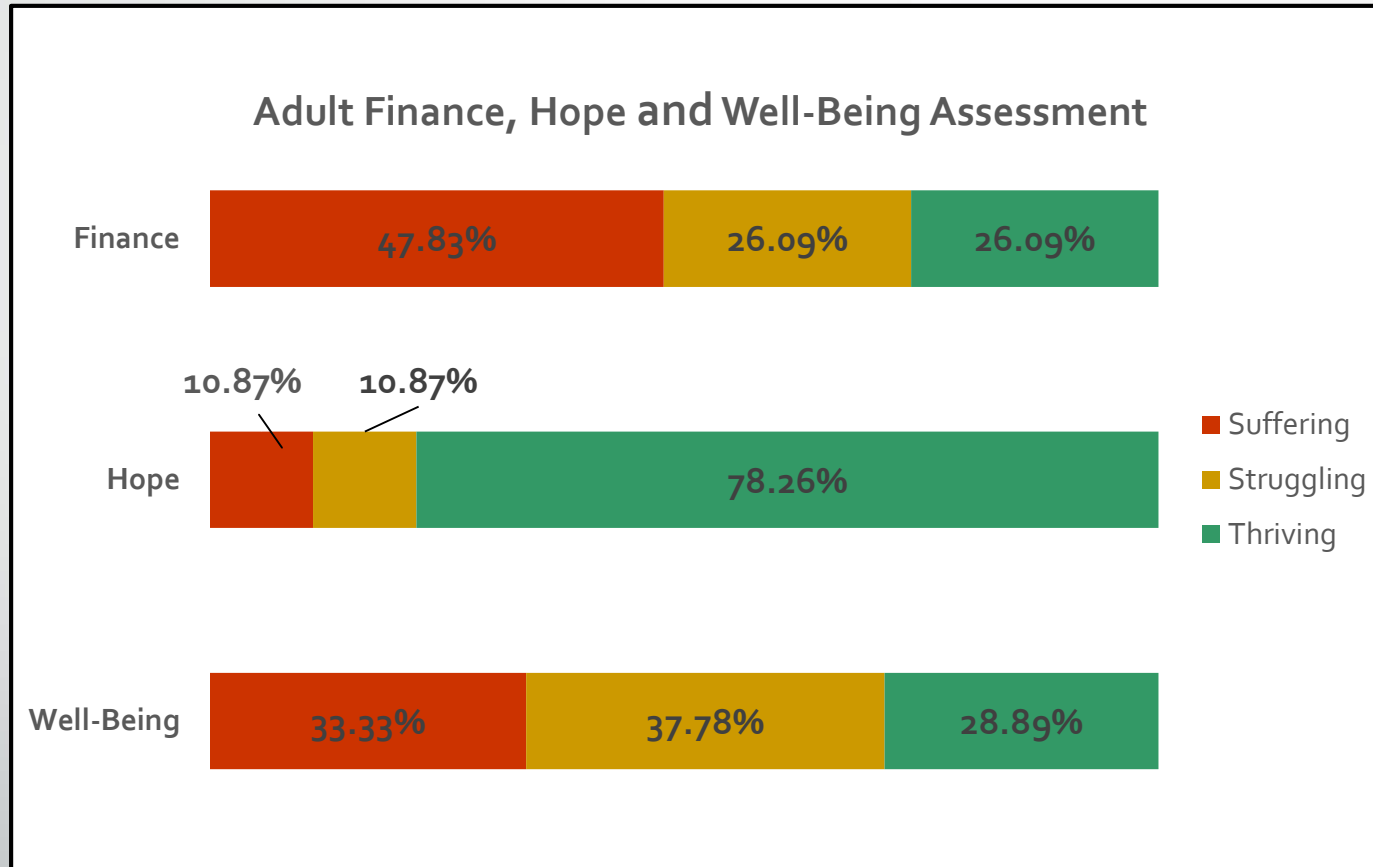


7.18

Cantril's Ladder at Present: Mean Response 2017 Delaware



# START Provider WellBeing Pilot





DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
DIVISION OF SUBSTANCE ABUSE AND MENTAL HEALTH

# QUESTIONS?

