Healthforce Center at UCSF

Mindfulness-Based Medication Assisted Treatment (MB-MAT)

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Project Description

Design and implement an integrated mindfulness approach to Medication Assisted Treatment (MAT) for adults with opioid dependence.

Problem Statement:

MAT is needed and evidenced based, but there are still high relapse rates.

Discovery: 80+ interviews (medical, mental health, and CAM providers, organizational leadership, pharmacists, patients) leading to:

Early: Jan-May 2017: Vision and Need Established (40+ interviews)

- MAT is best approach to opioid addiction. Access is limited in Santa Cruz.
- Mindfulness adds value to MAT by increasing client's readiness to change and sustaining engagement.

Middle: June 2017-February 2018: Funding, Structure, Staffing (30+ int)

- Federal Hub & Spoke grant provides opportunity for creation of MB-MAT and inspires/engages Encompass leadership.
- Drug MediCal Organized Delivery System (DMC ODS: MediCal waiver for Substance Used Disorder Treatment) promotes integrated model, local communication, collaboration and sustainability.
- High interest of local alternative practitioners to contribute yoga/movement/acupuncture practices for MB-MAT program.
- Parallels discovered between mindfulness process and relapse/recovery cycle; both involve being "in the present" whether pleasant or unpleasant.

Late: March-August 2018: Navigating Roadblock (15+ interviews)

- Misinformation from Hub re: needing IMS for outpatient MAT halts clinic after opening day.
- Pivot to IMS (Incidental Medical Services) allows expansion of services to residential settings although IMS, in fact, not needed for outpatient MAT.

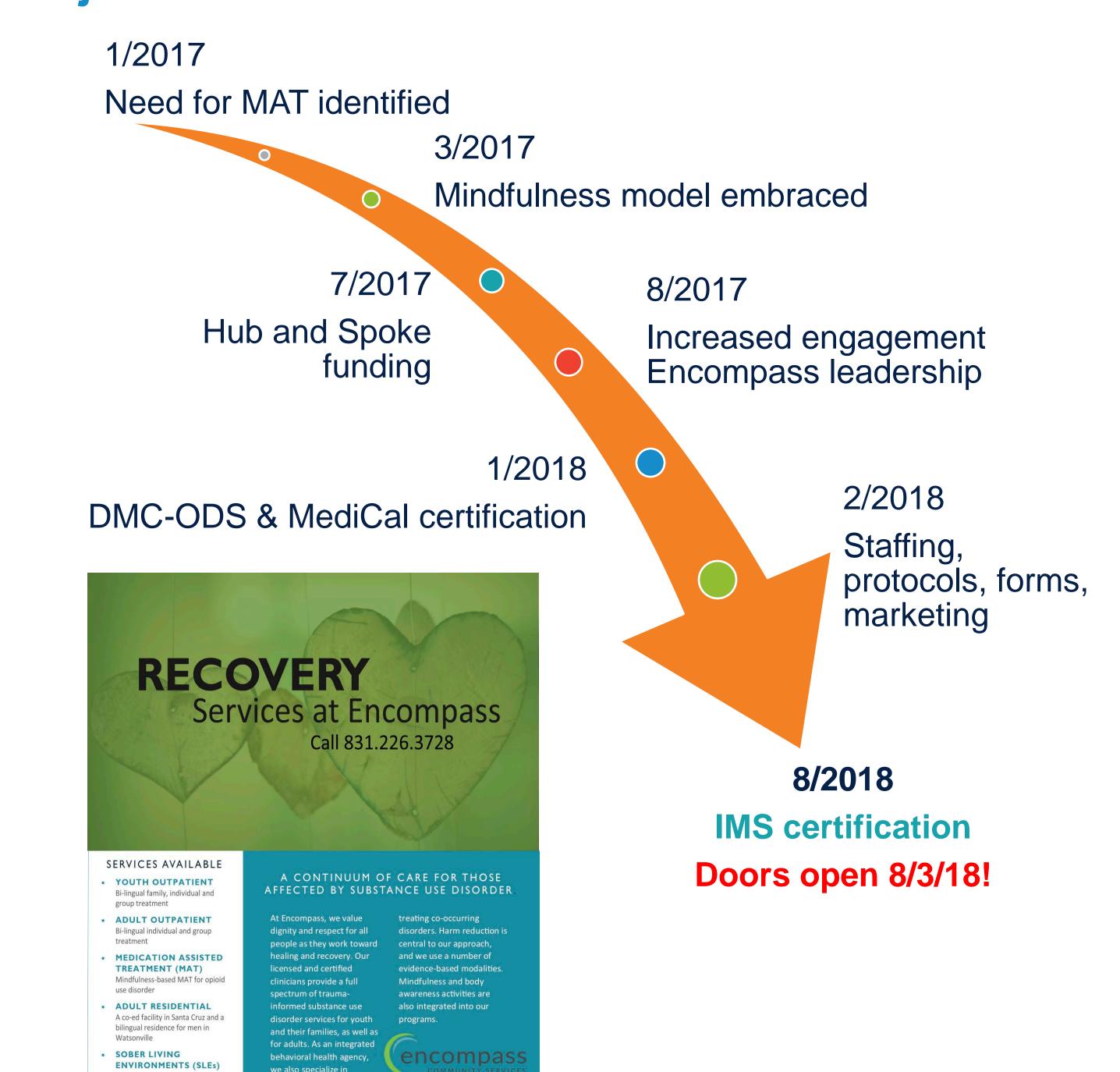
Goal: Increase access to MAT resulting in decreased relapse.

Outcome-oriented Objectives: By August 2019, provide Mindfulness-Based MAT to at least 100 Encompass clients resulting in:

- Increased number of clients initiating MAT (from 0 to 100)
- Hub & Spoke objectives: 90% of clients report reduced drug use; 70% report improved health; 60% improved lifestyle; 60% better community member (from HUB questionnaire, self report at program exit).
- Increase by 25% client satisfaction and decrease by 25% client relapse with addition of mindfulness compared to standard MAT.

Results

Project Timeline:



Lessons Learned

- Patient perspective is central to the MAT mindfulness model.
- Recovery and mindfulness share qualities of forgiveness, compassion, acceptance and equanimity in the face of physical pain and emotional/spiritual suffering.
- Interagency relationship-building leads to funding opportunities and collaborations that help with program model and implementation.
- Leverage existing programs (acupuncture to treat addiction, mindfulness approaches, Yoga for All).
- Identify reliable sources of information on regulatory requirements.
- Agency commitment to mindfulness as a core value kept project integrity in the face of logistical and financial challenges.
- Importance of my own mindfulness practice in manifestation of project.

Next Steps:

- Enroll patients, collect data, track metrics.
- Improve flow and model of care based on rapid improvement cycles.
- Continue collaboration with and learning from other spokes.
- Compare outcomes (satisfaction, recidivism) between standard MAT and Mindfulness-Based MAT.

Mission Model Canvas



Key Activities Identify clients for MB-MAT Hub and Spoke grant; Protocol; Create work-flow, forms; Hire staff; Develop electronic record (Avatar) Drug MediCal certification; Coordina care w other orgs Health Information (medical record) Exchange;

Key Resources Data dashboard

- Financial analytics platform MAT providers: MDs, PAs
- RN, Case Manager Encompass Therapists

Acupuncture Program

 Yoga Program Mindfulness Program Value Propositions Sustained recovery, reduced recidivism, decrease in death

Increased joy/satisfaction for providers with increased clinical effectiveness Bring Encompass to current

treatment standards for SUD/OUD, increased credibility within the community Increase in community partnerships

decrease in overall costs of health care: reduced utilization of ED, reduced inpt admissions, reduced readmissions to residential tx, reduced incarcerations

Buy-in & Support Education and outreach on neuroscience of addiction mindfulness connection and MAT for clients, staff, Administrators Present model to SC Community with neuroscience education re: MAT/Mindfulness

Deployment **Clients:** Education re MB-MAT Providers: Education, work flow Administrators: in-service, staff mgs, connect w other agencies Ongoing outreach and education to clients and community

Beneficiaries Patients: Encompass clients with SUD who are seeking recovery, and would benefit from MAT

Providers: Encompass staff/recovery counselors who are currently providing recovery services for Encompass clients.

Encompass administrative staff; other SC orgs.

Community: Santa Cruz with high rate of opioid related deaths, incarceration, hospitalizations.

Mission Budget/Cost

- Medical Providers 3 x 0.2 FTE/RN 1 FTE
- Case Manager 0.5 FTE/Licensed Behavioral Health 1FTE
- Mindfulness Facilitator (Refuge Recovery or Against the Stream) 0.2 FTE
- Acupuncturist 0.1 FTE Yoga Teacher 0.1 FTE
- Exam Room; Medical Supplies; Administrative costs

Mission Achievement/Impact Factors

- Improvement in Recovery Domains and ASAM Dimensions: 100 clients year 1
- Improved work experience for Encompass Staff
- Improved reputation and credibility of Encompass within SC
- Improved access to MAT/recovery within Santa Cruz Community

