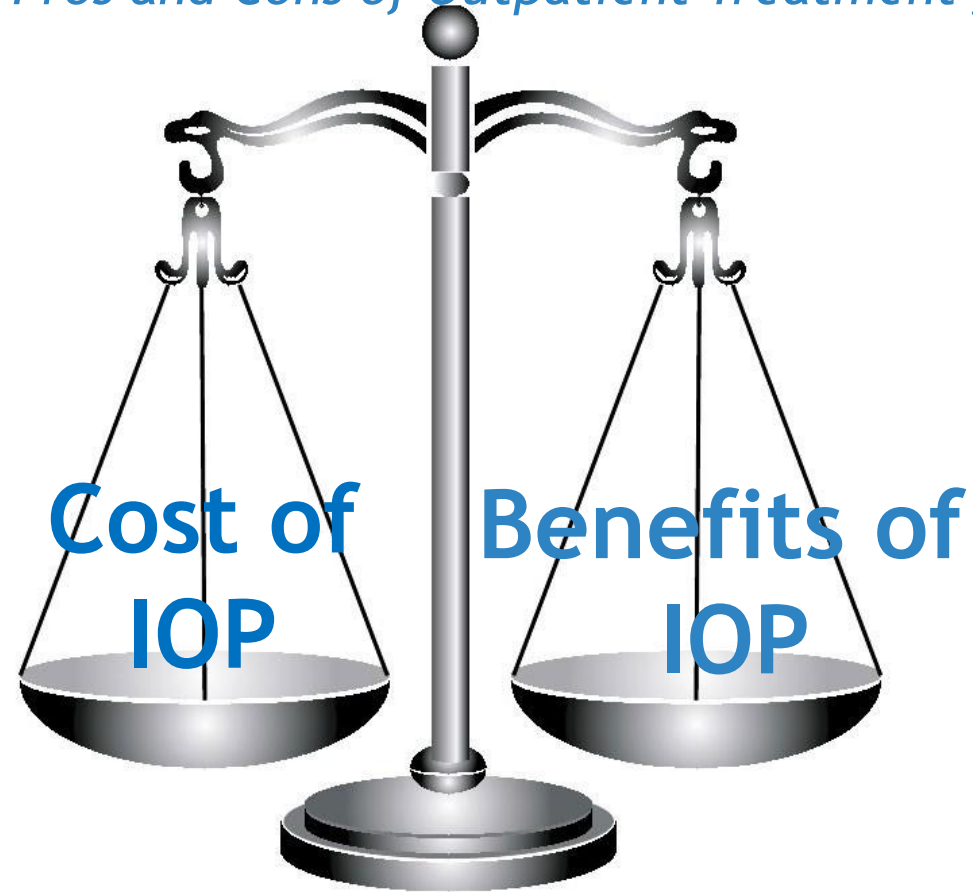


# CBA (Cost Benefit Analysis) for IOP (Intensive Outpatient Programs)

*Weighing the Pros and Cons of Outpatient Treatment for Addiction*



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## Presented by Lisa Davidson, MS, LCDC, CCTP, Intensive Outpatient Manager at Starlite Recovery Center

This course will highlight the pros and cons of continued outpatient treatment for chemically dependent clients, and statistical data showing success rates for continued care verses inpatient treatment only.

## Objectives for course:

- ▶ Learn ASAM qualifiers for IOP level of care
- ▶ Learn the stages/ level of care for IOP services
- ▶ IOP standards
- ▶ CBA- Weigh the pros and cons of IOP services
- ▶ Statistical data obtaining IOP outcomes and success rates

# ASAM Criteria for Intensive Outpatient Treatment (IOT/IOP)

- ▶ **DIMENSION 1: Acute Intoxication and/or Withdrawal Potential**

- ▶ Client is at minimal risk of withdrawal and/or risk can be managed without medical intervention.

- ▶ **DIMENSION 2: Biomedical Conditions/Complications**

- ▶ Client has no biomedical conditions OR biomedical conditions do not interfere or distract from client ability to participate at IOP level of care

- ▶ **DIMENSION 3: Emotional/Behavioral/Cognitive Conditions and Complications**

- ▶ Client displays mild severity in emotional, behavioral, and/or cognitive functioning that are not better managed at another level of care.

- ▶ **DIMENSION 4: Readiness to Change**

- ▶ Client displays difficulty fully engaging in treatment and/or variable interest in readiness to change that requires structured programming to be addressed.

- ▶ **DIMENSION 5: Relapse/Continued Use/Continued Problem Potential**

- ▶ Client displays high likelihood of relapse without continued monitoring and support, as evidenced by repeated relapses or inability to maintain abstinence at lower level of care.

- ▶ **DIMENSION 6: Recovery Environment**

- ▶ Client lacks adequate supports to facilitate continued recovery and/or client has not yet developed the skills to acquire these supports.

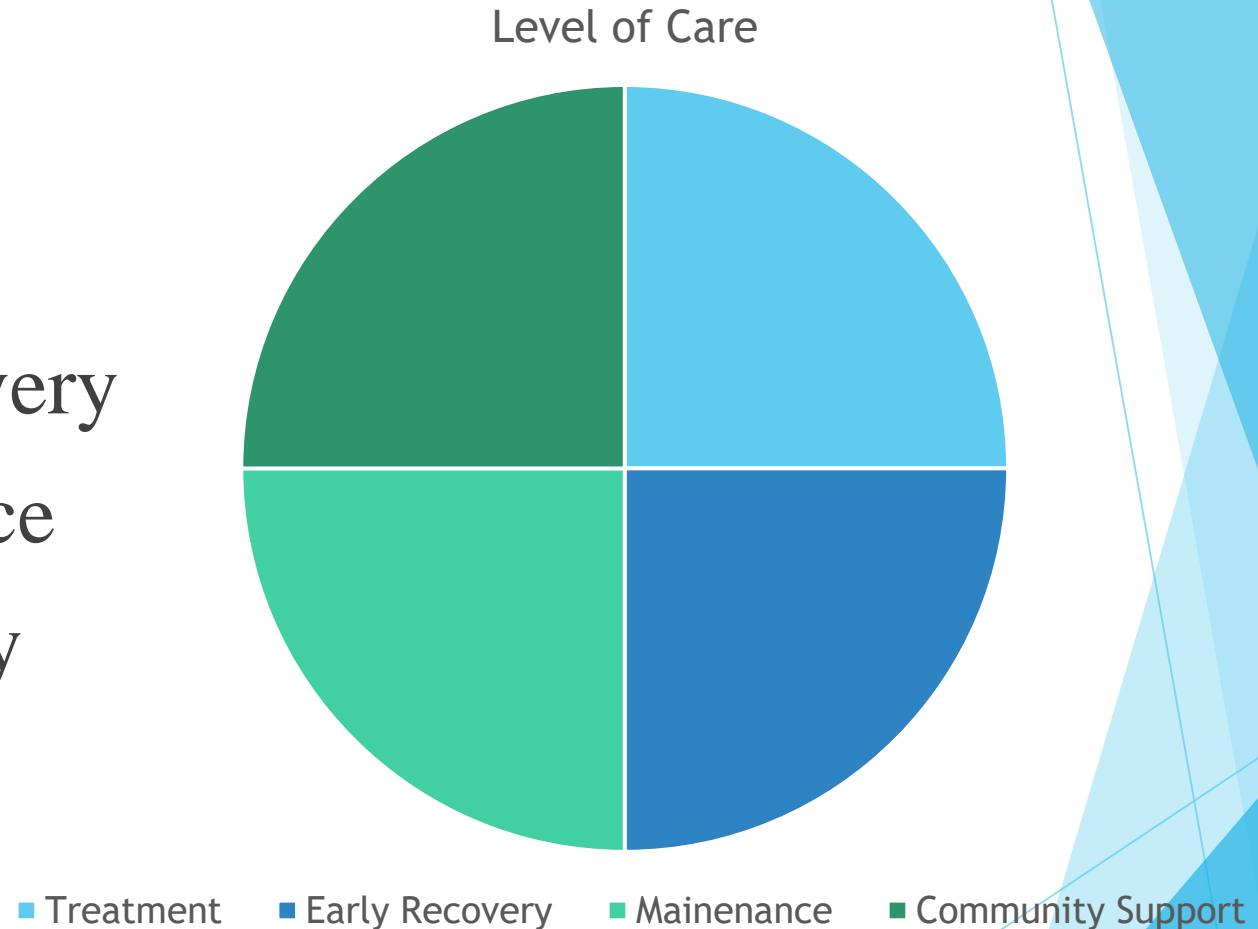
# Goals for IOP

- ▶ To achieve abstinence
- ▶ To foster behavioral changes that support abstinence and a new lifestyle
- ▶ To facilitate active participation in community-based support systems (e.g., 12-Step fellowship)
- ▶ To assist clients in identifying and addressing a wide range of psychosocial problems (e.g., housing, employment, adherence to probation requirements)
- ▶ To assist clients in developing a positive support network
- ▶ To improve clients' problem-solving skills and coping strategies



# ASAM Level of Care for IOP

- ▶ Stage 1—Treatment Engagement
- ▶ Stage 2—Early recovery
- ▶ Stage 3—Maintenance
- ▶ Stage 4—Community support



# Goals for Stage 1- Treatment Engagement

- ▶ Establish a treatment contract with the counselor that specifies treatment goals, client responsibilities (e.g., attend group sessions, remain abstinent, submit urine samples), and the counselor's efforts to help clients meet treatment goals and responsibilities.
- ▶ Work to resolve acute crises.
- ▶ Engage in a therapeutic alliance.
- ▶ Prepare a treatment plan with help from the counselor.

# Goals for stage 2: Early recovery

## **Goals of the early recovery stage:**

- Maintain abstinence.
- Demonstrate ability to sustain behavioral changes.
- Eliminate drug-using lifestyle and replace it with treatment-related routines and drug-free activities.
- Identify relapse triggers and develop relapse prevention strategies.
- Identify personal problems and begin to resolve them.
- Begin active involvement in a 12-Step or other mutual-help program.

**Duration of the early recovery stage:** 1 weeks to about 2 months





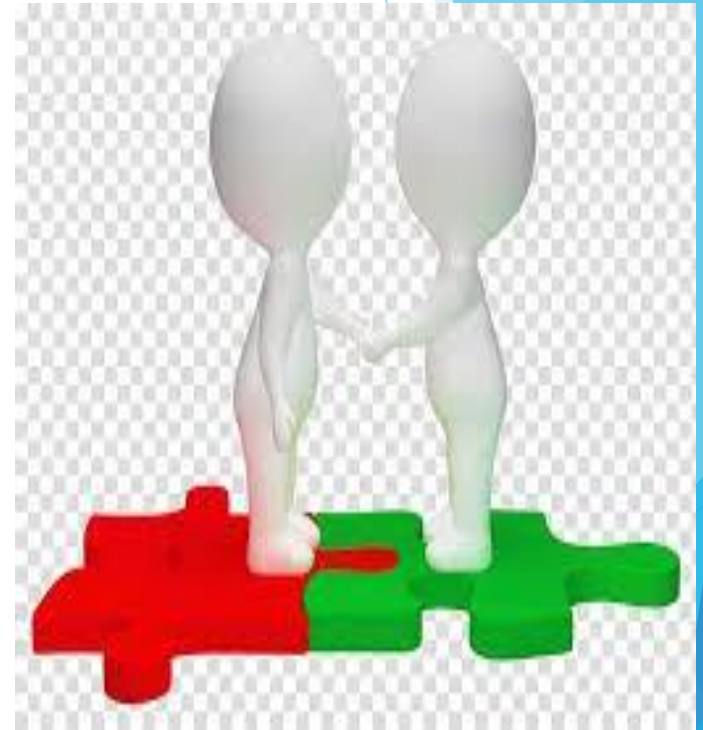
# Counselor Activities during Stage 2- Early recovery

- Assist clients in following their individual plans to achieve and sustain abstinence.
- Assist clients in identifying relapse triggers and developing strategies to avoid or cope with triggers.
- Support evidence of positive change.
- Initiate random drug tests and provide rapid feedback of results.
- Assist clients in successfully integrating into a 12-Step fellowship or other mutual-help program.
- Help clients develop and strengthen a positive social support network.
- Encourage participation in healthful recreation and social activities.
- Continue pharmacotherapy, if appropriate, and other medical and psychiatric treatments.
- Offer education on topics such as hepatitis C and HIV infection, anger management, and parenting.
- Continue assessments for other issues requiring intervention.
- Educate clients and family members on addiction, the recovery process, and relapse.
- Provide family and multifamily counseling.
- Introduce families to 12-Step and other mutual-help programs appropriate for them; help families integrate into support groups.

# Goals for Stage 3- Maintenance Stage

- Solidify abstinence.
- Practice relapse prevention skills.
- Improve emotional functioning.
- Broaden sober social networks.
- Address other problem areas.

**Duration of the maintenance stage:** About 2 months to 1 year



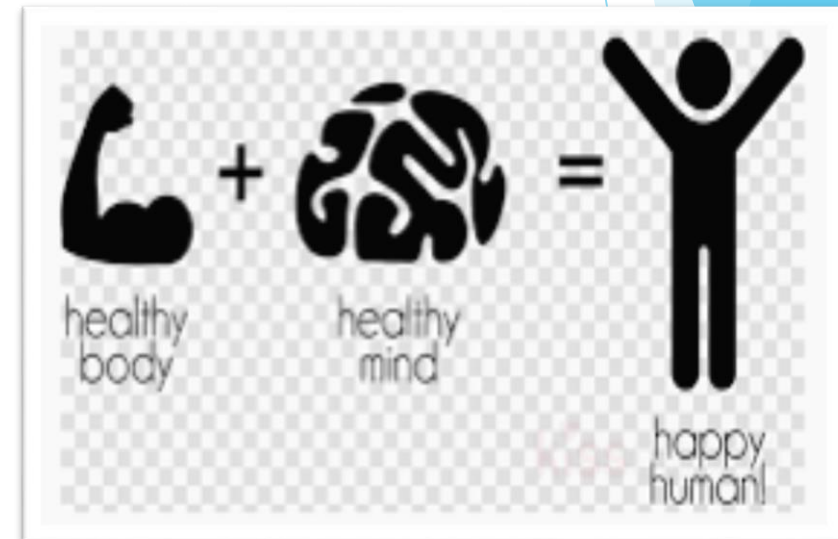
# Counselor Activities Stage 3

- Continue teaching and helping clients practice relapse prevention skills and refine plans to address relapse triggers.
- Help clients acknowledge and quickly contain “slips” to keep them from becoming full-blown relapses.
- Support clients as they work through painful feelings (e.g., sadness, anxiety, loneliness, shyness, shame, guilt).
- Teach clients new coping and problem-solving skills that increase self-esteem and improve interpersonal relationships, including better communication skills, anger management skills, and making amends.
- Help clients identify vocational or educational needs, improve work-related functioning, resolve family conflicts, and initiate new recreational activities.
- Facilitate client linkages with community resources that foster clients' interests and offer needed services for accomplishing life goals.
- Assist clients in making and sustaining positive lifestyle changes.
- Encourage continuing participation in support groups and ongoing work with a sponsor.
- Emphasize the importance of spirituality or altruistic values that help clients see beyond themselves and work for community goals.
- Continue monitoring random drug test results and providing feedback on results.
- Continue pharmacotherapy, as needed, and other medical or psychiatric assistance.
- Avoid complacency.

# Goals for Stage 4- Community support

- Maintain abstinence.
- Maintain a healthy lifestyle.
- Develop independence from the treatment program.
- Maintain social network connections.
- Establish strong connection with support groups and pursue healthy community activities.
- Establish recreational activities and develop new interests.

**Duration of the community support stage: Years, ongoing**



# Counselor activities stage 4

- Assist clients in developing a realistic, comprehensive, and individualized plan for continuing recovery.
- Acquaint clients with local resources that allow them to: Sustain abstinence, Continue participating in 12-Step or other mutual-help groups, Obtain medical or psychotherapeutic assistance as needed, Continue pharmacotherapy as needed, Start or continue vocational or educational training or other courses, Seek and obtain employment, Strengthen social support networks, Manage stress, Prevent or respond to relapse, and Enjoy abstinence
- Provide information about and encourage attendance at alumni or booster sessions at the IOT or outpatient treatment program to review recovery status.
- Provide a biannual checkup during which a comprehensive assessment is conducted of clients' recovery and status.

# IOP Standard protocols

- ▶ Typical length of service range from 60- 90 days (recommend amount is 90 days)
- ▶ Consist of 10 hours of services; 3- 3 hour groups and 1- 1 hour individual session per week based on clients need
- ▶ Case management
- ▶ Focus primarily on maintance and community support stages

# CBA tool (SMART Tool) for evaluating benefits and cost of IOP

## Pros of attending IOP

- ▶ Fellowship and community support
- ▶ Flexible schedule- continue to work and/or attend school
- ▶ Combine other therapy programs
- ▶ Lower cost
- ▶ Increased freedom to continue other things in daily routines
- ▶ Provides structure and support
- ▶ Continue to learn coping skills in safe environment
- ▶ Drug screening
- ▶ Medication management
- ▶ Life skills training
- ▶ Supportive and encouraging environment

## Cons of attending IOP

- ▶ Could be returning to high risk environment
- ▶ More excess to drugs
- ▶ No medical detox
- ▶ Increased Freedom
- ▶ Triggers and cravings - due to environment
- ▶ Lack of sober support- no outside sober support



# CBA tool for evaluating benefits and cost of IOP

## Pros for not attending IOP

- ▶ Return to normal life “Old Life”
- ▶ Use other means of support/ “Limited”

## Cons of not attending IOP

- ▶ Limited structure and routine
- ▶ Limited sober support
- ▶ Limited accountability/ none
- ▶ No therapeutic resources
- ▶ No continuum of care
- ▶ Help managing new problems resulting in early abstinence
- ▶ Continued medical and medication management
- ▶ Access to referrals and resources

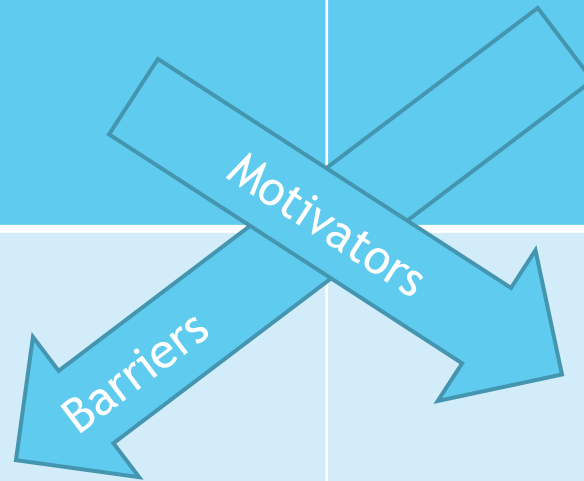


# CBA TOOL: Barriers and motivators

**Fellowship and community support**  
**Flexible schedule- continue to work and/or attend school**  
**Combine other therapy programs**  
**Lower cost**  
**Increased freedom to continue other things in daily routines**  
**Provides structure and support**  
**Continue to learn coping skills in safe environment**  
**Drug screening**  
**Medication management**  
**Life skills training**  
**Supportive and encouraging environment**

**Could be returning to high risk environment**  
**More excess to drugs**  
**No medical detox**  
**Increased Freedom**  
**Triggers and cravings - due to environment**  
**Lack of sober support- no outside sober support**

Return to normal life “Old Life”  
Use other means of support/ “limited”



**Limited structure and routine**  
**Limited sober support**  
**Limited accountability ( none)**  
**No therapeutic resources**  
**No continuum of care**  
**Help managing new problems resulting in early abstinence**  
**Continued medical and medication management**  
**Access to referrals and resources**

# Success Rates for IOP

- ▶ Different approaches to treatment work better for different people, but intensive outpatient rehabilitation has worked well for countless people in overcoming addiction. A study published in 2015 found that those attending outpatient programs, including IOPs, did better than those in a standard residential treatment program: 73 percent experienced favorable outcomes for IOP and outpatient treatment compared to 60 percent for residential treatment at a nine-month follow-up point after program completion.
- ▶ IN 2017 studies of inpatient treatment and IOP services have yielded results that are consistent and similar: outcome measures of alcohol and drug use at follow-up show reductions in substance use and increases in abstinence, and outcomes do not differ significantly between inpatient and IOP settings.

# References

- ▶ Center for Substance Abuse Treatment. Substance Abuse: Clinical Issues in Intensive Outpatient Treatment. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2006. (Treatment Improvement Protocol (TIP) Series, No. 47.) Chapter 4. Services in Intensive Outpatient Treatment Programs. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK64094/>
- ▶ Center for Substance Abuse Treatment. Substance Abuse: Clinical Issues in Intensive Outpatient Treatment. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2006. (Treatment Improvement Protocol (TIP) Series, No. 47.) Chapter 8. Intensive Outpatient Treatment Approaches. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK64102/>
- ▶ McLellan AT, Hagan TA, Meyers K, et al: “Intensive” outpatient substance abuse treatment: comparisons with “traditional” outpatient treatment. *Journal of Addictive Diseases* 16:57-84, 1997

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