FLOSS

(Facilitating Lifetime of Oral Health Sustainability for Substance Use Disorder Patients)

Drs. Glen R. Hanson and Bryan Trump, P.I.s
(University of Utah School of Dentistry)
Shawn McMillan (1st Step House)

Background:

- Substance Use Disorder Patients (SUDP) have high incidence of caries and other consequences of poor oral health
- SUDP require greater access to dental care to reduce frequent emergency visits and relieve oral health, medical & mental health burdens
- Concluded that "addiction treatment providers should consider dental as associated comorbidities requiring linked treatment plans"

Objectives:

- Train Utah's current and future dental workforce to the oral health needs of medically complex SUDP
- Train Case Managers and Certified Peer Support Specialists (CPSS) in the importance of oral health care

- **Establish a unique/collaborative academic and direct service program between U of U SOD) and local SUDP-treatment agencies (1ˢᵗ Step House and Odyssey House)**

Details

- **Provide stratified services to ~300 SUDP and ~100 minor dependents as integral part of their SUD treatment-with intent to establish a sustainable 'dental home'**
- **Measure *outcomes* to assess value and refine model**

HRSA Focus Areas

- Develops **training** programs for **oral health providers** in advanced roles, i.e., train dental workforce to provide dental needs **to medically complex SUDPs**

- Establish/**expand oral health services** by work closely with SUDP treatment agencies to expand oral health care **into treatment agencies for SUD**

- **Integrate oral** and **primary care** medical (i.e., **SUD** treatment) underserved communities **by cross-training** the workers in each of these two disciplines.

Outcome (comparison of FLOSS vs. Non-FLOSS Clients)
NOTE: *similar demographics* (from 1st Step House)

	FLOSS	Non-FLOSS
Total clients:	84	370
Drug of Preference		
Heroin	45%	22%
Other opiates	1%	4%
METH	22%	30%
Alcohol	22%	30%
Cocaine	2%	4%

Treatment features

	FLOSS	**Non-FLOSS**
Length		
Median	170 d	109 d
Mean	200 d	153 d
Treatment complete	52%	46%
Discharge Reason		
-left against advice	19%	29%
-Treatment complete	52%	46%

Residence

	FLOSS		Non-FLOSS	
	Admission	*Discharge*	*Admission*	*Discharge*
Incarcerated	21%	2%	19%	5%
Private Res.	43%	74%	56%	71%
Homeless/Street	21%	7%	16%	10%

Conclusion:

- FLOSS clients better in every measurement, but particularly the duration of treatment

- Based on proven correlation between duration of treatment and recidivism, it is anticipated that FLOSS clients will have a lower rate of relapse (ref.: Hser et al. "Predictors of Short-term outcomes…" Eval. Programs Plann. 30 [2008] 187)