

Improving Engagement in Addiction Treatment: Translating Addiction Research into Evidence-based Practice

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Background

- ❖ Patient engagement is critical for the success of addiction treatment.
- ❖ The Enhanced Engagement in Chemical Dependency (EECD) is an innovative patient engagement enhancement system that promotes motivational interviewing/motivational enhancement therapy (MI/MET) and service matching approaches, an evidence-based practice that can improve engagement. (Figure 1)
- ❖ There are 12 addiction treatment programs at Kaiser Permanente Southern California (KPSC), where about 8,000 new intakes are conducted per year.
- ❖ We sought to evaluate the effectiveness of the EECD for improving patient engagement in addiction treatment at KPSC.

Methods

- ❖ The EECD system includes two components: 1) staff training in MI/MET, and 2) a standardized web-based engagement assessment with real-time clinical and personalized patient reports and program-level management reports.
- ❖ The EECD system is rolled out in a staggered implementation at 12 addiction treatment programs.
- ❖ The analysis will employ a stepped wedge design:
 - All adults who have completed an intake in the 6 months prior to the EECD implementation at each site will serve as internal baseline controls.
 - All adults who have completed an intake at the sites that have not yet implemented the EECD system will serve as external controls for those at the implementation sites.

Methods (continued)

- ❖ We will evaluate the effectiveness of the EECD system in 6 domains:
 - 1) improving treatment engagement (attendance at two sessions within 30 days after the initial treatment visit);
 - 2) authentic participation in outpatient treatment;
 - 3) clinical outcomes (e.g., addiction severity index);
 - 4) reducing treatment re-entry within 6 months following the end of a treatment episode;
 - 5) matching services to patient needs
 - 6) sustained effectiveness in improving engagement.
- ❖ Generalized estimating equations will be used to test for significant differences in proportion of patients with favorable outcomes on binary variables.
- ❖ Linear mixed models will be used for continuous outcome variables.

MI training & EECD implementation

- ❖ Provider motivational interviewing (MI) training by certified MI trainers and the EECD implementation are rolled out at 12 KPSC outpatient addiction treatment programs during September 2014-April 2015, in three phases. (Figure 2)
- ❖ The MI training includes a full-day champion training session and two half-day full staff training sessions. Monthly coaching of the site champions by MI experts at Yale University is conducted via conference calls.
- ❖ The provider champion(s) at each site will provide feedback on the MI training and assist in group role playing during the full staff MI training sessions.

HealthConnect integration

- ❖ The IT group at the KPSC is working on integrating the EECD system with HealthConnect™, the KP's electronic medical record (EMR) system.
- ❖ Tablets will be provided to all the participating sites to collect patient reported data through secure network at the intake and follow-up visits.

Results

- ❖ We are currently collecting baseline data during the pre-implementation period.
- ❖ As the project is ongoing, the results are forthcoming.

Innovations

- ❖ EECD is the first outcomes management system specifically designed to support MI/MET and Matching for addiction treatment.
- ❖ EECD represents an important example of the translation of research into routine clinical practice.

Conclusions

- ❖ This systemic intervention project represents an important example of translating research into improving patient care in addiction treatment, through a multidisciplinary collaboration between researchers, providers, and operational leaders.
- ❖ The findings from this project will facilitate adoption of evidence-based practices and innovative technologies in addiction treatment.

Disclaimer

- ❖ The project described is supported by the National Institute on Drug Abuse (NIDA). (award number: 2R44DA032180-02)
- ❖ The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institute on Drug Abuse (NIDA) or the National Institutes of Health (NIH).

Figure 1. EECD Mechanism of Action



Figure 2. Implementation Schedule

