



recovers

Through Community level interactions, New Britain Recovers connects individuals in a stigma-free manner to resources with care, concern, and compassion.

What are the NB Recovers Initiatives?



Overarching Goals:

1. Increase strong leadership and collaboration
2. Data driven decision making
3. Secure funding streams
4. Provide public education around behavioral health, substance abuse/ misuse, and prevention methods
5. Align and promote integrated support systems

Multi-disciplinary approach



Core Rapid Referral Network Partners

- Hospital of Central Connecticut
- Community Health Center
- Community Mental Health
Affiliates
- Coram Deo
- Gilead-Farrell Treatment Center
- Root Center
- Wheeler Clinic

Allied Community Partners:

- New Britain Police Department
- New Britain Fire Department
- Coram Deo
- CCAR
- Friendship Service Center
- Salvation Army
- New Life Ministries II
- The Spott, LLC
- Expanding

Mobile Response Team

- Recovery Care Navigators
- 90% follow up with patients/families within 48 hours of an OUD 9-1-1 response.
 - Authorization to participate with program release.
 - Provide education on treatment resources.
 - Provide training on use and administration of Narcan.
 - Provide managed referrals to network partners.
 - Provide referral to additional support resources.
 - On going monitoring and follow up.
- Internal and External Referrals:
 - Internal from 911 paramedics via HealthEMS Platform
 - External- community or rapid referral network partners

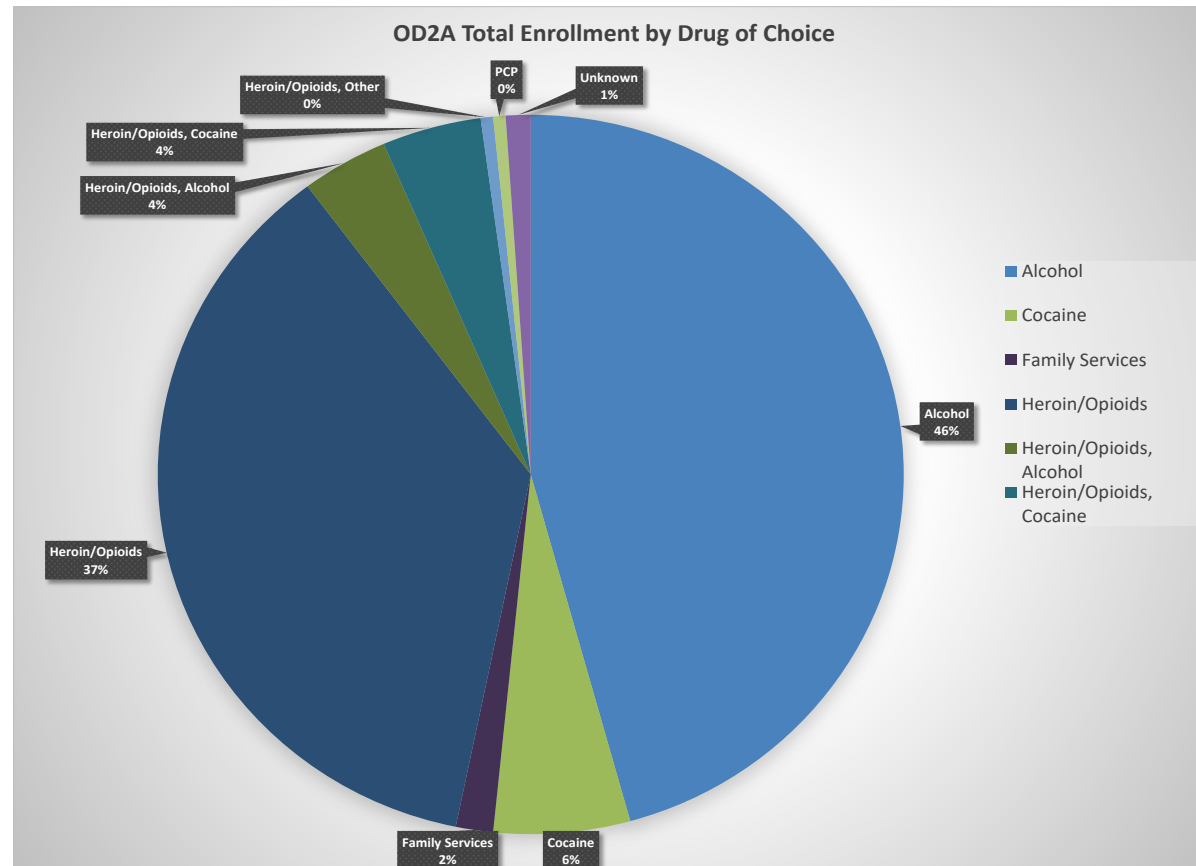
Mobile Response Team/Referral Network Data

Data Summary

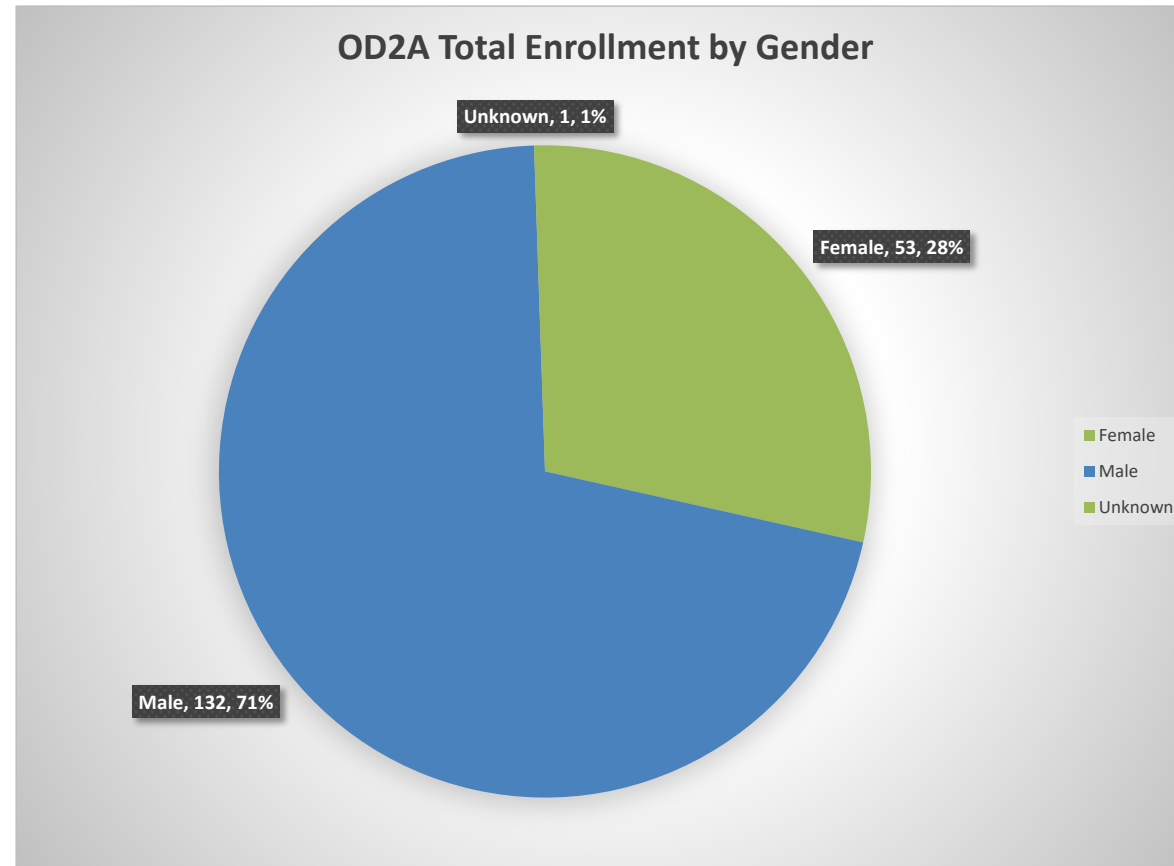
2/1-8/31/21

- 313 Referrals (85% internal 15% external)
- 286 Patients (91%)
- 186 Individuals enrolled (65%)
- 96 Individuals engaged in treatment (52%)

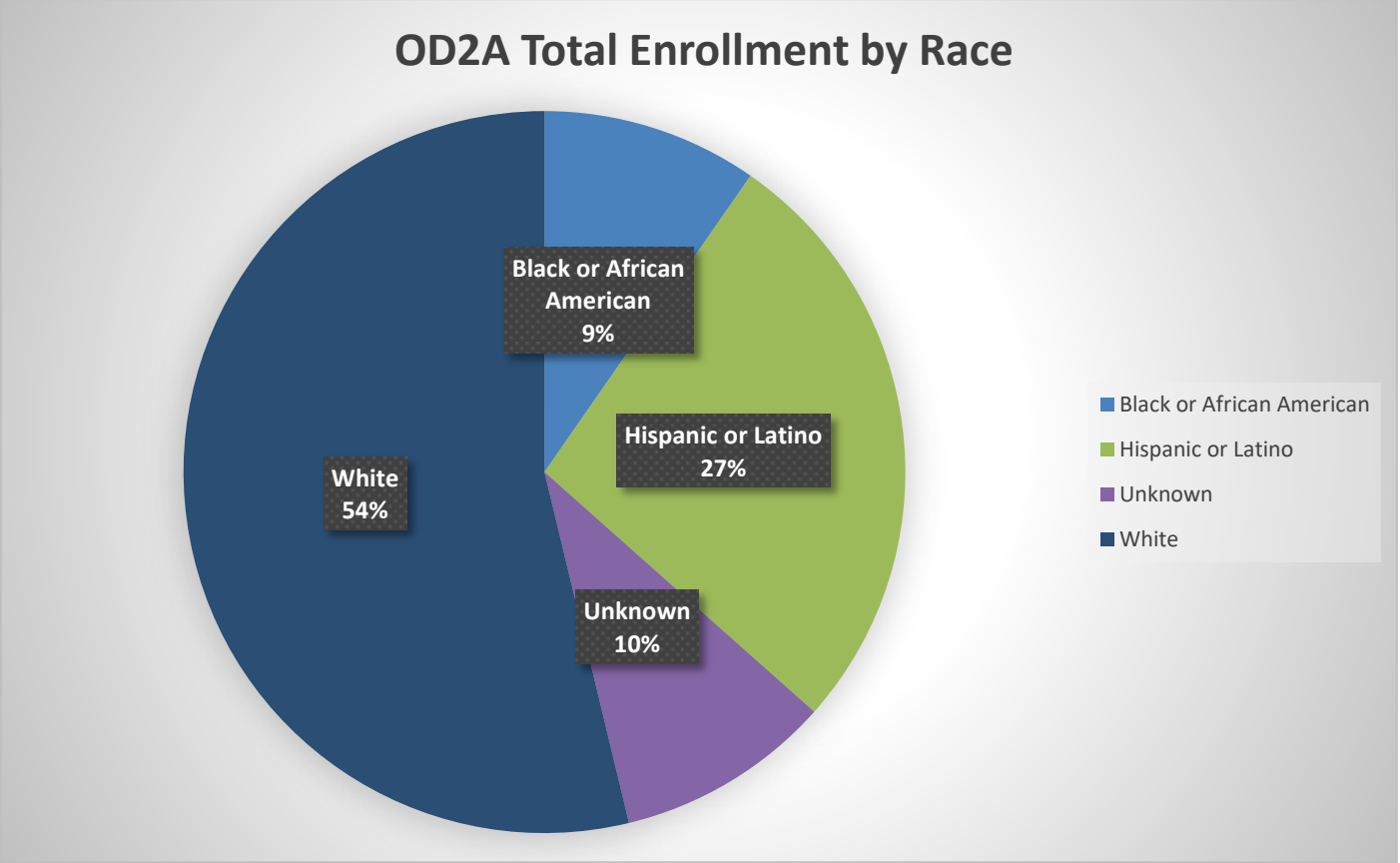
OD2A Enrolled Patients Drug of Choice



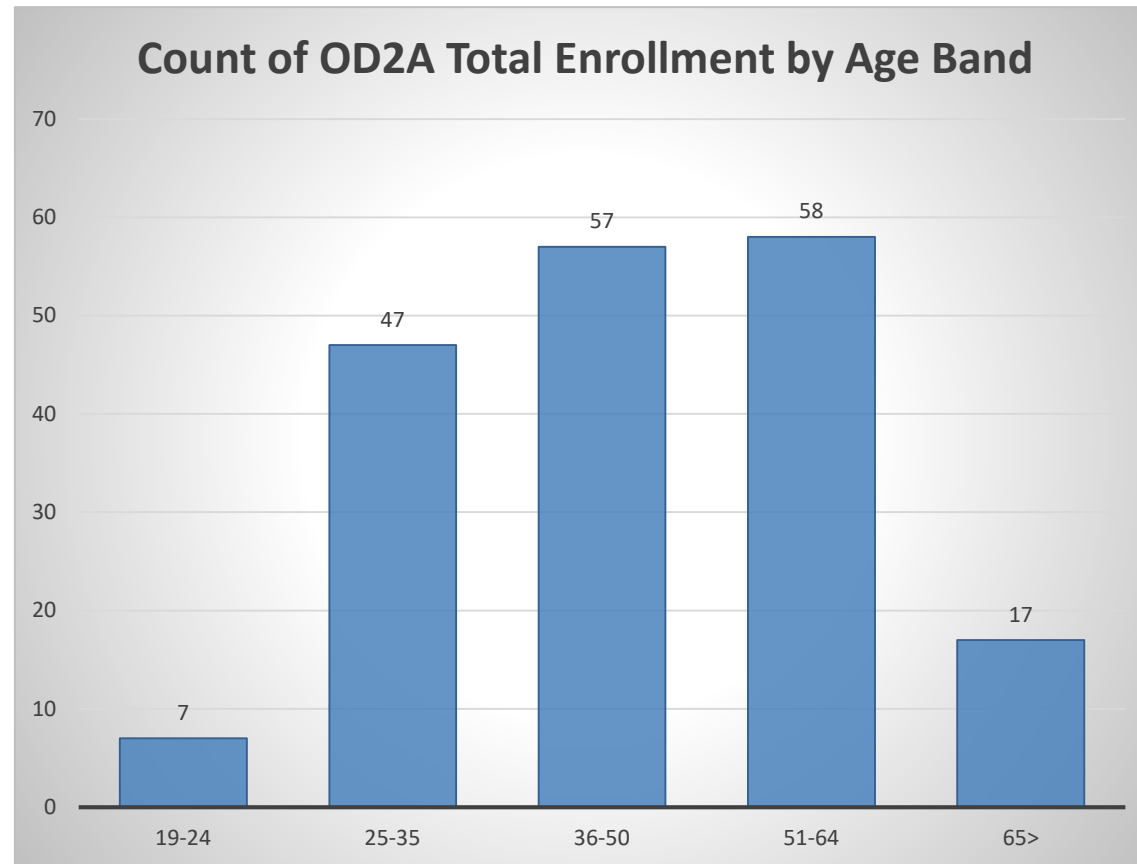
OD2A Total Enrollment by Gender




Enrollment by Race/Ethnicity



Enrollment by Age Band



Conclusion

- ▶ White male between 25 and 64 who uses alcohol
 - ▶ 37% of individuals enrolled have OUD. 90% are enrolled in some form of treatment
 - ▶ Referral Network is a successful model
 - ▶ Being flexible with RCN hours is a proven success
 - ▶ Nowhere near enough resources for OUD/SUD and Homeless
 - ▶ Hard to measure against other agencies, there is no central repository for data
 - ▶ We will continue to grow and learn
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Contact Information

Mallory Deprey: 860-826-3370- Mallory.deprey@newbritainct.gov

Bruce Baxter: 860-770-3407 - bruce.baxter@nbems.org

