Alta Mira Recovery Programs Treatment Effectiveness Report





Providing insightful data to help treatment programs improve their outcomes

July 14, 2018 - April 30, 2019

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BACKGROUND

Alta Mira Recovery Programs ("Alta Mira"), part of the Constellation Behavioral Health network, is an adult residential and intensive outpatient addiction and dual diagnosis treatment center located in Sausalito, California. It treats individuals and families suffering from addiction and co-occurring disorders. A broad selection of holistic services and experiential therapies promotes recovery and deep healing, and draws on evidence-based medical and therapeutic practices that are proven to be the most successful in treating addiction and co-occurring disorders.

Alta Mira began enrolling patients in INSIGHT Addiction[™] on July 18, 2018. This report summarizes data reported by clients being treated at Alta Mira during the period between July 18, 2018 and April 30, 2019.

This report was released on May 5, 2019.

PATIENT CHARACTERISTICS AT INTAKE

INSIGHT Addiction[™] received Intake data from 71 clients who attended treatment at Alta Mira at some point between July 18, 2018 and April 30, 2019.

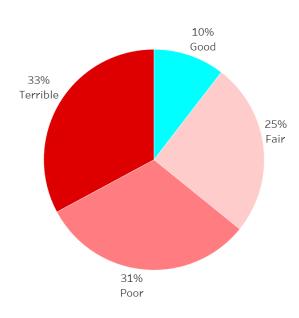
Demographics

Slightly more than half of patients (54%) were male. Patients were mostly white (89%). The median age was 39. 69% had received at least one degree. Just under half (49%) were employed prior to treatment, with 32% neither working nor studying by choice. Nearly all (91%) were in a stable living arrangement.

Appendix A contains detailed demographics of the patients submitting Intake questionnaires.

How Feeling Overall Before Treatment

64% of the patients entering treatment during this period reported feeling poor or terrible during the 30 days before beginning treatment.



Overall Feeling Prior to Treatment

(Among 67 patients in treatment between 7/14/2018 and 4/30/2019)

What Brought Patients to Treatment

The largest group of patients (66%) entered treatment because they were asked to go by family or friends. Almost as many (59%) had become tired of living the way they were, while 21% had been hospitalized immediately beforehand:

What Happened Right Before that Led to Treatment (Among 71 patients in treatment between 7/14/2018 and 4/30/2019) Family/friends asked/told me to go 66% I became tired of living this way 59% I was hospitalized 21% 8% Talked about/tried to commit suicide l overdosed 8% I was caught driving under the 8% influence I was arrested and/or jailed 4% Other 8% 0% 5% 10% 15% 20% 25% 30% 35% 40% 45% 50% 55% 60% 65% 70% % of Patients Who Responded

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Alcohol or Drug Usage

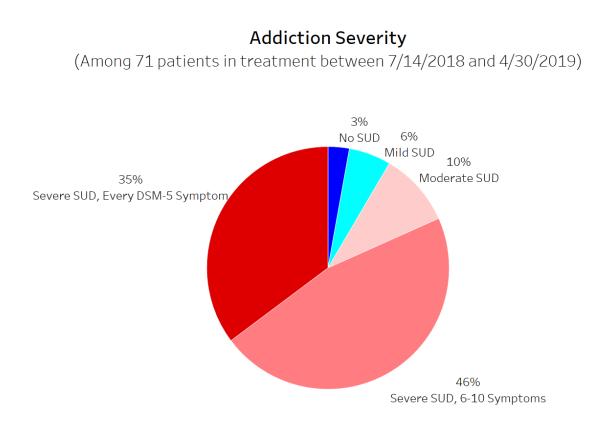
Alcohol was the primary drug of choice for over half (55%) of the patients. Marijuana was the primary drug of choice of 13% of patients and 11% were using opiates.

What is Your Primary Drug of Choice? (Among 71 patients in treatment between 7/14/2018 and 4/30/2019) 4% Amphetamines 1% 3% Other Heroin 11% 6% Opiates Benzodiazepines 13% Marijuana 3% Methamphetamines 4% Cocaine

> 55% Alcohol

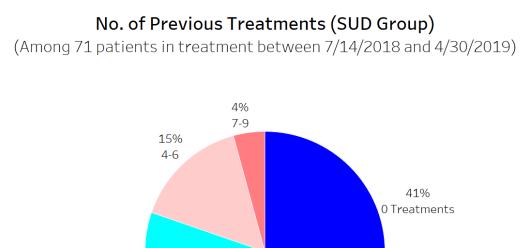
Addiction Severity

81% of Alta Mira's patients met the definition of having a severe alcohol or drug use disorder, and 35% of them reported having experienced all 11 of the DSM-5 SUD criteria in the year before starting treatment.



Previous SUD Treatment Episodes

Among the 71 patients, 59% had been in SUD treatment before, and 19% had been in treatment on 4 or more occasions.



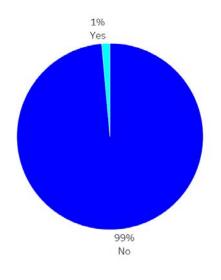
14% One Treatment

25% 2-3

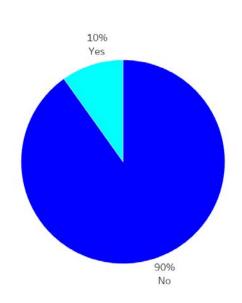
Use of Medication Assisted Treatment

Only one of Alta Mira's patients is using Opioid Maintenance Therapy:

Are you enrolled in a drug maintenance program where you use methadone, buprenorphine, Suboxone, Subutex or another opioid drug on a regular basis? (Among 71 patients in treatment between 7/14/2018 and 4/30/2019)



Additionally, a few patients were using Vivitrol to control cravings.



Are you receiving Vivitrol (naltrexone) injections?

(Among 71 patients in treatment between 7/14/2018 and 4/30/2019)

Presence of Mental Disorders

As part of their Intake Questionnaire, the patients were asked a series of screening questions about the 30 days before they started treatment. If they answered one or more of the screening questions for a particular co-occurring disorder positively, they were then taken to a full academically-validated instrument to measure the severity of their symptoms of that disorder. If a patient answered the screening questions negatively for a specific disorder, they are classified as "Symptom Unlikely" on the following charts.

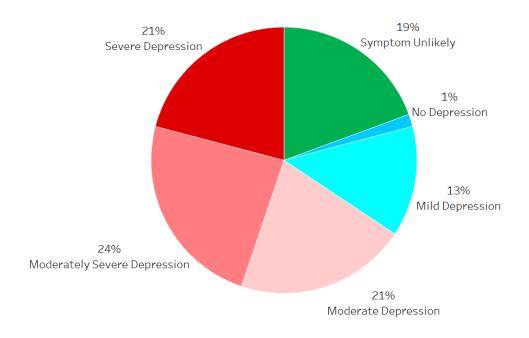
The majority of patients entering Alta Mira reported suffering moderate or severe symptoms of one or more co-occurring disorders in the 30 days prior to entering treatment:

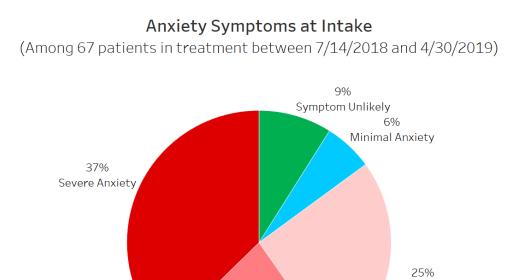
Patients with Moderate or Severe Symptoms at Intake

Depression	66%
Anxiety	60%
PTSD	63%
Eating Disorder	22%

Depression Symptoms at Intake

(Among 67 patients in treatment between 7/14/2018 and 4/30/2019)

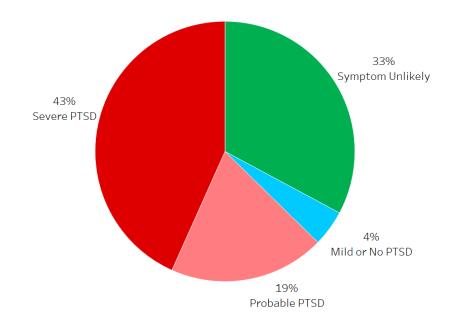




Mild Anxiety

Trauma Symptoms at Intake (Among 67 patients in treatment between 7/14/2018 and 4/30/2019)

22% Moderate Anxiety

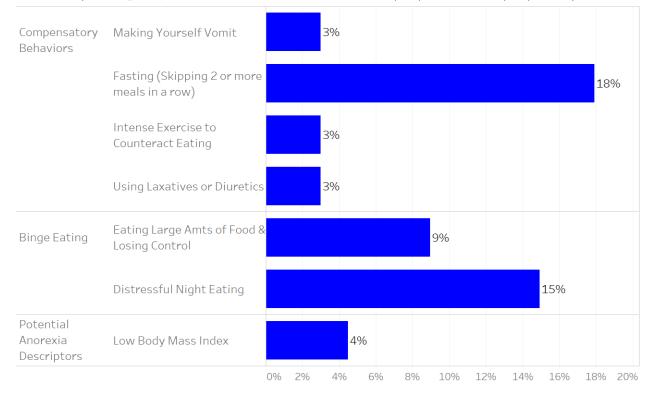


Eating Disorders

Additionally, 27% of Alta Mira's patients reported behaviors typically associated with eating disorders in the 30 days before starting treatment. The most common behaviors were fasting (reported by 18% of patients), and eating during the night after awakening from sleep or eating an unusually large amount of food after their evening meal and being distressed by the night eating (15%).

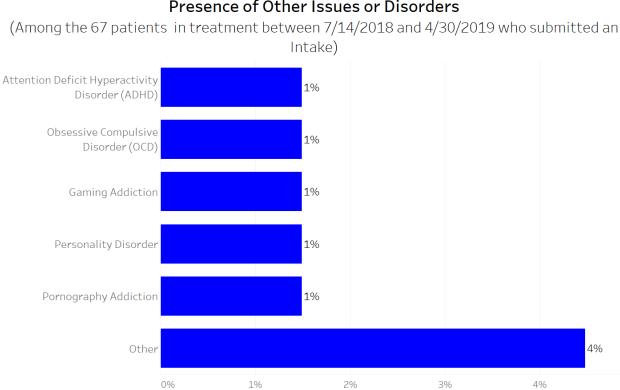
% of Patients Exhibiting Eating Disorder Symptoms

(Among 67 patients in treatment between 7/14/2018 and 4/30/2019)



Other Disorders

Additionally, a few patients reported other issues or disorders at intake that played a role in their attending treatment. No individual symptom was reported by more than one patient:



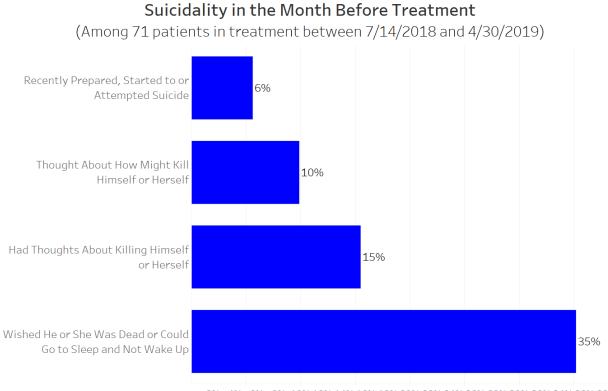
Presence of Other Issues or Disorders

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Suicidal Thoughts

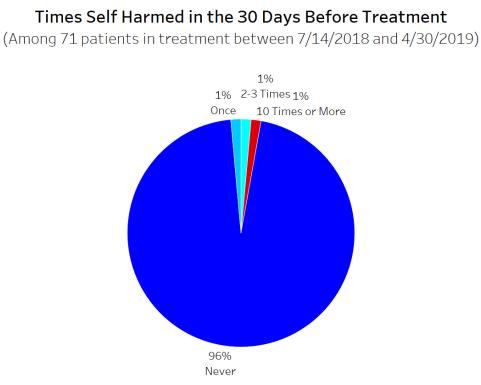
35% of patients entering Alta Mira reported wishing they were dead or could go to sleep and not wake up in the month prior to treatment, and 6% claimed to have actually prepared, started to or attempted to commit suicide during this period.



 $2\% \ \ 4\% \ \ 6\% \ \ 8\% \ \ 10\% \ \ 12\% \ \ 14\% \ \ 16\% \ \ 18\% \ \ 20\% \ \ 24\% \ \ 26\% \ \ 28\% \ \ 30\% \ \ \ 32\% \ \ 34\% \ \ 36\% \ \ 38\%$

Self-Harming Behaviors

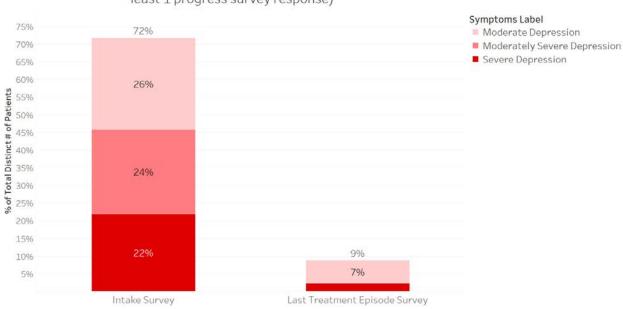
4% of the Alta Mira patients reported harming themselves on purpose, such as by cutting themselves, in the month before starting treatment.



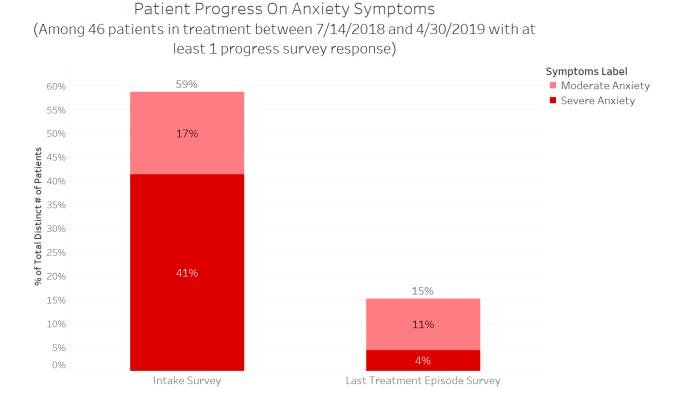
PROGRESS DURING TREATMENT

Improvement in Co-Occurring Disorders

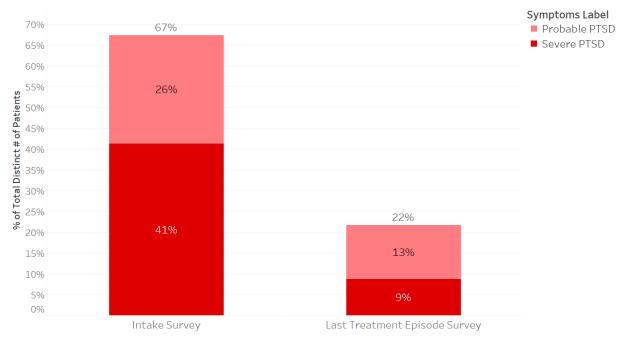
During the time they were in treatment, the severity of the co-occurring disorder symptoms that Alta Mira patients were experiencing declined dramatically. The following graphs compare how the percentage of patients reporting moderate to severe symptoms of depression, anxiety, and PTSD declined between the intake and the last progress monitoring survey they submitted:



Patient Progress On Depression Symptoms (Among 46 patients in treatment between 7/14/2018 and 4/30/2019 with at least 1 progress survey response)



Patient Progress On Trauma Symptoms (Among 46 patients in treatment between 7/14/2018 and 4/30/2019 with at least 1 progress survey response)



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The number of eating disorder behaviors declined dramatically during treatment, with no more than one patient reporting any particular symptom on their last survey in treatment:

% of Patients Exhibiting Eating Disorder Symptoms (Among 46 patients in treatment between 7/14/2018 and 4/30/2019)

Compensatory Behaviors	Making Yourself Vomit	Intake Survey	4%	
		Last Treatment Episode Survey	2%	
	Fasting (Skipping 2 or more meals in a row)			13%
		Last Treatment Episode Survey 0%		
	Intense Exercise to Counteract Eating	Intake Survey	4%	
		Last Treatment Episode Survey	2%	
	Using Laxatives or Diuretics	Intake Survey	2%	
		Last Treatment Episode Survey 0%		
Binge Eating	Eating Large Amts of	Intake Survey		11%
	Food & Losing Control	Last Treatment Episode Survey 0%		
	Distressful Night Eating	Intake Survey		17%
		Last Treatment Episode Survey	2%	
Potential Anorexia Descriptors	Low Body Mass Index	Intake Survey	4%	

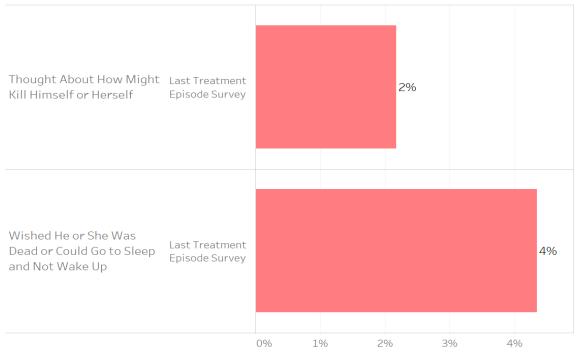
096 296 496 696 896 1096 1296 1496 1696 1896 2096

Reduced Suicidal Thoughts

The level of patients reporting suicidal thoughts greatly reduced during treatment. Only 4% reported wishing they could go to sleep and not wake up on their last survey.

Patient Progress On Suicidal Thoughts and Intentions

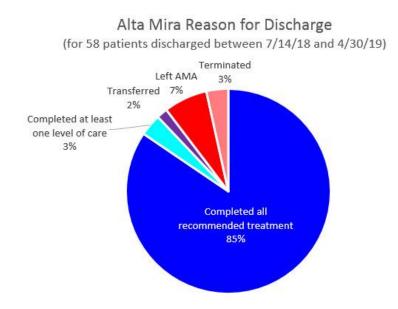
(Among 46 patients in treatment between 7/14/2018 and 4/30/2019 with at least 1 progress survey response)



TREATMENT SUCCESS

Treatment Completion Rate vs. National Norms

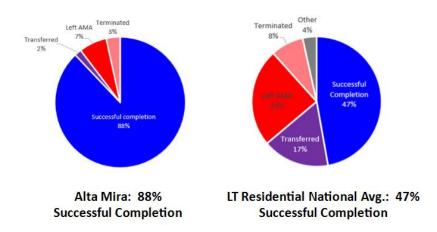
Among the 58 clients who discharged from Alta Mira during the period between July 14, 2018 and April 30, 2019, 51 (88%) completed at least one level of care and 85% completed all recommended treatment:



Alta Mira's 88% completion rate is dramatically higher than the 47% completion rate reported for the patients who discharged from long-term residential SUD treatment in 2016:

Treatment Completion Rate vs. National Average

(58 Alta Mira discharges vs. 110,979 2016 TEDS-D Long-Term Residential discharges)

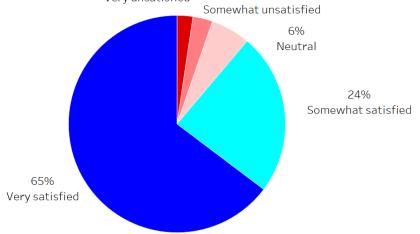


The median length of stay for Alta Mira patients who successfully completed all recommended treatment was 45 days, substantially less than the 83 day median length of stay reported for long-term residential care in the 2016 TEDS-D data set.

Satisfaction with Treatment

The majority (65%) of Alta Mira patients submitting ongoing progress monitoring surveys were very satisfied with the treatment they were receiving:

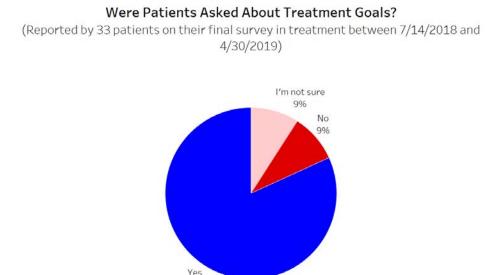
Patient Satisfaction with Treatment (Based upon 170 patient reports for patients in treatment between 7/14/2018 and 4/30/2019) 2% Very unsatisfied 3% Somewhat unsatisfied



Sample comments from patients about the treatment they were receiving at Alta Mira are included in Appendix B.

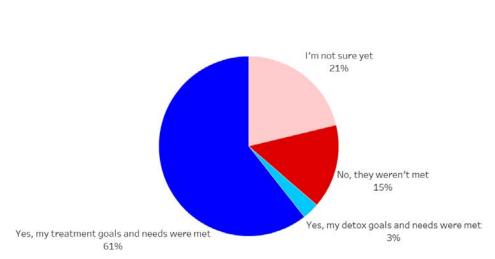
Meeting Treatment Goals

Patients who indicated that a survey was likely to be the last one they were asked to submit during treatment were asked several questions about their treatment goals. Most of the patients (82%) reported having been asked about their treatment goals during treatment:



The majority of patients (64%) reported that their goals had been met, though 15% stated that they had not.

82%



Were Your Treatment Goals Met? (Reported by 33 patients on their final survey in treatment between 7/14/2018

and 4/30/2019)

APPENDIX A: PATIENT DEMOGRAPHIC INFORMATION

Characteristic	<u>Alta Mira</u>
Number of Patients	71
Gender:	
Male	54%
Female	46%
Age (years):	
Median	39
Range	20–73
Ethnicity:	
White, non-Hispanic	89%
Hispanic or Latino	4%
Asian	4%
Other	3%
Marital Status:	
Married	37%
Single, never married	44%
Divorced	13%
Separated	6%
Widowed	1%
Highest Level of Education Completed:	
Attended high school, but have not graduated	3%
Have graduated from high school or received a GED	6%
Attended college, but have not received a degree	15%
Associate's degree	1%
Bachelor's degree	54%
Master's degree	11%
Ph.D. degree	3%
Other	7%

Employment Prior to Treatment:	
Employed	49%
Student	3%
Neither (by choice)	32%
Fired/kicked out	1%
Working in the home	8%
Other	8%

Living	Arrangements Prior to Treatment:		
	Living in their own home, apartment	81%	
	or dorm room		
	Living in their parent's, guardian's or other family member's home	10%	
	Stable Living Arrangement	91%	
	Moving from place to place	1%	
	Other	7%	
	Unstable Living Arrangement	9%	

APPENDIX B: SAMPLE PATIENT COMMENTS

Positive

- I'm extremely grateful for my time here at Alta Mira
- Feeling like Alta Mira has changed the way I view my life and what is important to me.
- I am impressed by all the staff at Alta Mira, especially my therapist, Sharif Ali. Having never had true dual-diagnosis treatment, I have been pleasantly surprised by all the testing, on-staff psychiatry, neuro-psychologists, medical doctors, etc. and feel encouraged that long term sobriety and minimal medication is obtainable and manageable.
- Rainey is the best, The RA's Julie, Brook, John, and Steve have all been amazing. The staff here at Alta Mira have been top notch. My therapist Dr. Tempkin has made me feel extremely comfortable. Opening up to her about all my issues has been really easy and she has been more than supportive in every aspect of my recovery. Thanks Alta Mira
- The treatment I have received in the short time I have been here I have already seen the benefits and feel extremely hopeful for a full recovery unlike prior treatment plans I tried
- Julie is the best staff member at Alta mira. I am extremely grateful!
- Lauren my primary therapist has been key and I can not stress how great Nancy and Megan have been. After 89 days program gets very repetitive however certain lectures bring new insights

Why treatment goals were or were not met:

- Great attention by Sharif and the amazing support from Julie
- My anxiety is lower, I know what causes it and how to deal with it.

Why satisfied/dissatisfied with treatment:

- Because Lauren has truly changed my life
- Because my therapist is giving me amazing treatment and advice.
- Feel physically better than I could have expected.
- Making big progress on my anxiety.
- Staff & clients are all great.
- The recovery assistant team especially Megan and Nancy have been very helpful in my overall understanding and acceptance of the program. Lauren has been great at acting as the point of contact between my family and I.
- The staff is great. The community continuity is made a focal point and it has helped my treatment greatly. Julie Haslam is the BEST
- The staff was amazing. The workshops are great. This treatment really allowed me to work on myself in a way that I didn't know how to before.
- Wonderful staff that I love and fun outings

Negative

- Consider lengthening the session length to an hour and a half. Some of the most helpful sessions were the lengthier ones. The hour goes by too quickly and by the time you get through the small chat the hour is almost over.
- I think it would benefit future clients if there was more focus in a designated class once a week regarding the RPP. I also believe that during your last 2 weeks at AM you should have more access (1 hour on the phone and one on the computer) to the electronics to do the homework needed to secure a good RPP.
- Maturity from RA's & staff should be a given...not a luxury.
- Seems a good program for people with substance addictions not possible minor alcohol use disorder, and they keep recommending to my wife I stay longer without explanation
- Would like more time with therapist, longer sessions

Why treatment goals were or were not met:

- It's an ongoing process and we weren't able to define Smart goals
- So much of the program is AA and I am not addicted to substances.

Why satisfied/dissatisfied with treatment:

- I was disappointed about the way some rules are different or bent for different clients
- I'm not getting treated
- I'm satisfied with specific individuals; however the departments seem disjointed and quality of care and facilities suffer.
- Inconsistent care and rules.
- Some of the RA's are going out of their way to make life more difficult in an extremely juvenile and passive aggressive manner. Very unprofessional, and quite troublesome.
- There have been some miscommunication issues which has caused me mental stress.
- Think that most of the program lacks any evidence for harm reduction or abstinence.
- Unfortunately, clarity around departure process is less than optimal.