



Recommendations and Next Steps: *Reform Health Care Practice*

- Incorporate into routine medical practice screening and intervention for risky substance use and diagnosis, treatment and disease management for addiction
- Develop core competencies for physicians in understanding risk factors; prevention, diagnosis, intervention, treatment and management options; co-occurring conditions
- Make core competencies *required* components of all medical school curricula, residency training programs, licensing exams, board certification exams and continuing medical education (CME) requirements, including maintenance of certification programs



Recommendations and Next Steps: *Reform Health Care Practice*

- Incorporate screening and intervention for risky substance use into routine practice for non-physician health professionals (physician assistants, nurses, dentists, pharmacists, graduate-level clinical psychologists, social workers, counselors)
- Develop core clinical competencies for non-physician health professionals in addressing risky substance use and preventing and treating addiction
- Assure that core clinical competencies and specialized training are *required* components of all professional health care program curricula, graduate fellowship training programs, professional licensing exams and continuing education (CE) requirements



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Recommendations and Next Steps: *Reform Health Care Practice*

- Develop improved screening and assessment instruments
- Establish national accreditation standards for all addiction treatment facilities and programs that reflect evidence-based care:
 - Professional staffing: full-time certified addiction physician specialist and professional staff trained in core competencies
 - Intervention and treatment services: comprehensive assessment, tailored, evidence-based treatment for addiction involving *all* substances
 - Quality assurance: process and outcome measurements
- Standardize language used to describe the full spectrum of substance use and addiction

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Recommendations and Next Steps:

Use Leverage of Public Policy to Speed Reform

- Condition government grants and contracts for addiction services on provision of quality care
- Educate non-health government workers, who come into contact with significant numbers of individuals who engage in risky substance use or who may have addiction, about evidence-based practices
- Identify patients at risk in government programs and services where costs of risky use and addiction are high and provide appropriate care
- Develop tools, practice guidelines and outcome measures to improve quality of service delivery
- License addiction treatment facilities as health care providers
- Require adherence to national accreditation standards that reflect evidence-based care

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Recommendations and Next Steps: *Use Leverage of Public Policy to Speed Reform*

- Require that all insurers provide comprehensive coverage for screening, intervention, diagnosis, treatment and disease management for addiction, including specialty care
- Expand the addiction medicine workforce
- Implement a national public health campaign to educate the public about *all* forms of risky substance use and addiction
- Invest in research and data collection to improve and track progress and search for a cure
- Implement the National Institutes of Health's (NIH) recommendation to create a single institute addressing substance use/addiction