### Reaching the 95% (R95) Initiative

# Bidirectional Referrals Between Treatment & Harm Reduction Agencies

### **Strengthening Bidirectional Referral Relationships**

A key aim of Los Angeles County's R95 Initiative is to broaden the accessibility of substance use disorder (SUD) services through establishing a lower threshold system and better supporting abstinence as well as harm

reduction approaches to care. The goal is to design an SUD system that recognizes that recovery is a journey that is non-linear and unique for each individual.

Harm reduction and substance use treatment, while often considered to be on opposite ends of the spectrum of SUD care, are integral parts of the recovery journey and should both be available to individuals with substance use disorders (SUD) as based upon patient centered goals that evolve over time.





If harm reduction and abstinence are viewed as oil and water, the R95 Initiative aims to combine them into a fine vinaigrette. Clients engaged in harm reduction services may indicate an interest in treatment and benefit from referral to and care coordination with SUD treatment agencies. Similarly, clients engaged in treatment services may return to use as a symptom of their SUD and benefit from referrals to harm reduction services to reduce their likelihood of overdose, infectious disease transmission, and enhance access to needed services. The integration of these two approaches allows for services that meet clients where they are and deliver patient-centered care that is optimally effective for the client's stage of readiness for change.

To facilitate this culture change within the specialty SUD system in

Los Angeles County, Substance Abuse Prevention and Control (SAPC) has supported its provider networks in establishing formal bidirectional referral relationships between SUD treatment settings and harm reduction



agencies. This is an important step in expanding the reach of SUD services by better engaging those who may not have abstinence goals but may still be interested in SUD treatment, and designing a specialty SUD system where individuals at various levels of readiness for abstinence are welcomed and admitted into care.

For more information on SAPC's guidance for developing Memoranda of Understanding (MOU) between SAPC-certified harm reduction syringe service programs and SAPC contracted SUD treatment agencies, please visit: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services Guide: Establishing MOU.

#### **Bidirectional Referrals Between Treatment and Harm Reduction Agencies**

Build capacity to engage and train staff to better work with patients with non-abstinence goals of care. Ensure bidirectional pathway between SUD treatment and harm reduction services to engage a broader population of individuals with SUD, inclusive of those who may not be interested in complete abstinence but who may still be interested in SUD treatment.

#### **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 Non-abstinent 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.

### LEARN MORE ABOUT THE R95 INITIATIVE bit.ly/R95Initiative

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**SAPC** Substance Abuse Prevention and Control

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