FRN 2016 Research and Outcomes One Year Post-Treatment

Introduction

Outcomes are an important measure of organizational performance and quality. Many programs in the addiction treatment industry generate their “success” rates based on “successful completion of (their) programs.” This is not a fair reflection of the goal of treatment and not an accurate measure of organizational performance or the quality of services.

Foundations Recovery Network reports on how our patients are doing after they receive treatment at one of our centers. These are not individual case studies, but actually the result of years of data collection both at treatment intake and again at one month, six months and 12 months after treatment. We refer to these as outcomes. By meeting guidelines for enrollment and response rates from SAMHSA, we are able to say that the outcomes reported in this white paper are typical or reflect reasonable expectations.

Healthcare in general is a data-rich environment which means that healthcare providers have the opportunity to measure many different types of outcomes using data collected before, during and after treatment is provided. In 2016, FRN abstinence rates reported by patients at each time point not only exceed the national average (as reported in White, 2012) but also exceed prior years’ performance. FRN treatment settings continue to improve and produce sustainable results.

The following report is a summary of research conducted within all of Foundations Recovery Network treatment programs, which generally consist of a 30-90 day length of stay. All of our data comes from our own programs; it was not gathered from an experimental setup, but rather from real treatment settings. Our data therefore represents the best context for accurate results since it was gathered in a practical setting that reflects the reality of rehabilitation and treatment.

Methods

Patients who enter treatment at Foundations’ facilities have the opportunity to participate in an ongoing study. Participants who agree to participate sign Institutional Review Board approved consent prior to participation and provide information for the follow-up study which includes interviews at intake and again at 30 days, six months and one year post-discharge.
Data is collected using validated instruments, including the Addiction Severity Index, Treatment Service Review and elements of other industry-standard, validated instruments. Responses from the research instruments are designed to assess several aspects of a patient’s mental and physical functioning and all other aspects affecting a patient’s life, including alcohol use, drug use, psychiatric symptoms, legal issues, family/social relationships, medical issues and employment issues (McClellan et al., 1992).

Credibility

The first factor FRN addresses in its research is the use of industry accepted instruments, such as those listed above. Secondly, the research must include enough of the general population of patients to be considered reliable and valid. For the addiction treatment industry, the Substance Abuse Mental Health Services Administration (SAMHSA) has set baseline standards to assure that the results are reliable and valid. In essence, the standards allow a treatment provider to say, “Yes, these results are typical for patients receiving treatment with our organization.”

Although FRN does not receive any federal funding, and is therefore under no obligation to meet the SAMHSA standards, FRN exceeds the baseline standards for both enrollment and follow-up. The following results were generated by the research department and represent 2016 the substance use outcomes for our patients in 2016.

Results

At one year following discharge from treatment, over half of patients report remaining alcohol and drug free for the year following treatment. White (2012) reports that nationally an average of 30% of adult patients attending substance use treatment remain abstinent for the year following treatment. More specifically, 56.2% of FRN patients report abstinence from both alcohol and illegal drugs at one year post-treatment.

Remission refers to whether or not a patient meets the clinical criteria, using the industry standard diagnostic manual, for substance use disorder. Like in any chronic medical condition, a patient may still have the disorder, but may be symptom-free – or in remission. The national standard for remission is 50% at one year following treatment (White, 2012). Among FRN patients, 74% meet the criteria for remission at one year following treatment in 2016.
Discussion & Conclusion

FRN programs are continuously developing and improving to sustain the highest possible level of efficacy. Over the past 15 years, the way the medical community treats and approaches addiction has changed dramatically (Hogan and Merrick, 2001) (McKay, et al, 2004). That is why it is so important to critically evaluate each program’s efficacy. Although it is not possible for clinicians to control and evaluate the behavior of patients 12 months after treatment, our patients retain a high level of abstinence and remission, suggesting that our treatment programs not only stabilize our patients, but also put them on a more rewarding life path founded on long term recovery.

*National Averages are from White, 2012.*
References


