

Improving Housing Referrals and Treatment Participation in an Outpatient Substance Use

Disorder Treatment Program

Abstract

NR.210.899.8201.SP20 Project Evaluation

Claire Tindula

The Johns Hopkins University School of Nursing

On my honor I pledge that I have neither given nor received any unauthorized assistance
on this assignment. – Claire Tindula, 26 April 2020

Abstract

Purpose: The purpose of this project was to improve the coordination of housing services and treatment participation for clients of an outpatient substance use disorder (SUD) treatment center who are experiencing homelessness through the development of a database of housing resources and updated housing referral process.

Methods: This was designed as a quality improvement project. A convenience sampling method was used to select client charts for review to address the project aims and determine the impact of the interventions mentioned above. Baseline data on demographic and treatment information was gathered via retrospective chart review on clients admitted to the center in three-month periods prior to and following implementation of the interventions.

Results: A total of 120 client charts were reviewed (70 from the baseline sample and 50 from the post-intervention sample). Demographic information (age, sex, race, education level, number of substances used, number of co-occurring medical and psychiatric conditions, type of medication-assisted treatment (MAT), and housing status on admission) were not significantly different between the two groups. There was no change in the proportion of clients referred for housing before and after the interventions. No statistically significant relationships were found between housing referral status and markers of engagement in treatment (positive urine screens, hospital and emergency department (ED) admissions, average group attendance, and early departure from treatment).

Implications: Despite the lack of statistically significant relationships between the variables studied, this project produced clinically significant outcomes, including increased awareness of housing issues, a revised housing referral policy, and a resource document. The demographic and treatment information gathered also provided valuable information about the center's population

that may be used in future initiatives at the project site. Additionally, the framework for the study and lessons learned provide opportunities for growth and adaptations of the project at this site and in similar settings.