

# New program successful in reducing service and substance use among frequent health care users

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A program co-led by St. Michael's Hospital could be the next widely used model to treat patients who are frequent users of the health care system and have severe addictions, often complicated by homelessness and mental health problems.

The Toronto Community Addiction Team (TCAT) was developed to improve health and social outcomes for people with [addictions](#) who are frequent users of health services by providing one-on-one intensive case management from a harm reduction approach. The team works with clients to provide services such as individual therapy, finding a physician, securing housing, managing budgets and care plans that are based on clients' strengths and choices.

"Developing interventions to engage these frequent users in community-based care and alleviate pressures from costly hospital-based services – which are not designed to meet their needs – is a system priority," said Dr. Vicky Stergiopoulos, psychiatrist-in-chief at St. Michael's Hospital and evaluation lead for the program. "The TCAT is a great example of a client-centred approach that works to do exactly this. It shows promise in reducing re-admission rates which can ultimately save money for the [health care system](#)."

The program provides city-wide mobile intensive case management for people with frequent re-admissions to a withdrawal management system

– 10 or more in a year – and and/or hospital emergency departments – 20 or more in a year.

"Many of these patients cycle between jail, the shelter system, withdrawal management and hospitals," Dr. Stergiopoulos said. "They can't access services, and the services are not helpful because many of them only accept patients who are at a different place in the recovery process. The TCAT works on strength-based principles and supports people from a harm reduction orientation. The program is uniquely focused on empowering the client by promoting respect and dignity so they can make their own choices."

Dr. Stergiopoulos led the program evaluation, published online in the journal *Substance Use and Misuse* this month.

Based on interviews with clients and a review of records from the Withdrawal Management System, the results found a statistically significant decreases in service use, alcohol and drug use. Clients also described increased access to primary and psychiatric care and increased collaboration with various stakeholders within the wider system of care.

Dr. Stergiopoulos said the goal is to divert care for these patients from a place like the emergency department to the community because it can improve outcomes for both the patients and the system.

"This model worked well in the city of Toronto, and may be considered in other large urban centres that face similar challenges with frequent service users who have alcohol and drug related problems, often complicated by homelessness and lack of support and resources," she said.

Provided by St. Michael's Hospital

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