



everyone deserves a 2nd chance...

2nd Chance Background

- Established in 2012
 - Tuyen T. Tran, MD, MBA (began in 2008)
 - Marvin A. Bishop, MD, MBA
- Response to the addiction crisis

Vision/Mission Statements

- Vision:

- ❖ 2nd Chance will partner with community stakeholders to combat the opioid epidemic and alcohol use disorder at the local, state, and national level

- Mission:

- ❖ 2nd Chance provides comprehensive Evidence-Based Treatment in a dignified manner to patients afflicted with opioid and alcohol dependence

Comprehensive Treatment Program for Opioid and Alcohol Dependence

- Treat patients with dignity
- Evidence-based medical therapy
- Psychosocial therapy
- Case management
- Peer support

2nd Chance Current Status

- Average unique patients/month: 1200
- Average encounters/month: 2200
- MOUD (Medications for Opioid Use Disorder)
 - Buprenorphine products
 - Naltrexone
- Psychosocial therapy
 - Masters level Individual and group counseling
 - Hazelden protocol
- Case Management
- Peer Support

Community Collaboration

- Jubilee Jobs
 - Assist patients who have been stabilized to obtain gainful employment
- The Nest - Center for Women, Children and Families
- College For Technical Education
- StrongWell (pregnant patients)
- NAMI (National Alliance on Mental Illness)
- Baptist Health – bridging the gap

Success Metrics

- JAMA (Wakeman, 2020)
- Comparative effectiveness retrospective study of 40,885 adults with OUD
 - 1) No treatment
 - 2) Inpatient detoxification or residential services
 - 3) Intensive behavioral health
 - 4) Buprenorphine or methadone
 - 5) Naltrexone
 - 6) Nonintensive behavioral health

JAMA (Wakeman, 2020)

- Main Outcomes and Measures:
 - Opioid-related overdose or serious acute care use
 - During 3 months and 12 months after initial treatment
- Results: Only treatment with buprenorphine or methadone was associated with:
 - 3 month reduction overdose (AHR, .24, 95% CI, 0.14-0.41)
 - 12 month reduction overdose (AHR, 0.41, 95% CI, 0.31-0.55)
 - 3 month reduction of serious opioid-related acute care use (AHR, 0.68, 95% CI, 0.47-0.99)
 - 12 month reduction of serious opioid-related acute care use (AHR, 0.74; 95% CI, 0.58-0.95)

Treatment with buprenorphine or methadone

- Will save healthcare costs
 - Reduced acute care use
 - Reduced ED visits
- Will save lives
 - Reduced overdose rates

OUD Success Metrics

- Initiation of pharmacotherapy upon new episode of opioid dependence
- Use of opioid dependence pharmacotherapy during a measurement year
- Maintenance pharmacotherapy for substance abuse
- OAT (Outpatient Addiction Treatment) as first line of defense for at least 90 days of treatment at beginning of a new treatment episode

OUD Success Metrics

- Duration of OAT for selected SUD patients
- Maintenance pharmacotherapy for opiate dependence at empirically based dosages: 1) offered; 2) filled; 3) refused medication; or 4) contraindicated
- Counseling on psychosocial and pharmacologic treatment options for opioid addiction



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2nd Chance Clinic is requiring all patients to bring a mask to every appointment.

We are closely monitoring the situation regarding the COVID-19 pandemic, and have processes in place to protect our patients and staff.

We ask for your patience and understanding as some of these processes may result in longer wait times during your appointment. 2nd Chance Clinic remains committed to providing addiction treatment during this time.



**Are You An Adult With Opioid Addiction Or Alcohol
Dependence?**

We can help.

QUESTIONS?

- CONTACT INFORMATION

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