



Evergreen  
Treatment  
Services

AUGUST 11, 2021

## TREATMENT IN MOTION

MOBILE MEDICATION-ASSISTED  
TREATMENT CLINIC

CLINIC SERVICES



SEAN SOTH  
DIRECTOR OF HEALTH INTEGRATION & INNOVATION  
CATHY PEREZ  
DIRECTOR OF STRATEGIC INITIATIVES



# TREATMENT IN MOTION

## A BRIEF HISTORY

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### 1999

Mobile Methadone Van service begins

CSAT grant in partnership with Public Health Clinics

Renton and Northgate

### 2004

Van relocated after end of grant cycle and loss of Public Health partners

New locations included Georgetown, White Center and Downtown

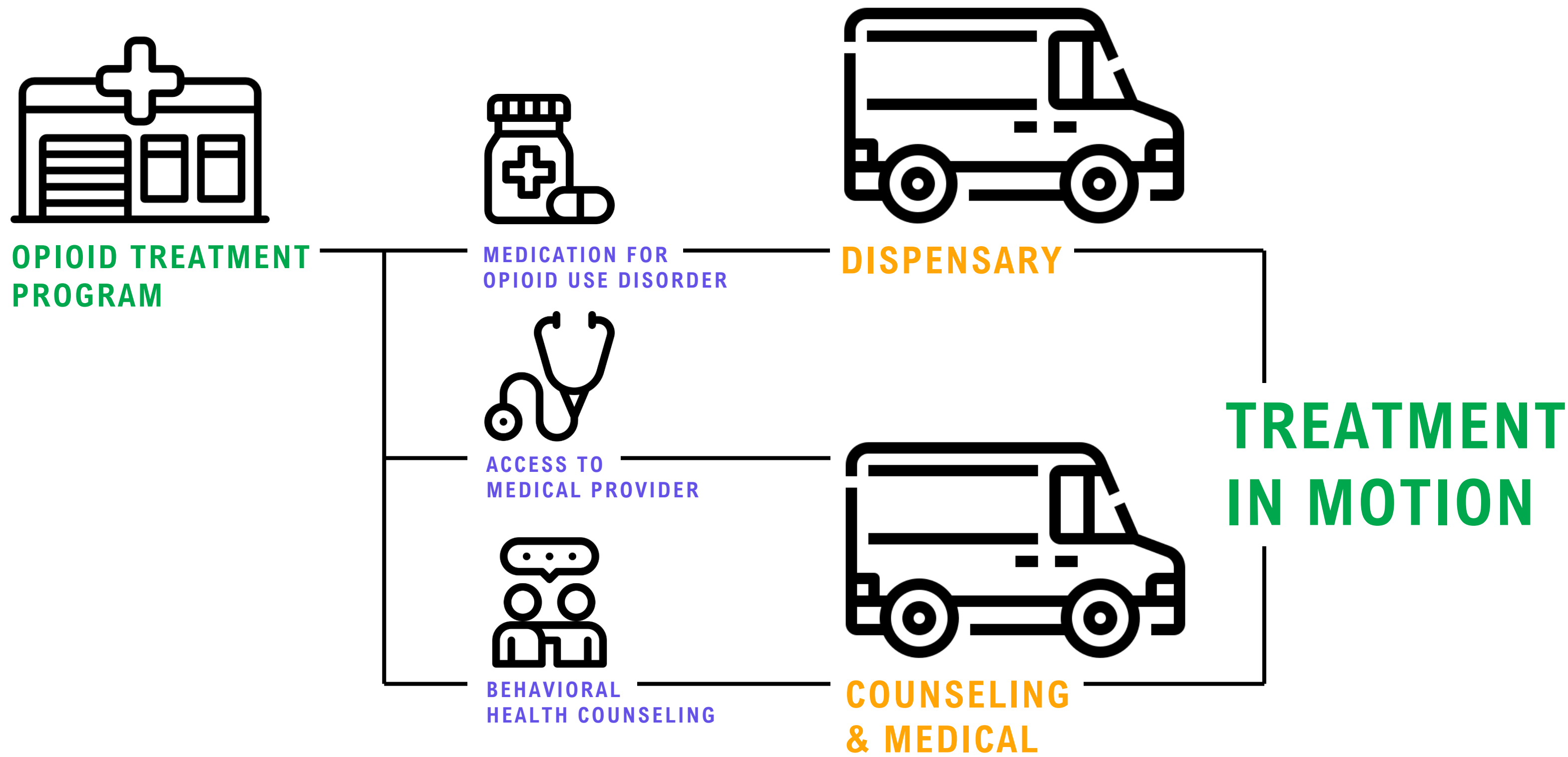
### 2011

Due to increased dosing demand at the Seattle clinic, van was eventually parked at that location to better serve the growing patient population.

Other contributing factors included limited mobile services and staffing shortages.

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# TREATMENT IN MOTION





TREATMENT IN MOTION

# EXPANDING ACCESS

## AREAS OF FOCUS

Low Service Areas  
Under-Represented Communities  
Low Income Areas  
Homeless Populations

## COMMUNITY-BASED RAPID-ACCESS TO MOUD SERVICES

Direct “street-based” service connection through Case Managers and Counselors.  
Dedicated team providing same-day access to all MOUD options.



# TREATMENT IN MOTION **COUNSELING & MEDICAL VAN**



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# TREATMENT IN MOTION **DISPENSARY VAN**



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# TREATMENT IN MOTION **DISPENSARY VAN**



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# TREATMENT IN MOTION

# COMMUNITY RELATIONS

## 1 DEFINE & DEVELOP

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COMMUNITY RELATIONS  
PLAN

## 2 ENGAGE & EDUCATE

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COMMUNITY MEMBERS  
& STAKEHOLDERS

## 3 MONITOR & MAINTAIN

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COMMUNITY RELATIONS  
& CONCERNS



# COMMUNITY RELATIONS

## DEFINE & DEVELOP

## ACTIVITIES

### NOTIFY & ENGAGE LEGISLATIVE AUTHORITIES

Schedule a meeting with the legislative authority to discuss the proposed site of the program and to obtain a list of all pertinent stakeholder groups in the area.

### IDENTIFY STAKEHOLDERS

Identify community leaders for the purpose of fostering good community relations, and establish interpersonal contact, and proactive associations with those identified people.

### IDENTIFY COMMUNITY LIAISON

Identify a liaison with community representation to share information about the program and community and mutual issues.

### IDENTIFY COMMUNITY RELATIONS COORDINATOR

Identify personnel who will function as community relations coordinator to serve as a community resource on substance use and related health and social issues.

### DEVELOP MITIGATION STRATEGIES

Develop policies and procedures to effectively address or resolve community problems and ensure that program operations do not adversely affect community life.



# COMMUNITY RELATIONS

# STAKEHOLDERS

Publicly elected officials/representatives

Local health (potential referral sources)

- Substance abuse programs
- Social and health services/agency directors
- Physicians

Business organization leaders

Community and health planning agency directors

Grassroots community organization leaders

Neighborhood associations

School boards

Local police and law enforcement officials

- City police
- Sheriff's office
- Tribal police

Public safety departments

- Fire department
- Emergency management office

Religious and spiritual leaders





# COMMUNITY RELATIONS

# ENGAGE & EDUCATE

## ACTIVITIES

### DELPOY LIAISON & COORDINATOR

Community liaison and community relations coordinator execute activities laid out in the community relations plan and begin building relations in the community to gain support and understanding of the program.

### DEVELOP & DISTRIBUTE COMMUNICATION ASSETS

Devise communication mechanisms so that interested parties and potential patients may obtain general information about the program outside regular operating hours.

### SOLICIT COMMUNITY & STAKEHOLDER INPUT

Gather input from the community about the program's impact in the neighborhood. Input can be obtained through educational events, public forum, meetings, and advisory groups.

### ADDRESS INITIAL STAKEHOLDER CONCERNS

Gather list of concerns identified by stakeholders as needing to be addressed. Work with stakeholders to identify mitigation tasks and next steps.



## OUR MISSION

Transforming the lives of individuals and their communities through innovative and effective addiction and social services



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## GETTING HELP BEGINS WITH A PHONE CALL

If you are an adult with opioid use disorder, call ETS at (206) 223-3644 during business hours to see which program may be right for you. Take the first step on the road to recovery—we are here to help you.

### NEW PATIENTS WELCOME |

Check the website for current intake hours.

[WWW.EVERGREENTREATMENT.ORG](http://WWW.EVERGREENTREATMENT.ORG)

### PAYMENT |

ETS accepts cash, credit cards, and private insurance. We also accept Medicaid and public funding for eligible individuals when treatment slots are available. Please contact us for details.

ETS is a 501(c)(3) not-for-profit organization. Generous philanthropic support advances our mission. Donations are always welcome. For more information, please contact Tavia at [TRACHEL@EVERGREENTREATMENT.ORG](mailto:TRACHEL@EVERGREENTREATMENT.ORG)



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## ABOUT ETS

Evergreen Treatment Services (ETS) provides **medication-assisted treatment** for people with opioid use disorder in western Washington.

We have more than 45 years of experience providing evidence-based, transformative treatment. When opioid use disorder is managed with medication, patients do not experience the highs and lows heroin and prescribed pain medications can create. After regaining physiological stability, patients are able to take better care of themselves, rebuild relationships with family, and return to work. Our interdisciplinary team provides the comprehensive care that patients need to rebuild their lives.



### MEDICATION-ASSISTED TREATMENT (MAT)

**MAT is the gold standard of treatment for adults with opioid use disorder.** This holistic treatment includes:

- Assessment and treatment planning
- Use of methadone or buprenorphine
- Individual and group counseling
- Drug screen urinalyses
- HIV and Hepatitis C education, testing, and counseling
- Physical examinations

ETS is proud to offer tailored medication options to best meet patient needs. In addition to methadone, we offer buprenorphine which has been federally approved by the Food and Drug Administration (FDA) for treating opioid use disorder. **Both methadone and buprenorphine:**

- Suppress symptoms of opioid withdrawal for at least 24 hours
- Reduce cravings for opioids
- Help reduce risk of overdose



## WE GO WHERE TREATMENT IS NEEDED

Treatment in Transit offers medication dispensary services for patients enrolled at ETS. It is staffed by nurses, technicians and public safety staff. Treatment in Transit is an important tool to provide treatment for people who cannot easily get to an ETS facility every day for their medication.



# COMMUNITY RELATIONS MONITOR & MAINTAIN

## ACTIVITIES

### IMPLEMENT COMMUNITY CONCERNS LOG

The on-going community relations concern log is designed to document community concerns that may arise after the program is full operation and to use for future quality assurance data.

### MONTHLY REPORTING

Provide community relations reports to key contacts, stakeholders and community members on a monthly basis. Include health outcomes and efficacy trends.

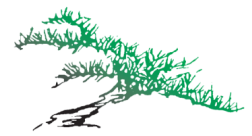
### ESTABLISH OPEN LINE OF COMMUNICATION

Hold regular meetings with stakeholders and community members to obtain input, provide educational opportunities, work through community concerns and more.

### DOCUMENT & EVALUATE EFFORTS

Document community relations efforts and community contacts, evaluate these efforts and contacts over time, and address outstanding problems and deficiencies.





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QUESTIONS?

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