

FY27 PROGRAM DESCRIPTION

HAMHDS PROGRAM: OFFICE BASED ADDICTION TREATMENT PROGRAM

CARF PROGRAM: OFFICE-BASED OPIOID TREATMENT PROGRAM

PHILOSOPHY OF PROGRAM

Office Based Addiction Treatment (OBAT) is a specialized program serving adults who have a demonstrated need for Medication Assisted Treatment (MAT) to treat substance use disorders. OBAT services can be delivered in the traditional office setting or in the community and can include treatment for behavioral health disorders. The OBAT Interdisciplinary team consists of a Medical Provider, Registered Nurse, Licensed Clinicians and Registered-Certified Peer Recovery Specialists. All services provided are provided in accordance with the Virginia Medicaid ARTS requirements. The program supports individuals who request Harm Reduction or Abstinence Based treatment.

DESCRIPTION OF SERVICES

Individuals enrolled in OBAT receive a Comprehensive Needs Assessment that includes an ASAM assessment. Initial program assessments are completed by the team's medical prescriber, nursing and clinical staff. Outreach from peer specialists is initiated as soon as an individual is assigned to the OBAT program. The team and the individual collaboratively develop a plan of care utilizing the ASAM dimensions as a guide. The OBAT team meets regularly to coordinate care and ensure that the care plan is effectively addressing the needs of the participant. Group and Individual therapy are provided using evidence-based interventions including, Cognitive Behavioral Therapy (CBT), Motivation Enhancement Therapy (MET), Behavioral Activation (BA), Eye Movement Desensitization and Reprocessing (EMDR). Referrals are made to more specialized treatment as needed. OBAT services can also be provided as a secondary service to individuals open to more intensive programs such as Assertive Community Treatment and Adult Recovery Services. The organization does not use Artificial Intelligence (AI) in service delivery or for health data analysis and processing.

Location of OBAT Services	Hours & Days of Operation
2010 Bremono Road Suite 210 Henrico VA 23226	Wed. & Fri. 8:30AM-5:00PM Mon., Tues., Thurs. 8:30AM-7:00PM
3908 Nine Mile Road Henrico, VA 23223	Mon. & Thurs. 8:30AM-8:00PM Tues. & Fri. 8:30AM-5:00PM Wed. 8:30AM-7:00PM
Mobile Locations – Vary depending upon community need.	

Location of Same Day Access	Hours & Days of Operation
10299 Woodman Road Glen Allen, VA 23060	Monday through Wednesday: 7:30 to 3:00pm, Thursdays: 7:30 to 5:30 pm. Friday: 7:30 to 11:00 am
3908 Nine Mile Road Henrico, VA 23223	Monday through Wednesday: 7:30 to 3:00pm, Thursdays: 7:30 to 5:30 pm. Friday: 7:30 to 11:00 am

Admission/Eligibility /Continued Stay/Exclusion Criteria for OBAT:

- Adults who reside in Henrico, Charles City or New Kent Counties

- Individuals who have diagnosed substance use disorder and have a demonstrated need for medication assisted treatment.
- Individuals who are seeking services primarily to manage pain and would be better suited to treatment by a Pain Management/Clinic will be referred to an appropriate provider in the community.
- Initial Assessments are completed through Same Day Access services, or by our mobile clinician in the community.

Within Substance Use Services there are priority populations. Pregnant women who inject substances, pregnant women who use substances by other means and mothers with substance exposed babies are open to treatment services within a 48-hour window as prescribed by DBHDS. If they are unable to be open to treatment during that time, interim services will be provided. These interim services include: supportive counseling as needed, counseling/education regarding adverse effects of alcohol and drug use on the fetus; counseling/education on HIV, TB and Hepatitis; counseling/education on the risks of sharing needles and the risks of transmitting HIV or Hepatitis to sexual partners and infants; and counseling about the steps to prevent transmission of HIV, TB, Hepatitis C and referral to treatment for the same if necessary. Should the agency be unable to meet with the women within 48 hours of request, DBHDS must be informed. Additional priority populations include non-pregnant individuals who inject substances. These individuals are required to be seen for their first appointment within 14 days of the Same Day Access assessment.

It is the goal of this program to serve all who request MAT within 48 hours of their request.

OBAT Services Include:

- Assessment/Evaluation – Individual appointments for evaluation
- Person centered collaborative care planning and interdisciplinary treatment care coordination.
- Case coordination interventions to link participants to primary health care to include history and Physical and other pertinent records, address housing, employment, transportation and assist with enrolling in entitlement programs, and social supports. Participants will be assisted in getting connected to higher level of care if needed.
- Nursing and Medical care include nursing assessment, to include vital signs, drug and alcohol screen, pregnancy test and laboratory studies and PMP check as well as Medication Assisted Treatment and administration when indicated. Treatment for Hepatitis C, referrals to specialized medical care and coordination with treatment providers.
- Clinical services include Individual and Group therapy to address both SUD and Mental Health issues. Relapse prevention planning, if extensive Family therapy is indicated, a referral can be made.
- Psychiatric Evaluation/Medication Management by agency providers – Diagnostic evaluation, evaluation of the need for psychotropic medications and medication management services to more effectively and conveniently treat the participant within the agency.
- Crisis prevention and response are available through agency Emergency Services Program.
- Peer support

Evidence Based Practices Utilized:

- Cognitive Behavioral Therapy
- Prolonged Exposure Therapy
- DBT informed Therapy
- Motivation Enhancement Therapy
- EMDR

- Trauma Informed Therapy
- Exposure Therapy
- TAMAR
- Behavioral Activation
- Person Centered Therapy
- Accuwellness
- Matrix Model
- Medication Assisted Treatment
- Contingency Management

CONTRACT SERVICES

- Interpretation Services
- Prescriber Services – 20 hours a week of Prescriber services

STAFFING

OBAT clinics are located at the Nine Mile and Bremo Road locations. Currently there are 2 community-based locations through a partnership with the Richmond Henrico Health District. The program has 5 full time OBAT credentialed Licensed Clinicians, 2 Certified Peer Recovery Specialists, 1 full time Registered Nurse, 1 part time Medical Doctor and 1 Nurse Practitioner. The agency Medical Director oversees the program, and clinical staff is managed by 2 supervisors and a program manager. Staff meetings are held monthly to address both individual and staff concerns. Individual clinical supervision is provided on an ongoing basis.

The staffing pattern varies as individuals are added to and closed from the program. Adequate staffing is maintained to ensure individuals are safe while participating in the program and to assist as needed during evacuations.

PROGRAM GOALS

- To provide MAT to eligible individuals.
- To prevent overdose fatalities and other negative results of substance use.
- To address all dimensions of recovery and improve the quality of life for the participants and their families.
- To ensure effective delivery service to our individuals by actively working with other HAMHDS units, other community agencies and private providers to coordinate care.
- To ensure that individuals have timely access to services.
- To ensure that individuals are satisfied with the services they receive.

PROGRAM OBJECTIVES

On an annual basis the program will measure objectives to include Access, Effectiveness, Efficiency and Service Satisfaction of consumers and Stakeholders. See program specific performance improvement goals and objectives.

FEES

The agency accepts most insurance for outpatient services. For consumers without insurance a sliding scale fee based on household income will be used. The program also receives state and local funding as the fees collected do not cover the cost of the services provided

PROCEDURES FOR REFERRAL, SCREENING, ADMISSION AND RE-ADMISSION

Individuals access services via the Same Day Access program. Individuals can walk into one of two sites and request services 5 days a week. This can occur by phone and via telehealth. The individual receives a full comprehensive needs assessment (CNA) at the time of request for service. A financial orientation to the agency and additional information is also provided. The results of the CNA will inform the assignment to a specific program area if appropriate. The individual leaves their assessment with a follow-up appointment in the specific program area. Those requesting MAT will be scheduled with a prescriber within 48 hours of the request. Individuals being seen in the community will receive the initial assessment and medical evaluation immediately.

ORIENTATION OF INDIVIDUALS TO THE PROGRAM/SERVICE

All participants will receive an orientation to the program at the initial face-to-face or telehealth program session. The clinical staff review important information about the agency, unit, confidentiality, human rights and services that are relevant to individuals. This is done through handouts and/or verbal instruction.

EMERGENCY CLINICAL CONSULTATION

The Emergency Services Program serves as primary back up for emergency clinical consultation. Emergency services are available 24 hours a day/7 day a week. 804-727-8484

TELEHEALTH

When requested HIPPA compliant telehealth services are available

MEDICATION MANAGEMENT

Prescriptions are provided and all participants are encouraged to adhere to recommendations by the prescriber. Regular urine screens, checks of the prescription drug monitoring program (PDMP) and random pill counts are conducted. Participants are provided with education about risk of diversion of medications and can be provided with a drug lock box if needed. Participants are trained to recognize symptoms of an overdose, the use of Naloxone and given the medication

SECLUSION/RESTRAINTS/EMERGENCY HOLDS

Seclusion and restraint are prohibited and are not used in any agency programs. Brief physical holds are used only by staff trained in Therapeutic Options in an emergency.

TRANSFER/DISCHARGE PROCEDURES

Individuals may be transferred to other units within the agency if their clinical needs can be more effectively served through that unit.

Individuals are discharged from the Program: 1) when the treatment goals are met, 2) at the request of the individual, 3) when the individual moves out of the locality, 4) when the individual fails to participate in treatment, 5) where services are best provided through another provider. Staff work with the individual to provide them with appropriate resources upon discharge as needed. A Discharge Summary is completed at the time of the discharge.