Reaching the 95% (R95) Initiative

# Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services

**Establishing Memoranda of Understanding** 

## **Overview**

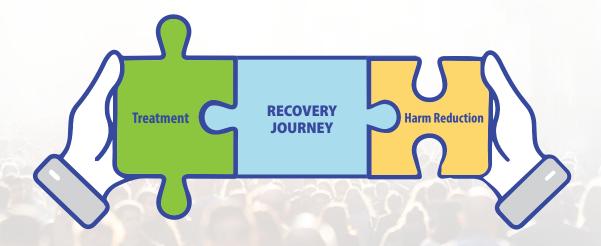
SAPC recognizes the historic organizational and programmatic divide that commonly separates substance use treatment agencies and harm reduction service providers. Coordination of both treatment and harm reduction services enables SAPC-contracted agencies to deliver a full continuum of substance use services aligned with patient and community needs.

Agencies establishing Memoranda of Understanding (MOU) for bidirectional referrals between substance use treatment and harm reduction services should commit to collaboration and making the necessary cultural and operational shifts to ensure the clients they



serve at various stages of readiness for abstinence all have access to both treatment and harm reduction services. Agency leadership and MOUs should focus on the following ongoing activities in support commitment:

- Maintaining discussions with staff (through individual/supervision/staff meetings, office hours, and other areas of staff supervision and development) to create space to share perspectives and concerns about the provision of harm reduction services for people who may or may not abstain from using substances.
- Providing clarity that aligns the agency's strategic direction and staff efforts toward the goal of a comprehensive range of harm reduction and substance use treatment service access for their service recipients, depending on their continually evolving needs.







- Develop and institute: (1) processes that build the continuum of care across harm reduction and substance use treatment providers; (2) methods to evaluate the integration of said services; and (3) measurement of outcomes accordingly.
- Demonstrate ongoing quality improvement and service adjustments that advance this integration approach based on outcomes and feedback obtained from staff, service recipients, and other essential stakeholders.

## **Agencies Certified by SAPC to Provide Harm Reduction Syringe Services**

SAPC's Harm Reduction Syringe Services Program (SSP) Certification process is described in SAPC-IN 22-09 Harm Reduction Syringe Services Program Certification.

RecoverLA maintains a list of SAPC-certified harm reduction syringe service agencies:

http://www.recoverla.org/staying\_safe/syringe-exchange-also-known-as-needle-exchange

SAPC-contracted harm reduction syringe service programs are designated as Engagement and Overdose Prevention Hubs (EOP Hubs) and are listed on SAPC's website: Click here to view the list of EOP Hubs. SAPC EOP Hub agencies are required to obtain and maintain SAPC's certification as a harm reduction syringe services program.

## **Memorandum of Understanding (MOU) Components**

The written agreement shall include:

#### **Established Communication Protocol**



- Both parties shall have designated key points of contact within their respective organizations to coordinate communication and collaboration between organizations.
- Both parties have and will continue to arrange and conduct scheduled meetings that advance the aims of this agreement and have designated communication channels established to facilitate ongoing collaboration.

## **Established Referral Pathway**



- Both parties shall have organized a clear referral process to connect service participants who are engaging in harm reduction services with substance use treatment services.
- Both parties shall have agreed upon criteria for low-threshold initiation of treatment services that support prompt and efficient linkage of SSP service recipients to substance use treatment available at a treatment agency.





## **Care Coordination**



Both parties shall have established and shall maintain protocols ensuring care coordination for service recipients served by the agencies' Inter-Agency Training (SSPs).

Both parties shall have agreed on a plan for staff training that enhances mutual understanding of each of the agencies' respective goals, services, and treatment orientations consistent with the principles of harm reduction.

# **Information Security**



Both parties shall maintain confidentiality protocols compliant with all applicable privacy laws and regulations, including but not limited to HIPAA and 42 CFR Part 2, that maintain confidentiality for patients, family members, and service recipient records.

# **Service Recipient Feedback**



shed a mechanism for obtaining feedback from service recipients regarding their experiences, including but not limited to successes and barriers of receiving services at the agencies.

The agencies shall use the feedback to improve care coordination and service delivery.



