

Introduction

Purpose

This project aims to reduce post-substance treatment discharge opioid-related overdose within 60 days of Substance-Use Disorder (SUD) rehabilitation discharge

Background & Significance

- Rehabilitation programs face a 40–60% relapse rate post-rehabilitation discharge (Sharma, 2018)
- Motivational interviewing (MI) and Advance Warning of Relapse Questionnaire 3.0 (AWARE) are effective measures to assist individuals in transitioning from inpatient rehabilitation to home without relapse
- Project site:
Offers an adequate number of cases demonstrating irregularities intrinsic to SUD treatment.
- Has 15 years of smooth/ prompt response to population needs
- Clinic: 40-65% patients 21-55 yrs. experience relapse within 60 days of discharge
- Below 2% receive evidence-informed relapse-prevention strategies reliant upon casual observations to identify relapse risk resulting in high relapse rates and setbacks in recovery Relapse during recovery impacts patients, families, community, and surrounding areas
- The project focused mainly on the crucial period, the first 60 days following discharge from rehabilitation treatment, when relapse often occurs, according to Moradinazar et al. (2020)
- Understanding inhibitors and catalysts contributing to sustained abstinence informs prospective interventions for SUD related problems
- These contributing factors informed the project

Methodology

Setting

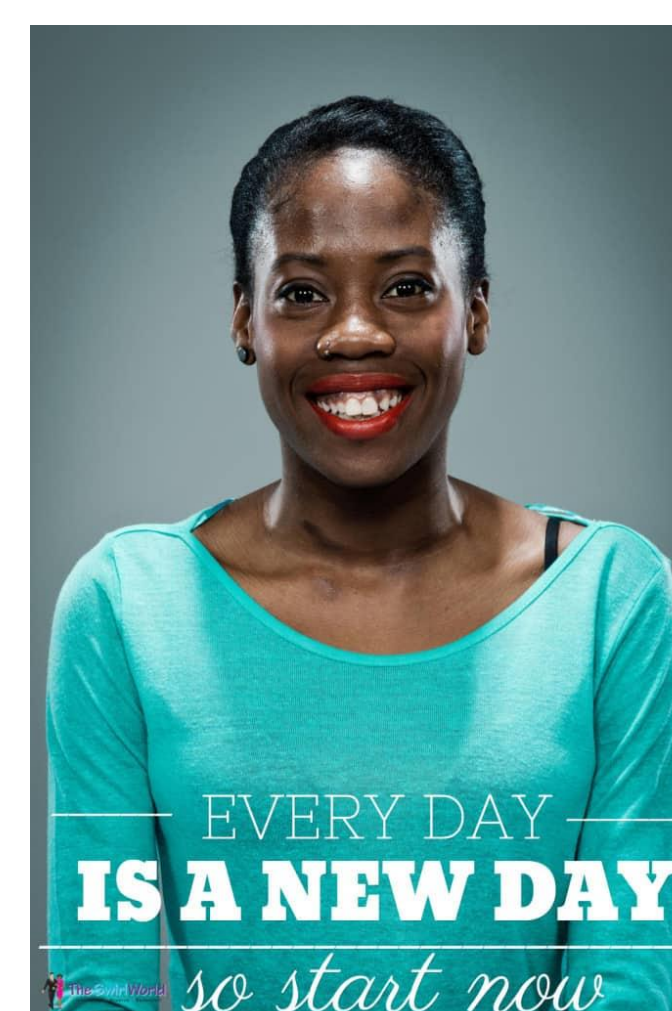
The project occurred in the psychiatric outpatient center in southwest rural Texas

Design

- The project employed a survey to draw out convenience samples from volunteer patients ages 21-55 screened with AWARE
- Those scoring 56 -196 were invited to participate in the project and participate in MI processes at each post-discharge appointment in the clinic for no more than 60 days

Methods

The study used univariate data and the chi-squared test (Chi-square or χ^2 test) to analyze the contingency of the data, AWARE scores, MI, and Chart reviews



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Results

The project results showed approximately:

- 95.7% treatment retention
- 91.5% improvement
- 4.3 % relapse
- OD of 2.1 %
- 2.1% leaving the program

Compared to usual treatment in a comparative time:

- 21.3% improvement
- 34.0% of relapse
- 23.4% OD
- 31.3 leaving the program



Future Recommendations/ Implications

- The project findings will be fundamental in reducing OD among the rural population at greater risk of substance and and opioid use
- The QI project shows the importance of an individualized care plan using AWARE and MI, which may reduce OD through early detection and behavioral intervention
- MI may increase the individual internal motivation, drive for behavioral change, and improve individual action toward wellness

Conclusions

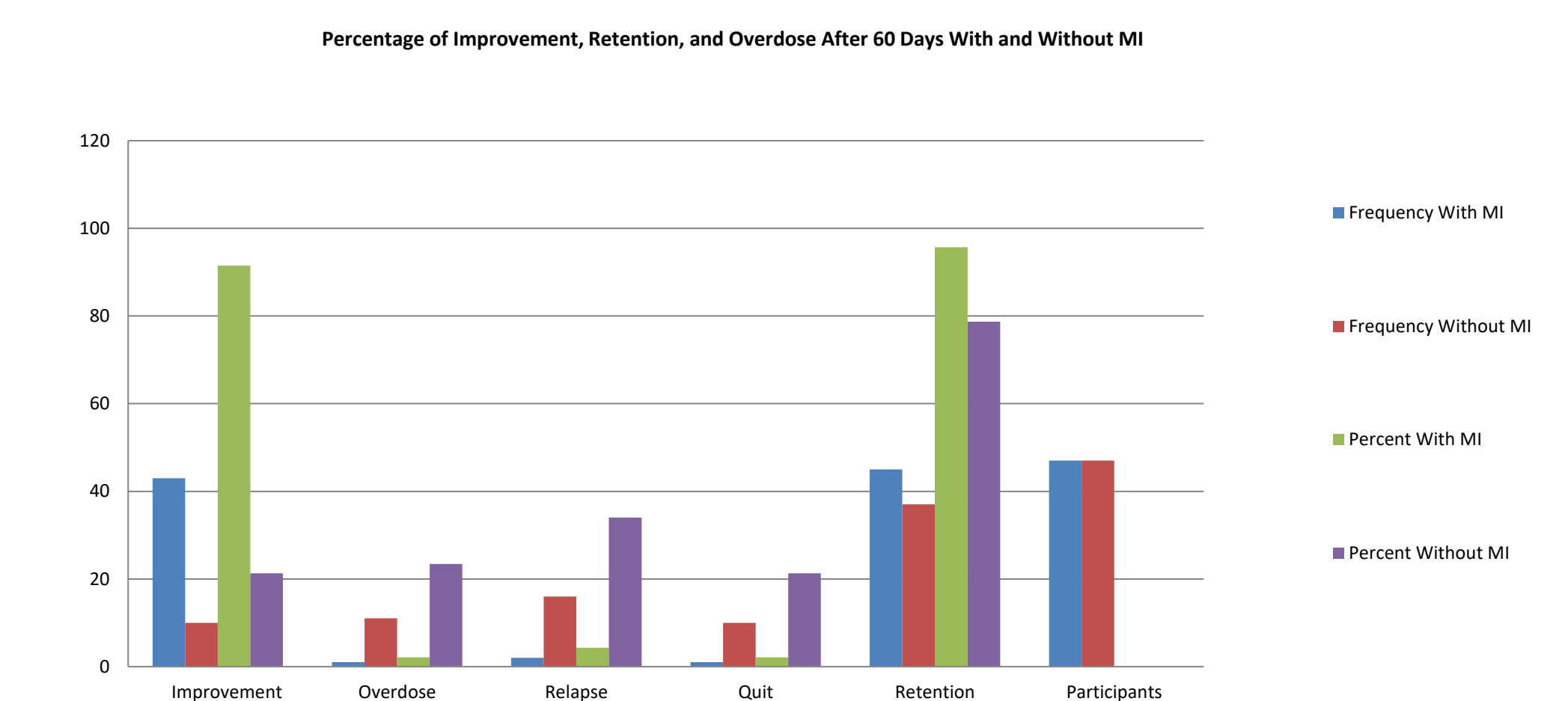


Figure 1: Percentage of Improvement, Retention, and Overdose after 60 days With and Without MI

Participation retention, overdose, and relapse with scheduled MI encounters compared with a previous year without MI show AWARE screening, and MI processes may help prevent post-discharge SUD overdoses

References

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