

Travis County Plan for Substance Use Disorders

**Austin City Council
Health & Human Services Committee
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Collaboration

- Public entities
 - Travis County
 - City of Austin
 - Central Health
- Recovery Community
 - Communities for Recovery
 - The Council on Recovery
 - Austin Recovery Oriented Systems of Care (ROSC)
 - Faith Partners
- Law Enforcement
 - APD
 - Travis County Sheriff's Office
- Other Organizations
 - LifeWorks
 - SIMS Foundation
 - Life Anew
 - Children's Optimal Health
- Education system
 - UT School of Social Work
 - AISD
- Health Care
 - People's Community Clinic
 - CommUnityCare
 - Seton Healthcare Family

What Are The Issues?

- Substance use is **overshadowed** by mental health in both awareness and funding
- Travis County has experienced a **decrease in critical services** for low-income individuals
- **Reimbursement** for services does not cover cost of care, destabilizing available networks of care
- **Compensation** for substance use professionals is lower than other health professionals
- **Failure to invest** in prevention and recovery results in later recourse to more expense for individuals and community
- Criminal justice or emergency health systems, rather than public health systems, are **least effective and most costly** ways to respond to the issue

Community Impacts – Examples

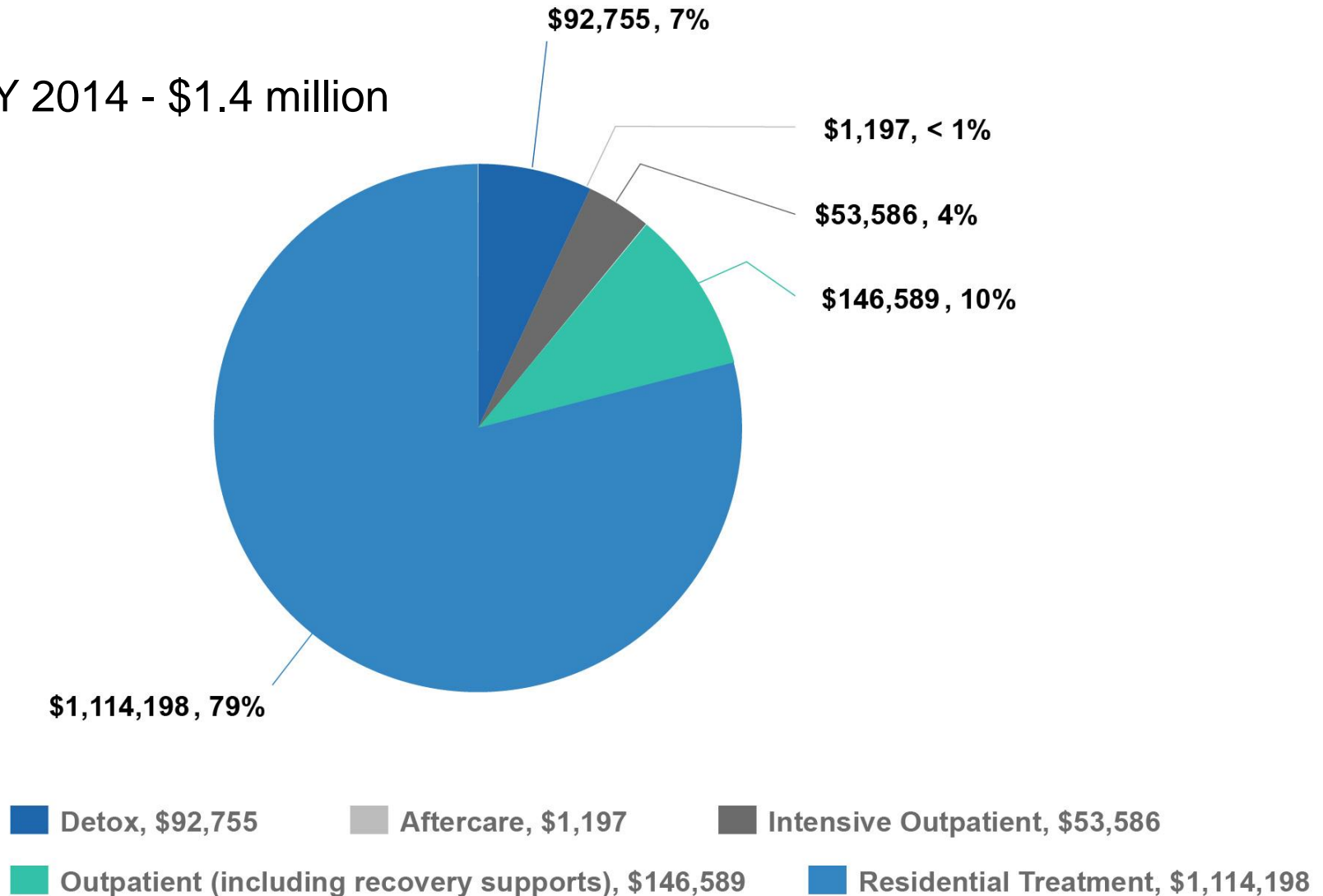
- Central Texas has high rates of binge drinking, marijuana use, & nonmedical use of painkillers relative to the state
- Substance use is a factor in many community indicators, including child abuse, domestic violence, suicide, arrests, and traffic fatalities
- Austin had 3,032 Public Intoxication bookings in 2014
 - APD officer-time costs between \$167,000 and \$294,000
 - Almost \$800,000 in booking and jail bed day costs for TCSO
- Seton estimates that between \$1.1 and \$2.6 million was spent in FY 2013 on individuals who would qualify for a sobriety center
- In 2012, Austin/Travis County EMS spent 2,717 hours transporting individuals primarily due to alcohol or drug abuse

Local Infrastructure & Investments are Insufficient

- Local prevention efforts lack coordination and reach a limited number of individuals
- Integrating substance use disorder screening, assessment, and recovery supports into the physical and behavioral health systems would enable people to get help sooner
- We need better linkages between institutions that address substance use disorders (i.e., schools, hospitals, jails), and treatment centers and ongoing recovery resources
- Warm hand-offs are more effective than a list of referrals
- Workforce capacity and compensation issues must be addressed to create a stable system

Current Investments: SAMSO

FY 2014 - \$1.4 million



Dimensions of Recovery

Health—overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being

Home—having a stable and safe place to live

Community—having relationships and social networks that provide support, friendship, love, and hope

Purpose—conducting meaningful daily activities, such as a job, school volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society

Plan Goals



Education

Goal: An informed, educated and supportive community that understands the impact of substance use disorders, communicates community standards, and provides relevant information.

Immediate Action Steps:

- Establish a hub for substance use information and referrals including a resource list of prevention programs.
- Educate health care professionals on identification of substance use disorders and appropriate referrals.



Prevention

Goal: Harmful substance use is prevented at the earliest possible point.

Immediate Action Steps:

- Invest in coordination and leveraging of existing prevention programs through a collaboration such as the Youth Substance Abuse Prevention Coalition.
- Increase the overall investment in effective prevention strategies so that they can be brought to scale.



Recovery

Goal: Integrated, person-centered, community-based, family-focused recovery supports are readily available.

Immediate Action Steps:

- Educate health and public system navigators on substance use resources.
- Educate, employ, and integrate peer coaches.
- Increase access to withdrawal management (detox).
- Expand access to recovery supports early in recovery and maintain for at least one year



System Integration

Goal: Infrastructure is in place to identify opportunities to strengthen substance use disorder system, to develop sustainable resources and to monitor effectiveness

Immediate Action Steps:

- Create a new or identify an existing group of community leaders to oversee plan implementation and system integration.
- Create a capacity and gap analysis to develop a roadmap for the investment of new funds in an integrated recovery system.

Current Activity

- St. David's Foundation increased investments in Council on Recovery and SIMS Foundation
- City of Austin funded treatment and recovery support services at Council on Recovery
- Phoenix House added inpatient beds for adolescent girls
- ATCIC establishing Facebook page to share SUD information
- Travis County Youth Substance Abuse Prevention Coalition established website for prevention information and will host a prevention summit on November 5th
- ROSC identifying action steps to promote recovery and recovery-oriented systems of care in the community

Next Steps

- Integral Care and Central Health have contracted with Woollard Nichols & Associates to:
 - Map the current system in Travis County
 - Conduct a capacity and gaps analysis
 - Engage in fiscal mapping
 - Develop an environmental scan of funding opportunities
 - Diagram the ideal continuum of care
 - Identify priorities for investment by February 2016

Questions & Comments