Letter from Director

In 2020, Denver Health and Center for Addiction Medicine (CAM) responded to the COVID-19 Pandemic in unprecedented ways to ensure our patients continued receiving essential health services by expanding telehealth services across the system nearly overnight and safely escalating take home doses from our Opioid Treatment Program. We know that COVID-19 has disproportionately impacted people who have low income, experiencing homelessness, and have limited access to healthcare; these make up the majority of our overall Denver Health patients and our patients in treatment for substance misuse. To assess the impact of COVID-19 process changes on patients, CAM conducted an evaluation within our Outpatient Behavioral Health Services (OBHS). See results from our evaluation on the right.

As the pandemic brought on increased demand for behavioral health services, CAM was able to expand services to help identify, link, and retain patients with Alcohol Use Disorder, Stimulant Use Disorder, and patients who experienced an overdose, in addition to Opioid Use Disorder. Through our hub-and-spoke model of care, a total of 1,629 new unique individuals were served across our system, an increase of 382 new unique patients compared to 2019.

CAM’s workgroups made great successes this year; a few highlights include:

- The Continuum of Care Workgroup launched a new internal consult service called Denver Health Ask CAM TRAIL. Since September 2020, subject matter experts provided guidance in response to approximately 4 inquiries per month about how to treat/link patients with substance use disorders to appropriate treatment within Denver Health and the community.

OBHS RESPONSE TO COVID

Operations at Outpatient Behavioral Health Services (OBHS) were changed significantly in response to the COVID pandemic. Federal and State regulations were relaxed to allow extraordinary flexibility so that facilities were able to adapt while maintaining critical services. By allowing more clinical decision making in takeout doses of Medication Assisted Treatment (MAT), we were able reduce in person attendance for dose dispensing by almost 200 people per day.

There was an overnight move to allow telephone and televideo encounters with an increase in encounters and a decrease in no show appointments.
Letter from Director

- The Inclusive and Compassionate Care Workgroup conducted a system-wide inventory of existing internal trauma- and addiction-informed care training/trainers, which resulted in a CAM Speakers Bureau being established to educate and support more Denver Health staff. This team also developed and piloted an agency-wide trauma-informed care assessment that will be used to evaluate the impact of education and culture change over time.

- The Knowledge Management Workgroup built a registry within Denver Health’s electronic health records to be able to track and best serve our patients with Opioid Use Disorder (OUD) across the Denver Health system. This team also established an interactive dashboard for internal CAM Champions to be able to pull 2019 and 2020 OUD Continuum of Care metrics in various meaningful ways based on their interest (for example, where a patient started in the system versus where follow-up occurred).

- In 2020, CAM established a Community Voice Workgroup with the charge to ensure that the work of the CAM starts and ends with the community. In 2020, this team collected qualitative input from 2 community advisory boards to inform CAM workgroups and initiatives and provided feedback to these groups regarding how this input should be incorporated by the CAM.

CAM is committed to serving our most vulnerable populations through the crises that impacted our communities in 2020 including the long-standing issues surrounding racial injustice, the global pandemic, and the country’s political transition. CAM is committed to working towards equity, filling the gaps in treatment, and treating substance misuse like any other chronic medical condition through the “no wrong door” model of addiction medicine.

In closing, we want to recognize Lisa Gawenus as one of the founders and co-directors of CAM. She provided senior level behavioral health and systems change guidance for CAM from the beginning. Lisa recently left Denver Health; we want to celebrate all her efforts and wish her well in her new endeavors.

Judith C. Shlay, MD, MSPH  
Associate Director  
Denver Public Health  
Director Center for Addiction Medicine

Brooke Bender, MPH  
Public Health Planner  
Center for Addiction Medicine

OBHS RESPONSE TO COVID

When asked if there is anything OBHS can do to better support patients in care and treatment during this difficult time, patients responded:

“I think everything is going pretty well, I really think they have done a good job of planning around this big problem.”  
- OBHS patient

“No, you know what, you guys totally rock. You have helped me so much, every time I have to go in there, I appreciate you guys. I feel like the nurses are all out on the front lines and I am thankful. I thank the nurses all the time. I really appreciate (counselor) -- I have tears in my eyes because she has helped me immensely. She is just as important as the methadone”  
- OBHS patient

OBHS continues to increase services for clients most in need, there were 1,901 individuals seen in 2020, compared with 1,858 in 2019, with a 37% increase in patients experiencing homelessness between the two years.

Overdose attendance at Emergency Departments across Denver continued to rise, but the increase was slower for clients of OBHS services.

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**INNOVATIVE PROGRAMS**

**Treatment on Demand:**

742 UNIQUE PATIENTS

In 2020, Treatment on Demand expanded to provide services for patients with Alcohol Use Disorder, Stimulant Use Disorder, and those who experienced an overdose, in addition to patients with Opioid Use Disorder.

Compared to 2019, Treatment on Demand served more patients overall, addressed more substance use disorders, and retained more patients with opioid use disorder.

- **Substance Agnostic:** 742 unique patients, 799 episodes, 590 inductions, 69% linked, 52% 90-day retention
- **Opioid Use Disorder:** 566 unique patients, 616 episodes, 66% linked, 52% 90-day retention
- **Stimulant Use Disorder:** 72 unique patients, 73 episodes, 15% linked, 20% 90-day retention
- **Alcohol Use Disorder:** 76 unique patients, 80 episodes, 43% linked, 31% 90-day retention
- **Overdose:** 30 unique patients, 30 episodes, 7% linked, 100% 90-day retention

**Community Line:**

386 VOICEMAILS

This grant-funded program offers people in the community substance use screening, referrals, and information related to accessible opioid and non-opioid treatment options.

Compared to 2019, a higher percentage of calls resulted in a referral and patients being linked to care.

100% received call back, 30% received opioid information, 26% had referrals, 68% linked to care

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**Education & Promotional Efforts**

92 hours Addiction Medicine Education/Training.

400+ participants (Medical students, Residents, Fellows, Nurses, Physicians, Advanced Practice Providers, Pharmacists)

1600+ community members reached through online CAM Overdose Awareness efforts

8 Professional Learners (Residents/Fellows): 1 CDC Fellow, 1 Medical Resident, 6 Physician Assistant Psychiatry Fellows

36 Media stories related to CAM created community awareness: 124 million people

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**RESEARCH & EVALUATION**

**Grants:**

New Grants (comparison of the last two years)

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**Projects:**

Active Projects

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**Publications:**

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<tr>
<td>2020</td>
<td>19</td>
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**Conferences:**

2019 10 conferences, with 11 total abstracts presented.
2020 16 conferences, with 22 total abstracts presented.

**2020 Awards:**

- National Association of County and City Health Officials (NACCHO): Model Practice Award for CAM OUD Continuum of Care, PI - McEwen
- Denver Department of Public Health and Environment (DDPHE): MAT-PDOA HUB Provider Excellence in Project Partnership Award for Hub & Spoke Efforts, PI - Gawenus
- Colorado Consortium for Prescription Drug Abuse Prevention: Exceptional Leader Data Workgroup Co-Chair, PI - Al-Tayyib

**Evaluation Model:**

2019 Established novel evaluation model: Continuum of Care for Opioid Use Disorder, established baseline for 2017-2018
2020 Established 2018-2019 version of Continuum of Care for Opioid Use Disorder
Goal 1: INCLUSIVE AND COMPASSIONATE CARE
Ensure inclusive and compassionate care where all health care professionals treat patients with substance use disorders with respect and dignity, and improve patient outcomes.

Goal 2: FISCAL GROWTH AND FINANCIAL PARTNERSHIP
Enhance internal and external revenue streams to ensure quality services are accessible far into the future.

Goal 3: KNOWLEDGE MANAGEMENT
Enhance information systems to systematically improve processes, generate new knowledge and drive organizational outcomes.

Goal 4: FULL CONTINUUM OF CARE
Strengthen the continuum of care for people with substance use disorders throughout the Denver Health system and beyond. Ensure that patients receive the right level of care for their individual needs.

WHAT IS NEXT FOR CAM
• Establish a CAM Academy to provide education and technical assistance to Denver Health staff and community organizations on trauma- and addiction-informed care.
• Build out a Continuum of Care Evaluation Model for Alcohol Use Disorder to help us better understand the true incidence, impact of interventions, and opportunities for improved identification, linkage, and retention in services.
• Continue to provide the highest quality treatment and supportive care to our most vulnerable populations throughout the rest of the pandemic.

For more information please visit our website www.DenverHealth.org/CAM or email us at: CAM@dhha.org