

Implementing Substance Use Disorder (SUD) Services in HIV Care Settings

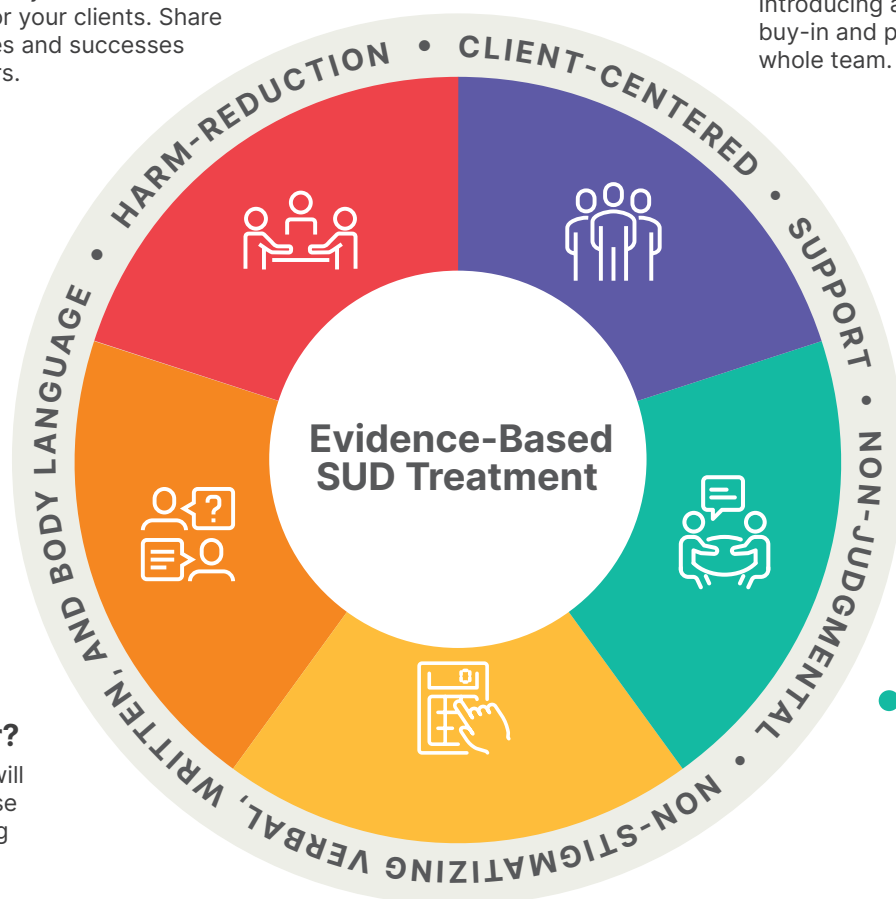
This toolkit of linked resources was created for use by multidisciplinary healthcare team members to improve substance use disorder (SUD)-related health outcomes for people with HIV with SUD(s) in all stages of recovery. The resources have been organized into five components to assist in full implementation of interventions ranging from the use of evidence-based SUD assessments, diagnosing, harm reducing education and resources, behavioral health services, and medication-assisted treatments. Clinic-wide non-stigmatizing and supportive messaging among the entire clinic team is essential as is maintaining financial sustainability to provide for the time and efforts of team members providing these services along with other HIV-related care services. As with the HIV care continuum, each component of the SUD care continuum (prevention, screening, diagnosing, engagement, behavioral health therapy including medication-assisted treatment [MAT] when appropriate) is equally important. Check out the resources in each of the following components and feel free to use them or tailor them to best meet the needs of your patient population.

● With whom should we connect?

Identify and set up relationships with any outside partners for SUD care, support, and needed services. Try to establish a seamless system of care for your clients. Share your SUD services and successes with your partners.

● Is everyone on board?

Introducing a new service requires buy-in and participation from the whole team.



● What do we have to offer?

Which services will you offer in-house versus partnering with an outside agency.

● Who's on first?

Determine the roles for each of your team members, and what kind of training and support they will need to succeed.

● How are we going to support this?

Plan and implement funding, billing, and reimbursement systems.

Resources to assist with each component:

● Is everyone on board?

- [Mental Health/Substance Use Care Clinic/Health Center Readiness Assessment Tool](#)
- [Words Matter: The Power of Language to Strengthen Services for HIV and Substance Use Disorder Discussion Guide](#)
- [Interrupting Stigma: A Conceptual Map Depicting Stigma Pathways & Intervening Strategies at the Intersection of HIV and Opioid Use Disorder Toolkit](#)
- Are all subpopulations included in plan? (i.e., adolescents & young adults, LGBTQ+ clients, women, pregnant individuals, clients older than 50 years, all clients with SUD diagnosis even if not HIV and or HCV virally suppressed)

● Who's on first?

- [Clinical team member roles in the process \(screening, diagnoses and treatment, harm reduction and education, follow-up\)](#)
- [The New Comprehensive Healthcare Integration Framework, National Council for Mental Wellbeing](#)

● How are we going to support this?

- [Reimbursement for Medications for Addiction Treatment Toolkit](#)
- [State Strategies in Action: Building Relationships with Your State Medicaid Agency to Support Peer Services](#)

● What do we have to offer?

- [Screening](#)
- [Motivational Interviewing](#)
- [SBIRT](#)
- Harm Reduction Counseling: [A Safety Manual for Injection Drug Users](#), [Harm Reduction at SAMHSA](#)
- [Cognitive Behavioral Therapy](#)
- [Contingency Management](#)
- [Tobacco Use Cessation](#)
- Medication-Assisted Treatment (MAT) for [opiate](#) use disorder or [alcohol](#) use disorder
- [American Society of Addiction Medicine Criteria Assessment Interview Guide](#)

● With whom should we connect?

- Emergency Department (alcohol withdraw)
- [Inpatient Care \(detox\) or Residential Treatment Center or MAT](#)
- [Harm Reduction Center](#) (SSPs, SAPs)
- [Outpatient Treatment Center](#)
- Mental health professional(s) for mental health therapy
- [Crisis Intervention, Suicide hotline](#)