Using Data to Improve and Expand Services

Expansion of ambulatory (outpatient) services—both for detoxification and for formal treatment—is sometimes viewed by stakeholders as a controversial reduction in services. However, science and outcome data show us that appropriately applied ambulatory services are safe and effective, often with better outcomes than residential care for certain people. The use of effective, less costly ambulatory services provides the opportunity to allocate resources to other needed service enhancements. For example, DMHAS recently decided to add eleven new Ambulatory Opiate Detoxification programs (AOD) to the existing network of services based on compelling information:

- In 1999 and 2000, Connecticut ranked first in the country in heroin treatment admissions per 100,000 population.\(^1\)
- Heroin was identified as a problem substance in 48% of all treatment delivered during SFY 2003 – an increase of 30% since 1996.\(^2\)
- During the past decade, our opiate treatment providers have experienced the largest volume increases of any level of care in the public sector.\(^3\)

The DMHAS General Assistance Behavioral Health Ambulatory Detox Diversion Initiative seeks to identify individuals who might safely and effectively benefit from diversion to ambulatory detoxification or other levels of ambulatory care.

The enhancement of AOD service capacity is integral to a Recovery-focused system of care in that it affords people with the opportunity to practice coping skills within their community setting. In a very real sense, the community becomes an educational environment. For more information regarding Ambulatory Opiate Detoxification services, please contact Wayne Trudeau at (860) 418-6904 or wayne.trudeau@po.state.ct.us

Visit [http://www.dmhas.state.ct.us/infobriefs/index.htm](http://www.dmhas.state.ct.us/infobriefs/index.htm) to view previous issues.

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\(^1\) Source: National Treatment Episode Data Set (TEDS)

\(^2\) Source: DMHAS Office of Analysis and Support

\(^3\) Source: Connecticut Commission of Substance Abuse Treatment