### **Co-Occurring Capabilities [Requirements]:**

- Connecting individuals to clinically
  necessary services after they receive
  assertive field-based initiation for
  substance use disorder (SUD) treatment
  services.
- Conducting ASAM screening as part of an integrated assessment upon intake into the FSP, and connecting individuals to SUD providers, as appropriate.

- Offering medications for addiction
   treatment (MAT) services directly to clients
   or having an effective referral process in
   place.
- Equipping FSP program staff at all levels of care to provide comprehensive care to individuals living with significant co-occurring behavioral health needs.
- Developing strategies for billing and claiming the appropriate service/delivery system within the context of co-occurring care delivery.



# American Society of Addiction Medicine [ASAM] Criteria

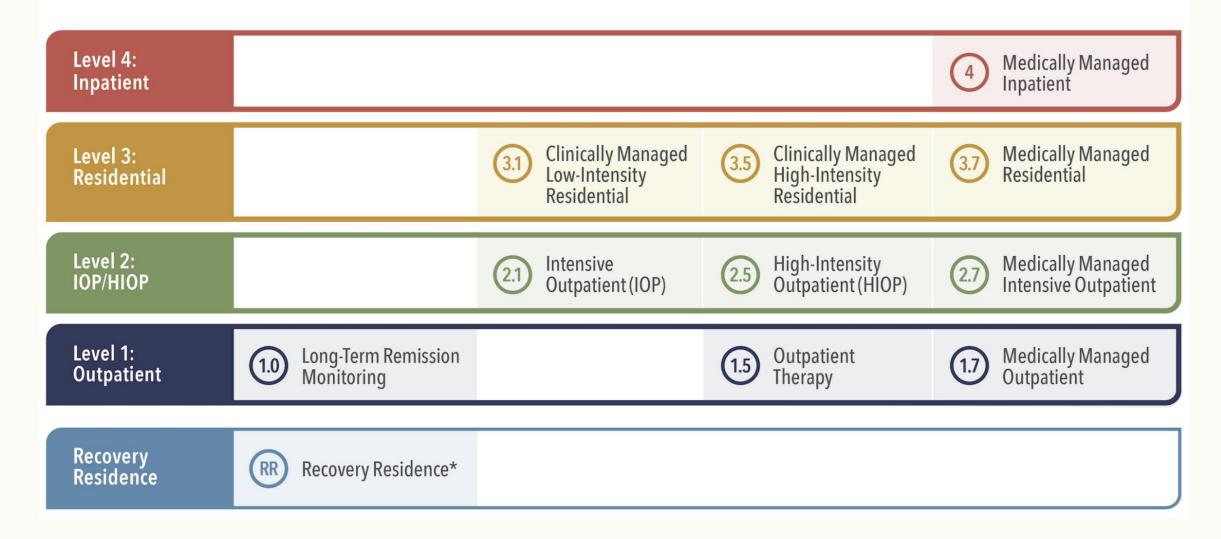


The most widely used and comprehensive set of guidelines for placement, continued stay, and transfer and/or discharge of clients with SUD and/or co-occurring conditions

Level of care recommendations and treatment plans are developed based on multidimensional patient assessments that consider the patient's biomedical, psychological, and social needs.

ASAM six dimensions are used to summarize a person's needs, define severity and develop a treatment plan. Clinicians use the dimensions to identify problems, goals and treatment plan objectives.

#### The ASAM Criteria Continuum of Care for Adult Addiction Treatment





### Current Adult FSPs Co-Occurring Services

- Multidisciplinary team including prescriber, nurse, clinician, case manager, peer specialist, housing specialist, and substance use counselor
- Screening tools including AUDIT, DAST, MAST, CAGE, DORS
- Comprehensive and integrated services including co-occurring services
- Evidence-Based Practices: Motivational Interviewing, Seeking Safety, Harm Reduction, Screening Brief Intervention Referral to Treatment (SBIRT), Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Therapy (DBT)
- Coordination, referral and linkage:
  - Work closely with the HCA Authorization for Residential Treatment (ART) team to coordinate linkage for residential treatment
  - Coordinate linkage to Withdrawal Management, Medication Assisted Treatment (MAT), and outpatient SUD treatment
  - Connect members to 12 step programs including AA and NA
  - Work closely with housing vendors such as recovery residences to support recovery

## Enhanced Recovery FSP Co-Occurring Program

- Voluntary Program
  - Member agreement
  - Attend 3 to 6 co-occurring groups per week (e.g., Living in Balance, Big Book Study, Healthy Relationships, Seeking Safety, Co-occurring Education Group)
  - Attend self help meetings twice a week
  - Weekly check-in with co-occurring treatment specialist
  - Co-Occurring community activities (e.g. NA/AA conventions, "Oct-sober-fest", etc.)
  - Stage Approach:
    - O Stage 1 newly enrolled; actively using or drinking; closely monitored and supported; transportation support to program
    - O Stage 2 minimum six months sobriety; selected a 12-step program; actively participating in groups and meetings; looking for sponsor
    - O Stage 3 minimum 1 year sobriety; attending community events; engaging in productive use of time; assisting other members to get to meetings
    - O Stage 4 consistent in Stage 3 for at least six months; completed step work; modeling recovery; volunteering, attending school or participating in outside events (e.g., Wellness Center); program "ambassador" and taking other members to community events

### **Discussion Questions**



- What do you see as the single biggest opportunity for our clients with the full implementation of these capabilities?
- What is the most significant barrier we need to overcome to make this a reality?
- What are the most pressing training needs, in addition to ASAM screening, for our FSP staff to feel competent as co-occurring capable providers?



### **Questions?**



#### Additional Resources:

- SAMHSA Integrated Treatment for Co-Occurring Disorders
- <u>TIP 42 SUD Treatment for Persons with Co-Occurring Disorders</u>
- DHCS BHSA County Policy Manual [section B.3.5]
- Behavioral Health Advisory Board General Meeting: SUD Continuum
- 3rd Edition ASAM Criteria
- 4th Edition ASAM Criteria

