Hubert H. Humphrey Comprehensive Health Center





The Team...



Gina Rossetti MD, Sandra Lucero SUD, Karineh Mahdessian CSW

Our fearless leader...



Raymond Perry MD MS

Our ATSH Team

Our Core MAT Team:

- Raymond Perry MD MS, Director
- Gina Rossetti MD, Associate Medical Director (project lead)
- Sandra Lucero, Substance Abuse Counselor
- Karineh Mahdessian MSW, Medical Case Worker
- Our Site's MAT Team by Function and FTE:
 - MAT Prescribers: one physician prescriber
 - Nursing: possible RN case manager looking into it
 - Social Work: one social worker, one substance abuse counselor
 - Behavioral Health: one medical case worker

Current State [site level]

- Our community: Underserved urban population in South Los Angeles, integrated behavioral health clinic on site with a substance abuse department
- Current state:
 - Short description of our MAT program: we are brand new and open to anything!
 - Capacity: one waivered provider with plans to add 2-3 additional providers
 - Patient population: no current MAT patients
- Goals for ATSH participation:
 - Start a brand new MAT program!
 - Focus on patient recruitment, multi-departmental engagement, initial prescribing, and testing work flows.

Capability Assessment: What We Learned

- In completing the assessment, we were surprised by: the fact that we are doing well in some categories even though we are starting from square one.
- Our team's areas of strength: our passion, engagement, and integrated substance abuse clinic
- Areas for development: Initial MAT workflows, patient recruitment, and multi-departmental engagement

Current State Assessment

- We used the following methods to learn more about our current state: patient, provider and staff surveys
- We spoke to:
 - Staff
 - Providers
 - Substance Abuse Clinic patients
- From providers and staff we learned: open to referring to a MAT clinic, not clear on the details and benefits of MAT
- From patients we learned: 1) Our SUD patients would definitely be interested in MAT for their specific substance if applicable. 2) They appreciate their SUD treatment being integrated with primary care in one centralized location. 3) They report establishing rapport with staff more quickly because of the integration.
- Other insights we gathered from current state activities: We have a lot of foundational work to do.
- We received the following feedback on the appropriateness and acceptability of using MAT in our clinic: It is appropriate and accepted by staff/providers/leadership.

Our Team Has Been Wondering...

Our questions to other teams:

- How long did it take you to develop a moderate sized MAT patient panel (i.e. 20 patients)?
- What made you successful in doing that?
- How many prescribers do you have?
- How did you engage your PCMH providers and staff?
- How do you recruit patients?
- Our questions for faculty: What are the most important foundational operations that we should focus on first?
- We need support to accomplish: All of the above!