

# FOCUS ON INNOVATION:

## Addiction Comprehensive Health Enhancement Support System (ACHESS)



### Overview

Recovery is a lifelong process that requires consistent support to maintain sobriety. For many individuals, relapse is a common and costly event, and more likely when recovery support is not present. Breakthroughs in technology have given individuals with substance use disorder increased access to platforms that will support their sobriety.

Research has shown that individuals who participate in programs connecting them with a network of peers, with access to information and resources, benefit from this process. The Addiction Comprehensive Health Enhancement Support System, or ACHESS, is an evidence-based smartphone application that utilizes technology to assist in the maintenance of recovery stability, providing individuals with necessary resources.

### How the Program Works

The ACHESS application is provided to patients by agencies to improve treatment and recovery effectiveness. Agencies can choose which levels of care to apply ACHESS. ACHESS is used in the various settings including: residential, intensive outpatient, outpatient, and aftercare or “continuing care”.

The smartphone app effectively offers a digital version of a recovery support on demand, at any time, and in almost all places by providing each person the ability to reach out for practical support. The survey mechanism, operated by each person through their smartphone, reports back to a dashboard for participating counselors and coaches to review. Additionally, each person can send and receive messages, utilizing the program to access peer support. Peer support has been proven to increase the motivation of an individual with a substance use disorder to maintain sobriety.

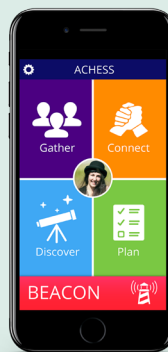
Each person has a recovery journal at their fingertips to record their thoughts and feelings over a period of time. Daily and weekly surveys are sent to the smartphone for

patients to complete. Responses (and non-responses) to the surveys detail their current status, which allows for the identification of potential triggers that cause relapse. All data and information is tracked by a counselor and the coaches, recognizing and monitoring patterns that can lead to relapse. In addition, agencies can aggregate survey data (i.e., BAM, PHQ-2 PHQ-9, GAD-7, custom surveys, etc.) to monitor trends and report on results. This is tremendously helpful at creating a data set outside of clinical settings that can provide a true picture of the patient.

### How this Program is Innovative

ACHESS has been recognized for relapse prevention by the Substance Abuse and Mental Health Services Administration’s National Registry of Evidence-based Programs and Practices (NREPP).

“I believe this is the bright future of recovery because this allows them to connect with their teammates in treatment, their friends in recovery, and their counselor. Communication is a very important aspect in recovery; sometimes when you go into recovery, you feel like you’re isolated, away from your old friends. This gives them a whole new gateway of new friends they can talk to. We’ve averted some relapses by using this application.”



– Don, Central Kansas Foundation

*Focus on Innovation: A series to highlight innovative programs across the country that contribute to a comprehensive strategy to address addiction.*

## Demonstrating Success

NREPP noted in a study that the “program is effective for reducing alcohol use and disorders.” Furthermore, an additional study found that “participants in the treatment group had a greater likelihood of abstinence in the past 30 days, compared with participants in the treatment as usual control group; this difference was statistically significant.”

In addition to the reports of increased instances of abstinence, the same study reported “significantly fewer heavy drinking days.” This is noteworthy because certain studies have indicated that less than 60 percent of individuals continue to participate in aftercare following treatment, whereas more than 90 percent of those in the ACHESS study reported using this application.

## Stakeholders and Partners

In partnering with state governments, health plans, agencies, and local nonprofits, ACHESS has been deployed to customers in New York, Massachusetts, North Carolina, Georgia, Oklahoma, Texas, Ohio, Kentucky, Oregon, Kansas, New Jersey, Indiana, Arizona, Colorado and Nebraska. In total, they have approximately 5,000 people relying on ACHESS as a recovery support tool.

Over the next 12-18 months, the plan is to move into the remaining 36 states.

## The Future of ACHESS

The ACHESS application is recognized for relapse prevention and has a statistically proven ability to assist in the maintenance of sobriety and reduction in heavy drinking. ACHESS keeps people connected to peer support, provides data that can't otherwise be known outside care settings, organizes information and

“Never being alone is very important. We all need that. I think that’s one of the biggest parts of addiction is when we feel alone, the drug was always the first thing we turn to so we didn’t feel scared or alone. With the app, you are not alone at all. The instant communication is awesome. It can be the middle of the night or you can be having a bad day and five people can call you. Amazing that there is that much support out there, it makes me feel good.

I think it is different this time around having this tool because I’m not only getting the help but I’m helping people also, so it’s giving back. I haven’t ever felt better. It’s me again. I found myself this time.”

– Jennifer, Patient in recovery

empowers both caregivers and people in recovery with the knowledge necessary to support a healthy lifestyle. If knowledge is power, the future of this tool as a part of recovery support is promising.

For more information, email [support@chessmh.com](mailto:support@chessmh.com) or visit <http://chessmobilehealth.com>.

## Resources & References

CHES Mobile Health, Inc., <http://www.chessmobilehealth.com>.

National Registry of Evidence-based Programs and Practices (NREPP), <https://www.samhsa.gov/nrepp>.

NIATx, <http://www.niatx.net/Content/ContentPage.aspx?PNID=1&NID=7>.