



CKF

ADDICTION TREATMENT
HELP | HOPE | HEALING

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President & CEO



Value of Peer Support in Addiction Health Care

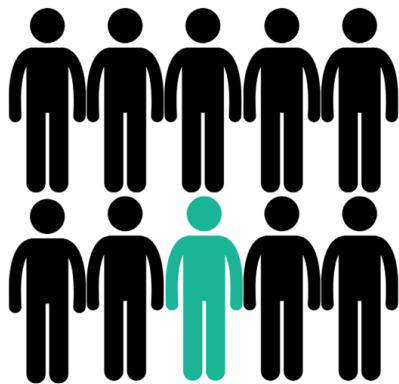


Addiction Treatment Services

- Detoxification
- Residential
- Intensive Outpatient
- Outpatient
- Aftercare

All provided by Addiction Counselors

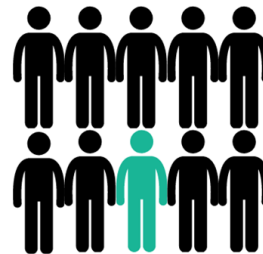
Are we successful?



1 IN 10

AMERICANS AGE 12 YEARS AND OLDER
COULD BE DIAGNOSED WITH A SUBSTANCE
USE DISORDER.

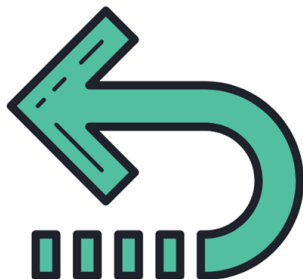
(SOURCE: DRUGFREE.ORG)



1 IN 10

OF THOSE WITH A SUBSTANCE USE DISORDER
ARE RECEIVING ADDICTION TREATMENT
SERVICES.

(SOURCE: DRUGFREE.ORG)



60%

OF THOSE WHO COMPLETE TREATMENT MAY
RETURN AGAIN DUE TO CONTINUED USE.

(SOURCE: DRUGABUSE.GOV)

Problem Areas



CRIMINAL JUSTICE REFERRALS



RESIDENTIAL STAYS



COST OF CARE



TREATMENT GRADUATION



MEASUREMENTS



STIGMA



ADDICTION COUNSELOR SHORTAGE



LACK OF ACCESS TO ADDICTION
HEALTHCARE

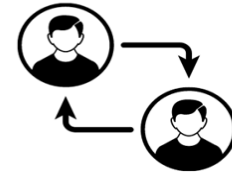
Peer Support



FIRST HAND EXPERIENCE



COMMUNITY RESOURCE/NAVIGATION



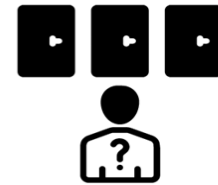
EARLY ENGAGEMENT



ONGOING SUPPORT



FOLLOW-UP CARE



FLEXIBLE MODELS OF CARE



INTEGRATION INTO EXTERNAL SETTINGS

Peer Support

- Systematic reviews have confirmed that, while peer support and clinical practice typically perform fairly equally on traditional outcome measures like rehospitalization and relapse, peer support scores better in areas related to the recovery process.(1) In particular, peer support tends to offer greater levels of self-efficacy, empowerment, and engagement.(2)
 - (1) Bellamy C, Schmutte T, Davidson L. [An update on the growing evidence base for peer support](#). *Mental Health and Social Inclusion*. 2017;21(3):161-167.
 - (2) Farkas M, Boevink W. [Peer delivered services in mental health care in 2018: infancy or adolescence?](#) *World Psychiatry*. 2018;17(2):222-224.

A New Look

- Detoxification- Peer Support lead with Counselor oversight
- Residential- Counselor lead with Peer Support
- Intensive Outpatient- Counselor lead with Peer Support
- Outpatient- Peer Support lead with Counselor oversight
- Follow-up Care (what is Aftercare, Relapse Prevention??) to monitor Chronic Disease Management- Peer Support as long-term follow-up

Let's Start Tomorrow



REIMBURSEMENT BARRIERS

LACK OF RECOGNITION BY PAYERS FOR PEER SERVICES



CRIMINAL JUSTICE IS THE NUMBER 1 REFERRAL SOURCE FOR SUD TREATMENT.



ASSESSMENTS IMPEDE EARLY ENGAGEMENT REIMBURSEMENT



COUNSELOR/LICENSURE REQUIREMENT IMPEDES FOLLOW-UP CARE REIMBURSEMENT

Advance the Model of Care

- “Comfort is a dangerous tranquility”
- Staying the same is not an option. Even if it were, it is not a good option.
- Challenge yourself to find opportunities to engage peers.
- Patients will benefit.
- Track outcomes and prove that it works.

Questions?

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