

While substance use disorder (SUD) treatment has been proven to save lives, only approximately 5-10% of people with SUDs are accessing treatment services, and 95% of people with SUDs who don't access services report either not wanting or believing that they need help. Data demonstrates that unless we prioritize engaging this 95% of individuals with SUDs, it is unlikely that we will increase our treatment access rates. For this reason, many substance use systems need to take a fundamentally different approach to better address SUDs by ensuring that programs are designed not just for the 5% of people with SUDs knocking on their treatment doors, but that they are also designed to engage the 95% who are not.

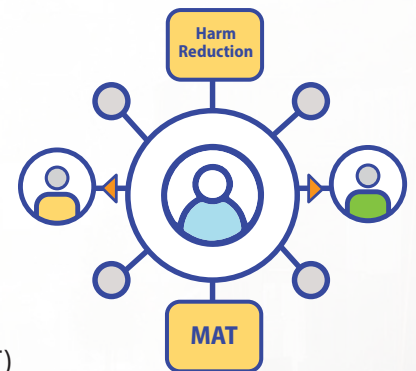


The Reaching the 95% (R95) Initiative is not a single project, but rather a comprehensive change management approach across all areas of systems, agencies, and programs to incorporate a deliberate focus on engaging more people more meaningfully within the cultural fabric of organizations.

R95 focuses are multi-pronged with two key focuses and include but are not limited the following:

Focus Area #1: Enhancing Outreach & Engagement

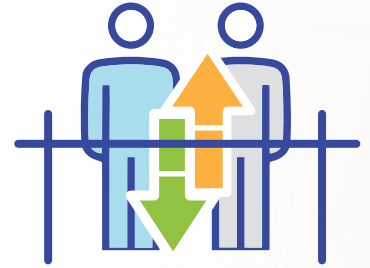
- ▶ Optimizing reimbursable outreach and engagement services for people prior to formal diagnoses or assessments
- ▶ Expanding field- and street-based services
- ▶ Increasing interfaces with other areas of health and social systems
- ▶ Expanding low barrier and low judgement services such as harm reduction
- ▶ Expanding offerings of Medications for Addiction Treatment (MAT)



Focus Area #2: Establishing Lower Barrier Care

- ▶ Lowering the bar of admissions policies to expand the spectrum of readiness levels of people admitted into SUD treatment, including those who are not yet ready for complete abstinence

- ▶ Raising the bar of discharge policies so that there are more nuanced considerations before someone is discharged from treatment because of relapse, which is a symptom of addiction
- ▶ Strengthening bidirectional referrals between harm reduction and SUD treatment agencies
- ▶ Performing customer experience assessments at the SUD provider level to focus on implementing strategies to make the care environment more inviting



In implementing R95 in Los Angeles County since 2023, the Department of Public Health's Bureau of Substance Abuse Prevention and Control (SAPC) appreciates that the changes called for within the R95 Initiative are often nuanced, associated with strong feelings, and require significant culture change and change management at the systems-, agency-, and staff-levels. While not easy, successful implementation of R95 is more an art than a science, progress is possible and the aims of R95 are achievable.

The aim of this document is to provide a blueprint for how systems and organizations can approach implementing lower threshold SUD systems and services that can better engage all people with SUDs, inclusive of those who may not be abstinent from substances, and better engage the 95%.

Important elements of implementing the R95 Initiative in Los Angeles County have included:

▶ Communication Framework



- It is essential that SUD systems invest the time and energy necessary to fully communicate the purpose and goals of R95 across all organizational levels including both leadership and all levels of staff.
- It is equally as important that leadership listen to concerns and feedback, and address concerns shared by staff so that they can be fully supported adopting and embracing necessary changes.

▶ Listening and Feedback Forums



- Establishing forums for engagement and discussions about people's perceptions of low threshold SUD care and R95 aims is critical, as SAPC's experiences have consistently demonstrated strong feelings from both leadership and staff on the implications of R95. Many of these concerns resulted from misinterpreting the nuanced intentions of R95 in more black and white ways that did not adequately capture the aim of R95.



- Regular and standing leadership and staff meetings (some separate, some together) to talk about the “why” of R95 is essential to successful implementation, with a particular emphasis on speaking with frontline SUD counselors and other clinicians about their feelings about low barrier approaches to SUD care and integrating harm reduction approaches into SUD treatment.
- These forums should address the “what” or content of R95 projects, but also draw out the feelings/emotions/cultural considerations that may be associated with serving non-abstinent clients and trying to retain people in care who may have lapsed and returned to substance use, as these discussions are often very fruitful and necessary for true buy-in from frontline staff.
- The goal of these forums should be to draw all the “elephants in the room out” so that they can be discussed and addressed, rather than allowing those unspoken concerns or feelings to undermine the ability to achieve R95’s objectives.

▶ Incentivizing R95 Participation



- As is the case with most organizational priorities that require behavior and practice change, identifying ways to incentive those changes is a great strategy. In Los Angeles County, the R95 Initiative was incorporated into SAPC’s payment reform approach, with financial incentives for participation and the opportunity for repeated discussions of the big picture goals and operational issues tied to implementation.
- While financial incentives are helpful, there are also other ways to incentivize participation in R95 focuses, such as offering training resources, more facetime with leadership, and providing data to agencies to support their work.

▶ Operational Plans for Executing R95 Focuses at the Organizational Level



- Developing clear, concrete, and achievable plans for how organizations will execute R95 focus areas is highly recommended. The plans should generally outline the why, what, how, and when of operationalizing components of R95 in as much detail as reasonable. Addressing both cultural aspects of

implementation as well as the nuts-and-bolts operational aspects of R95 implementation are essential, as much of the success of R95 depends on addressing the culture change needed to realize its vision.

▶ Evaluation



- As with all initiatives, it is essential to identify how implementation and success will be measured. Examples of high-level R95 metrics:
 - Total numbers of unique SUD clients served
 - Total SUD treatment admissions by level of care
 - Treatment retention and lengths of stay data
 - Total numbers of administrative discharges
 - Client satisfaction surveys
 - While the above metrics represent key measures of success with the big picture aims of R95, there are other operational metrics that are helpful for organizations to identify collect, and analyze.

OTHER RESOURCES

[SAMHSA Advisory: Low Barrier Models of Care for Substance Use Disorders](#) to learn about the principles and components of low barrier care and how it can be leveraged to overcome substantial gaps in access, while also engaging individuals in treatment.

[ASAM: Engagement and Retention of Nonabstinent Patients in Substance Use Treatment, Clinical Consideration for Addiction Treatment Providers](#) for guidance on addressing the complexities of patient non-abstinence during treatment and for strategies on how to optimize engagement and retention of all patients.

[Kaiser Family Foundation Tracking Poll July 2023: Substance Use Crisis And Accessing Treatment](#) to gain a better understanding of the public's concern and experiences with alcohol and drug addiction and its consequences, access to treatment and opioid use disorder and overdoses.

LEARN MORE ABOUT THE R95 INITIATIVE bit.ly/R95Initiative

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to learn more about our award-winning mobile-friendly resources, as well as a filterable service locator.

Go to **SUDHelpLA.org**

to locate a treatment provider near you with filters that make searching for specialty SUD services easy.