The Adolescent Substance Abuse Program at Boston Children’s Hospital

Sharon Levy, MD, MPH

Director, Adolescent Substance Abuse Program
Boston Children’s Hospital

Assistant Professor of Pediatrics
Harvard Medical School
New intakes from a typical week in ASAP

• 14 year old; 3 ED visits for alcohol
• 15 year old; suspended from school for marijuana use
• 16 year old; referred by police after they broke up a party
• 18 year old; expelled from college for selling pain meds
• 17 year old seeking meds for heroin addiction
Services offered

- Individual and group counseling
- Parent guidance

Psychopharmacology
- Depression
- Anxiety
- ADHD
- Bipolar disorder

Drug testing

Medication assisted treatment (MAT) for opioid use disorders
Behavioral Health Substance Abuse Curriculum

Session 1
Intro to teen SU
SBIRT and MI

Session 2
Marijuana
Drug testing

Session 3
Opioids
New drugs of abuse

Case-based discussion
FOUR LEGS TO STAND ON

AN ORIGINAL THERAPEUTIC THEATER PIECE
The 18-year-old patient has been having blackouts while drinking and refuses to seek help.

Patient is very concerned about his use of tobacco, marijuana, cocaine, and alcohol and is looking for help.

Parents called yesterday because they caught their son "taking white pills."
Prerequisites

- Behavioral learning community
- Integrated mental health provider on site
- Use the CAP call line
- Buprenorphine-waivered
Scalability: N=90 PPOC practices

- 37% Already met criteria
- 38% In process
- 25% To start in 2018
Integration Challenges

CFR 42, Part II
Integration Challenges

Emergencies
Integration Challenges

Emergencies
Integration Challenges

Additional Training

Confidentiality  Model of care  Neurobiology and the developing brain
Integration Challenges

New clinical workflow

1. Presenting Complaint
2. Referral to Substance Abuse Service
3. Initial Evaluation
4. First Follow-Up/Treatment Plan
5. Patient Screened Using S281
   - Positive Screen
     - Referral to HLOC
     - Outpatient Services Wareham Peds.
     - Additional Community Resources
     - Outpatient Services Wareham Peds.
     - Individual Substance Abuse Counseling
     - Medication-Assisted Treatment
   - Negative Screen
     - Positive Reinforcement
     - Rescreen - Yearly/next visit

© Boston Children’s Hospital 2016. All Rights Reserved. For permissions contact ASAP project manager at asap@childrens.harvard.edu
Will kids really come?
### First 2 Weeks

<table>
<thead>
<tr>
<th>Patients referred</th>
<th>10</th>
</tr>
</thead>
</table>

© Boston Children’s Hospital 2016. All Rights Reserved. For permissions contact ASAP project manager at asap@childrens.harvard.edu
First 2 Weeks

<table>
<thead>
<tr>
<th>Patients referred</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appointments completed</td>
<td>7 (3 scheduled for future)</td>
</tr>
</tbody>
</table>
## Expansion

<table>
<thead>
<tr>
<th>Patients referred</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appointments completed</td>
<td>7 (3 scheduled for future)</td>
</tr>
<tr>
<td>Age range</td>
<td>12-18</td>
</tr>
</tbody>
</table>
# Expansion

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients referred</td>
<td>10</td>
</tr>
<tr>
<td>Appointments completed</td>
<td>7 (3 scheduled for future)</td>
</tr>
<tr>
<td>Age range</td>
<td>12-18</td>
</tr>
<tr>
<td>Parental involvement</td>
<td>5</td>
</tr>
</tbody>
</table>
## Expansion

<table>
<thead>
<tr>
<th>Patients referred</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appointments completed</td>
<td>7 (3 scheduled for future)</td>
</tr>
<tr>
<td>Age range</td>
<td>12-18</td>
</tr>
<tr>
<td>Parental involvement</td>
<td>5</td>
</tr>
<tr>
<td>Cancellations/no-shows</td>
<td>0</td>
</tr>
</tbody>
</table>
## Expansion

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients referred</td>
<td>10</td>
</tr>
<tr>
<td>Appointments completed</td>
<td>7 (3 scheduled for future)</td>
</tr>
<tr>
<td>Age range</td>
<td>12-18</td>
</tr>
<tr>
<td>Parental involvement</td>
<td>5</td>
</tr>
<tr>
<td>Cancellations/no-shows</td>
<td>0</td>
</tr>
<tr>
<td>Substance use noted previously</td>
<td>5</td>
</tr>
</tbody>
</table>
## Expansion

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients referred</td>
<td>10</td>
</tr>
<tr>
<td>Appointments completed</td>
<td>7 (3 scheduled for future)</td>
</tr>
<tr>
<td>Age range</td>
<td>12-18</td>
</tr>
<tr>
<td>Parental involvement</td>
<td>5</td>
</tr>
<tr>
<td>Cancellations/no-shows</td>
<td>0</td>
</tr>
<tr>
<td>Substance use noted previously</td>
<td>5</td>
</tr>
<tr>
<td>Substance use plan in chart</td>
<td>2 (both received Brief Advice)</td>
</tr>
</tbody>
</table>
Policy Statement
Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of all Children

Medication-Assisted Treatment of Adolescents With Opioid Use Disorders

Committee on Substance Use and Prevention

How the paediatric workforce can address the opioid crisis

About 17 million people worldwide engage in heroin and non-medical prescription opioid use, resulting in a public health emergency with substantial morbidity and mortality. In parts of North America and western Europe, overdose deaths have surpassed motor vehicle crash fatalities, and even the US presidential campaign has pivoted to addressing the opioid crisis as a national issue. Recognising young people commonly receive care from a paediatrician or general practitioner during adolescence and young include medication, care gaps are similarly concerning internationally. Paediatricians who prescribe medications for opioid use disorder are rare, and many general practitioners do not offer medications to adolescents. Yet when they intervene early, providers caring for young people have a unique opportunity to avert a life-course trajectory of opioid addiction and its harms. Paediatric providers are therefore a vital but insufficiently mobilised component of the worldwide opioid response.


© Boston Children’s Hospital 2016. All Rights Reserved. For permissions contact ASAP project manager at asap@childrens.harvard.edu
March 2017

Dear Patients,

We are pleased to share that we now offer Medication-Assisted Treatment (MAT) at Wareham Pediatrics. If you or someone you know has a problem with pain medications and could use some help, please feel free to contact us. For more details regarding MAT, please see the attached fact sheets.

Sincerely,

Wareham Pediatrics Staff
Pilot Sites

Bridgewater Pediatrics

Wareham Pediatrics
Deliverable: Manual of procedures

• Confidentiality
• Intake and referral
• Evaluation
• Treatment services
• Documentation

• Coordination of care
• Community resources
• Psychiatric emergencies
• Child protection
• Training materials
Future Directions
The Addiction Medicine Foundation
Advancing Medical Practice in Addiction Prevention and Treatment
Future Directions

National Drug Abuse Treatment
Clinical Trials Network

© Boston Children’s Hospital 2016. All Rights Reserved. For permissions contact ASAP project manager at asap@childrens.harvard.edu
Senator Warren on ASAP
Evidence-based therapies

Developmentally appropriate strategies

Address the full spectrum of substance use problems and disorders

Family involvement

ASAP Philosophy