Peer Addiction Recovery Volunteer Program

The Problem

BIDMC has many patients with substance use disorders and this population is high risk. BIDMC saw over 5,000 patients in 2016 who were diagnosed with substance use disorders (SUDs). A 2015 study found that nearly half of BIDMC's surgical endocarditis patients with injection drug use died within one year of their cardiac surgery.

In the acute setting, the immediate medical issue that precipitated the hospitalization takes priority over the chronic SUD. Social work can offer some counseling, but often needs to prioritize other aspects of care, such as family meetings, safety concerns, resource needs, and discharge barriers. The underlying substance use disorder can go unaddressed.

Aim/Goal

Peer addiction recovery volunteers are people who are in long term recovery from substance use disorders. They see patients individually for peer addiction counseling. The goals are to provide an additional form of addiction treatment by:

- Initiating addiction treatment *during* an acute medical hospitalization;
- Using the hospitalization as a "reachable moment"
- Giving patients a positive experience of a sober support;
- Giving patients hope that living in recovery is possible.

The Team

The Injection Drug Use and Serious Infection Workgroup provided the inspiration and support for the project. This workgroup has members from Infectious Disease, Cardiac Surgery, Cardiology, Ethics, and Social Work.

The Interventions

Any member of the medical team can refer a patient to the program by consulting their social worker. *Patients should be willing to meet with the volunteer.*

Social work arranges the visit with patient and volunteer.

Volunteer meets with the patient at bedside one or more times. They discuss whatever is most relevant to the patient's concerns of substance use.

Progress to Date

From August 2016 to Feb 2016, two volunteers saw 15 patients, often multiple times. Examples of themes addressed:

- Motivators for recovery;
- Finding hope;
- The value of lasting recovery support relationships;
- Identifying sources of help, asking for help;
- Concrete strategies for staying abstinent, such as deleting certain contacts from phone;
- Processing perceived stigma.



Peer volunteers are available during business hours (Mon-Fri 9a.m.-5p.m.) for inpatients who are contemplating or are already in recovery from substance use disorders.

Is your inpatient:

- Concerned about substance use, or already in recovery from a substance use disorder?
- Willing to meet with a peer volunteer to talk about his or her concerns and recovery?

If yes, make a referral to the peer support program!

Get started by contacting your floor social worker or the Social Work Department at 617-667-3421.



Lessons Learned

- Inspiration: "I could see myself doing that someday."
- A chance to talk openly about substance use concerns is valuable to patients.
- To get referrals, promotional work is needed.
- Best when the volunteer can see patients very flexibly and with short notice.
- Some patients have asked for a peer who matches them on gender.
- The volunteers had valuable opinions about the way patients are treated and about how our addictions programs are developed.

Next Steps

- Continue publicizing the program to gain more referrals;
- Add new volunteers of different gender, race, cultural backgrounds and substance of choice to better match patient demographics. Add family support volunteers;
- Peer advisory group to help guide BIDMC's addictions work to be relevant and affirming for patients.

For more information, contact:

Beth Israel Deaconess | HARVARD MEDICAL SCHOOL | THE SILVERA Medical Center | For Health Car

THE **SILVERMAN INSTITUTE**For Health Care Quality and Safety