



# The Brant Haldimand Norfolk RAAM Clinic

## Rapid Access Addiction Medicine

<b>Brantford :</b> <b>320 Colborne Street E., Brantford,</b> (Next to Brant Native Housing) Tuesdays 9:00 am to 6:00 pm Wednesdays 9:00 am - 1:00 pm Fridays 9:00 am - 3:00 pm	<b>Simcoe</b> 32 Robinson Street, Simcoe, ON Thursdays 9:00 am - 3:00 pm	<b>Dunnville</b> 140 Broad Street E., Dunnville, ON (above Hauser's Pharmacy) Mondays 9:00 am - 3:00 PM
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**Phone: 519-758-0008 or 1-866-987-7226 (RAAM) Fax: 226-401-3818**

Referred By: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Referral: (dd/mm/yyyy) \_\_\_\_\_

**PATIENT INFORMATION:**

Name: \_\_\_\_\_ Health Card Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Date of Birth: (dd/mm/yyyy) \_\_\_\_\_ Gender: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Substance Use Disorder: (circle all that apply) Alcohol/ Opiates/ Benzodiazepine Taper/  
 Methamphetamines/ Cocaine Other \_\_\_\_\_ Concurrent Disorders: (Yes) (No)

Patients Goal: \_\_\_\_\_

Attach List of Current Medications: Name of Current Pharmacy: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medical Conditions/Concerns:  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature / Status \_\_\_\_\_

Date (dd/mm/yyyy) \_\_\_\_\_

**Please Fax to The Brantford RAAM Clinic at 226-401-3818**

**The BHN RAAM Team**



# The Brant Haldimand Norfolk RAAM Clinic

## Rapid Access Addiction Medicine

### What is RAAM

Our Rapid Access Addiction Medicine (RAAM) Clinic provides holistic medication assisted treatment for individuals with drug or alcohol use. The Clinic provides brief mental health and addiction counseling

RAAM is a multi-disciplinary team offering integrated holistic treatment for concurrent disorders, alcohol, opioid, methamphetamine, stimulant and benzodiazepine use disorders.

### The RAAM Team

Patients are assessed by an Addictions physician, Addictions Counselor, Case Manager, Mental Health Social Worker Indigenous Mental Health and Addictions Counselor specializing in Intergenerational and Trauma-Informed Care. Your patient's treatment plan will be individualized with possible referrals to withdrawal management, inpatient residential treatment, outpatient treatment and counselling.

### Our Treatment Philosophy

- Harm Reduction
- Low-barrier
- Trauma-informed
- Holistic culture-inclusive approach

### How to Refer Your Patient:

- Patients presenting in your agency with a suspected substance use disorder may be referred to the rapid access addiction medicine (RAAM) clinic where they will receive evidence-based medical and psycho-social interventions and treatment.
- Complete attached referral form and **fax to The BHN RAAM Clinic at 226-401-3818.**
- Patients can be seen the next clinic day.
- Provide patient with an information package and direct patients to attend the next clinic day.

### Key components:

- Integration of care at hospital, RAAM clinic, primary care
- Training, support and mentorship from addictions specialists
- Capacity-building for the treatment of substance use disorders

### Next Steps:

- The RAAM Team will provide you with your patients coordinated care plan.
- When your patient is stabilized, they are referred back to primary care for long-term addiction treatment (with ongoing support from RAAM Team as required).

### The BHN RAAM Team



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## Rapid Access Addiction Medicine

### RAAM Clinic FAQ:

#### What happens at the RAAM Clinic for Patients with an AUD?

The RAAM physician will offer anti-craving medications such as naltrexone or acamprosate on the first visit when indicated. The physician will manage mild to moderate alcohol withdrawal on site with lorazepam or diazepam when it is safe to do so; patients in more severe alcohol withdrawal will be referred to the emergency department or withdrawal management. Patients with comorbid depression or anxiety will be treated concurrently for both conditions.

The dominant view in many psychosocial and primary care settings is that alcohol use disorder is entirely a psychological disorder despite strong evidence that anti-craving medications reduce alcohol use and decrease ED visits and hospitalizations. Mild to moderate withdrawal does not necessarily require an ED visit; in many cases it can be managed in the office with a follow up visit at the RAAM within a day or two.

#### What happens at the RAAM Clinic for Patients with an OUD?

The RAAM physician or NP will prescribe buprenorphine/naloxone if indicated and will give information on take-home naloxone and on overdose prevention strategies. Methadone may be an appropriate alternative to buprenorphine/naloxone for some patients, however this requires that a physician with appropriate training be on staff. The care provided will be flexible and patient-centered. The frequency of follow-up visits and urine drug screens will be based on clinical need and will take into account the patient's resources and work and family responsibilities. Clinical visits will address the patient's use of opioids and other substances, necessary medication adjustments, and their daily mood and functioning

#### What if my patient has both substance use and mental health (concurrent disorders)?

The RAAM clinic will provide counselling and medical treatment for anxiety, depression, PTSD and drug-induced psychosis. The clinic will refer patients to psychiatry and to community agencies for more intensive, formal treatment when warranted.

Many patients use substances in part to cope with symptoms of an underlying mental illness. These patients are at high risk for relapse if their mental illness is not treated. Given the time-limited nature of RAAM clinic services, connection to longer-term community services are essential. Community referrals made early on in RAAM treatment allow clinics to provide the patient with immediate support while they are moved up the wait lists of community programs.

#### What happens when my patient is stable?

RAAM clinics will transfer patients' care back to their primary care provider when they are stable (ideally within 3-9 months). Patients who do not have a primary care provider will be connected to one through the RAAM clinic. The primary care provider will take over prescribing addiction medications and general management, with the RAAM clinician's ongoing support through phone calls, e-mails, a patient's package and provider practice guide and reassessments as required.

### The BHN RAAM Team

