

OBAT Treatment Agreement and Clinic Policies

Treatment Agreement Goals:

- Engage patients in the treatment plan along with the OBAT team. Encourage patient involvement in their treatment.
- Provide reassurance about common issues, such as concerns about entering treatment (provide education around options and support), the risks of transferring care from one form of medication treatment to another, or ambivalence about such changes.
- Reinforce that a substance use disorder is a chronic medical condition that affects numerous aspects of a person's wellbeing. The OBAT team will support the patient throughout the recovery process, especially in the event of recurrent or ongoing use.
- Provide an opportunity for patients to ask questions and learn about available resources.
- Standardize treatment requirements across all staff members in the clinic to better assist the patient in reaching their recovery goals.
- Provide clarity and set expectations for both patients and the treatment team. For example:
 - The patient can expect:
 - To be treated with dignity and respect.
 - To be notified if the office is closed and how to seek assistance if needed.
 - That confidentiality will be maintained in compliance with CFR 42.
 - To have a means for contacting a member of the OBAT team or a colleague for emergencies at night, weekends, and when the office is closed.
 - The OBAT team can expect:
 - To be treated with dignity and respect.
 - To be notified if the patient is unable to attend an appointment.
 - To have an updated means for contacting the patient to assist with treatment needs.

Treatment Agreement Components:

The areas addressed and the level of detail in the treatment agreement should be catered to clinic needs, with the larger goal of ensuring individualized and patient-centered care. It is important that the treatment agreement reflects the practices of the clinic and is periodically reviewed to ensure that safety and harm reduction strategies are at the forefront. Depending on the setting, treatment agreements can range from two sentences long to more lengthy documents. The following information may or may not be addressed in the treatment agreement.

- *Clinical Appointments:* All patients who participate in the OBAT program must attend appointments with their OBAT providers and nurses. Appointments with the OBAT team are part of the treatment plan. It is the patient's responsibility to reschedule appointments if needed.
- *Random Call-backs:* To monitor and verify the proper use of the buprenorphine, the OBAT nurse may sporadically call the patient to come into the clinic for a random toxicology test and a medication count. The patient must return this call promptly and come to the clinic within 24 hours of the initial call with the medicine bottle and all of the remaining buprenorphine tablets or films. For this policy to function, the team must have current and accurate contact information; patients should be encouraged to keep this information up to date with staff. If the patient does not return for a random callback monitoring visit, then the OBAT team will meet and reassess the treatment plan with adjustments (e.g., shorter times between office visits, shorter prescriptions, no refills, etc.). While random callbacks may be a useful tool for assessing medication adherence, the goal is for providers and staff to cultivate a trusting relationship with patients for the disclosure of substance use or lack of medication use, for this is more beneficial for reaching overall treatment goals.
- *Counseling:* Patients are strongly encouraged to engage in counseling and/or similar intensive recovery support services; if needed, patients should receive assistance with referrals and linkages for counseling and recovery support programs from OBAT staff. Patients should not be discharged from the OBAT program if they do not comply with the counseling recommendation, as these individuals may be at increased risk for ongoing substance use and overdose. However, patients who do not engage in counseling or outside recovery support services should receive more intensive monitoring from the OBAT team.
 - Patients receiving counseling through external organizations should sign a consent to release information for OBAT staff to communicate with their therapist in order to promote recovery through coordination of care.
 - Groups, Intensive Outpatient Program (IOP), Partial Hospitalization Programs (PHP), residential programs, and halfway houses are methods of treatment that are accepted as counseling.
 - If a patient's counselor or other medical provider recommends that they seek psychiatric evaluation, then the patient is required to follow through with this and the decided-upon plan of treatment.
 - Educate patient at the onset of treatment and throughout care about the importance of adjunct counseling and recovery support and their role in recovery. Reinforce that medication alone rarely addresses all aspects of recovery, and building recovery capital will improve their chances of success.
 - Reinforce that recovery is a process that will take a lot of support, time, and commitment. Attending peer-support groups may not be the right treatment modality for the patient at the start of treatment but something that they may

choose later on. They may also decide that peer-support groups are not helpful and pursue other recovery support options. It is important that the patient is empowered and given options.

- AA, NA, and SMART Recovery are examples of self-help treatment options.
 - For some patients, getting a sponsor or forming a healthy relationship with another person in recovery may be a goal towards which they work. Patients often report that making this connection is an important piece of their recovery process.
 - Handing out AA, NA, SMART Recovery, and other meeting books, or providing their websites to patients, is a way to assist patients by highlighting some meetings near their work or home at hours that are convenient for them.
- *Medication Refills:* Prescriptions are processed following a scheduled visit (telehealth, office, or group) or phone encounter. Patients are expected to take their medication as directed and to store it in a secure and safe location. Prescriptions should last until the next scheduled appointment. Patients must keep their scheduled appointments to obtain refills. It is encouraged that patients communicate openly with their treatment team regarding the amount of medication they are taking. Buprenorphine is a controlled substance, so patients may not be able to refill prescriptions early, including in the case of lost or stolen medication. It is ideal for patients to have an identified pharmacy whose information is kept on file to decrease the risk for pharmacy issues or red flags due to numerous pharmacies noted on the PDMP. It is strongly advised that patients do not carry buprenorphine on their person. Patients are expected to disclose to OBAT staff if they are being seen by other providers (e.g., pain management specialists, psychiatrists, counselors, physicians, etc.) and whether they have been prescribed medications by these providers.
 - *Toxicology Screening:* Toxicology samples are utilized to assess treatment progress. While sample collection is a monitored process, observed sample collections are discouraged. In the event of a questionable sample, the patient will meet with the OBAT NCM to discuss any concerns. This may occur before and/or after a repeat toxicology sample is requested. At this time, it is important for the NCM to ensure that the OBAT treatment team is here to assist in the recovery process and that disclosing substance use is an important component of that process.
 - *Behavior Agreement:* Patients, visitors, and staff are expected to maintain appropriate behaviors in the clinic and on the grounds of the OBAT program. As a patient in the OBAT program, the patient has made a voluntary decision to participate in this program. To provide an optimal treatment environment for all patients, they are expected to maintain appropriate behaviors including those listed below. A safe and supportive treatment environment is critical in promoting recovery; thus, behaviors that violate this policy may be grounds for discharge from the program.

- No illegal activities in the clinic environment or on hospital grounds.
- No disruptive behavior (loud or aggressive behavior, etc.) will be tolerated in the clinic.
- No verbal or physical threats towards anyone (including OBAT staff, clerical, pharmacy, other patients, etc.) will be tolerated.
- No weapons or other harmful objects are allowed on clinic property.