#### **SAPTA Overview**

**Treatment** 

## TREATMENT TEAM



Treatment of Substance Related Disorders

#### **Treatment**

The Agency currently funds private, non-profit treatment organizations and government agencies statewide to provide the following substance abuse related services and treatment levels of care:

- Comprehensive Evaluations
- Early Intervention
- Civil Protective Custody
- Detoxification
- Residential
- Intensive Outpatient
- Outpatient
- Transitional Housing
- Opioid Maintenance Therapy

#### Definition of Substance Abuse

Abuse is a maladaptive pattern of substance use manifested by recurrent and significant adverse consequences related to the repeated use of substances. In order for an *abuse criterion* to be met, the substance-related problem must have occurred repeatedly during the same 12-month period or been persistent.

#### Definition of Addiction

**Addiction** (substance dependence) is a primary, chronic disease with genetic, psychosocial, and environmental factors influencing its development and manifestations.

Perhaps the overabundance of any behavior to the extent that it has a problematic outcome commonly considered a disease because it's progressive, affects multiple systems, and interventions can affect change.

## Treatment System Design

Substance abuse treatment works best when it is coordinated and when it becomes an evidencebased *system* of care capable of addressing the often complex needs of the total individual through collaborations with other providers that can address the very needs of clients without making them negotiate multiple layers of bureaucracy.

### Treatment Team Responsibilities

- Funding Process
- Monitoring for Compliance with State and Federal Requirement
- Investigation and Quality Assurance (QA)
- Certification
- Involvement with National Treatment Network
- Involvement with Women's Treatment Network
- Various Agency and Task Force Participation

#### Certification

- All funded programs must be certified by SAPTA in accordance with the NAC and in support of federal and state funding stipulations
- Certification is contingent upon an on-site objective program and level of care proficiency review in the areas of general, organizational protocols and operations, personnel, and clinical protocols and operations
- Certification is up to two years, based on the proficiency score
- Proficiency scores below the allowable ranges will seriously jeopardize continued certification and funding
- SAPTA currently certifies 13 levels of care within treatment programs

## Sliding Fee Scale

Persons seeking treatment from a SAPTA-funded program will not be denied services due to their ability to pay. Each funded program is required to maintain a SAPTA-approved Sliding Fee Scale based on family size, income level, and using the federal poverty level guidelines.



## Monitoring

- Compliance monitors are a condition of receipt of SAPTA funding and conducted annually
- Monitor activities determine if a program is meeting the terms and conditions of the grant funding of SAPTA
- Monitors focus on administrative, programming, and fiscal activities to determine if a program is meeting grant requirements and the Program Operating and Access Standards (POAS)
- Corrective/Compliance Action Plans (CAP) are developed in response to non-compliance

## Complaint Investigations

- SAPTA is required by NRS to investigate complaints involving certified programs and may deny certification to alcohol and drug treatment facilities or prevention programs for violations
- All investigation activities conducted by SAPTA are in compliance with patient confidentiality standards for alcohol and drug abuse patients identified in 42 C.F.R., Part 2 and the Health Insurance Portability and Accountability Act (HIPAA) 45 C.F.R Sections 160, 162 and 164
- SAPTA investigations focus on program operations referenced in NAC and grant compliance issues
- Complaints may involve other agencies in aspects of the investigation, especially, the Bureau of Health Care Quality and Compliance or Board of Examiners for Alcohol, Drug, and Gambling Counselors

## Serious Incident Report

- Providers report to SAPTA
- SAPTA reports to MHDS Central Office
- Comply with MHDS Serious Incident Policy (SIR) reporting protocols
- SIR may result in an investigation according to MHDS policy

#### Components of Treatment

Treatment refers to the broad range of primary and supportive services-including:

- Identification and Assessment
- Diagnosis, Placement, and Referrals
- Brief Intervention
- Goal Driven and Evidence-Based Strategies and Program Interventions
- Needed Medical Services
- Psychiatric and Psychological Services
- Social Services
- Continued Support/Recovery Services

# Substance Abuse Prevention and Treatment (SAPT) Block Grant

- SAMHSA, Center for Substance Abuse Treatment (CSAT)
- Services for Abuse and Dependence Funded
- Amount Available
- Annual Re-application Requirements
- NHIPPS Reporting Requirements through NHIPPS:
  - Waiting List
  - Utilization
  - Capacity Reporting
  - National and State Outcome Measures

# SAPTA Provides Publicly Supported Treatment

In SFY 2010, SAPTA has funded to 23 treatment organizations providing services at 71 sites; 26 towns and cities throughout Nevada

4 Programs funded to provide TB/HIV services



#### Clients Access Services in:

- Treatment Programs; both certified or non-certified, funded and non-funded
- Women's Specific Programs Set-Aside Dollars
- Adolescent Specific Programs
- Integrated Treatment Programs
- Drug Court/Criminal Justice
- Co-Occurring Disorders Treatment Projects
- Recovery Support and Peer Services

### Screening and Assessment

#### **Screening**

• Screening is a process for evaluating the possible presences of a particular problem

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#### Assessment

• Assessment is a process for defining the nature of that problem, to render a diagnosis and develop specific treatment recommendations for addressing the problem

#### Understanding the Assessment

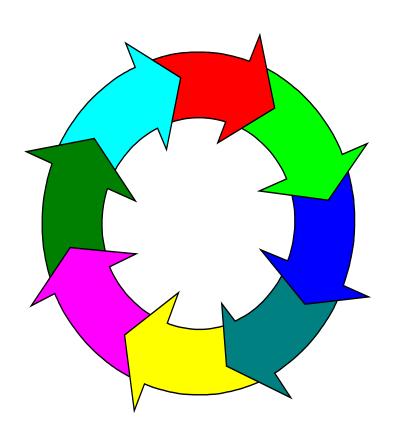
- Necessary Releases 42 CFR and HIPAA
- Diagnosis DSM-IV-TR
- Six Dimensions Identified and Severity Rated
- Appropriate Placements Based on the Assessment
- Recommendations for Client
- Making Referrals
- Standardized Assessment Tools: ASI-Lite (adult)

#### Six Dimensions

- 1. Acute Intoxication and/or Withdrawal Potential
- 2. Biomedical Conditions and Complications
- 3. Emotional, Behavioral, or Cognitive Conditions and Complications
- 4. Readiness to Change
- 5. Relapse, Continued Use or Continued Problem Potential
- 6. Recovery/Living Environment



## The Stages of Change



**™** Pre-contemplation

**™** Contemplation

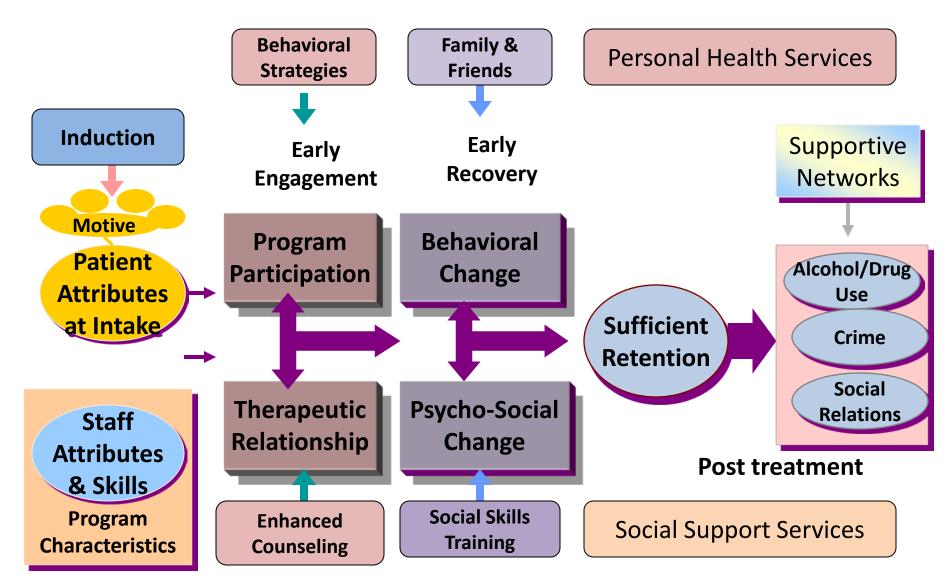
**∞** Preparation

**™** Action

**™** Maintenance

**™** Recurrence

#### **Goal: Evidence-Based Treatment Model**



## Evidence-Based Treatment Approaches

#### **Examples**:

- MotivationalEnhancement
- Cognitive BehavioralTherapy
- Relapse PreventionStrategies

- Assertive CommunityTreatment
- Multi-Systemic Therapy
- Cannabis YouthTreatment
- Emerging NewPractices

American Society of Addiction Medicine Patient Placement Criteria, Second Edition Revised (ASAM PPC 2R)

#### Treatment Services Supported

- Treatment levels of care for adolescents and adults
  - Comprehensive Evaluations Co-occurring SA & MH
  - Early Intervention
  - Detoxification social model
  - Outpatient Services individual & group
  - Intensive Outpatient Services individual & group
  - Residential
  - Transitional Housing requires outpatient services
- Treatment levels for adults only
  - Opioid Maintenance Therapy methadone
  - Civil Protective Custody requires detoxification
  - Community Triage Center houses detoxification

#### What is Required of Treatment Providers

- Admit clients based on federal (SAPT) priority populations:
  - 1. Pregnant Injection Drug Users (IDUs)
  - 2. Pregnant substance abusers
  - 3. Non-pregnant IDUs
  - 4. All others
- State legislative priority services to adolescents and cooccurring population, reduce wait list and increase admissions
- No discrimination, not based on ability to pay, race/ethnicity, gender, disability, etc.

## What is Required of Treatment Providers - continued

- Fund only non-profit private or governmental organizations
- Provide services based on an approved sliding fee scale – income and family size
- Meet the deadlines and requirements of SAPTA's Program Operating and Access Standards (POAS)

## What is Required of Treatment Providers - continued

- Follow the Criteria for Substance Related Disorders and guidelines for placement and treatment focus
- The National Institute on Drug Abuse (NIDA) 13 Principles of Effective Drug Addiction Treatment
- Subgrant (RFA) assurances and Block Grant Requirements regarding use of funds, etc.

### Special Populations

- Pregnant Women and Women with Dependent Children
  - Women's Treatment Network (WTN)
- Adolescents
- TB/HIV Services
- Opioid Maintenance Therapy (methadone)
- Criminal Justice/Drug Court
- Co-Occurring Disorders- Integrated Treatment Services

## Women's Set Aside Funding

- Programs will coordinate alcohol and other drug prevention or treatment activities with the provision of other services such as health, social, correctional and criminal justice, education, vocational rehabilitation, and employment services
- Programs will publicize the availability of these services and the admission priority granted to pregnant women through street outreach programs or public service announcements, regular advertisements, notification of community organizations, health care and social service agencies

# Women's Set Aside Funding - continue

- Provide pregnant women either comprehensive treatment services or interim services within 48 hours of the request for services. Interim services must include counseling on the effects of alcohol and drug use on the fetus and referrals for prenatal care
- Programs will establish linkages with a comprehensive community resource network of related health and social services organizations to ensure a wide-based knowledge of the availability of these services and to facilitate referrals

## Comprehensive Women's Service Delivery

- Each has separate requirements
  - Health Care Services
  - Alcohol and Other Drug Treatment
  - Survival Services
  - Psychosocial Services
  - Parenting and Family Services

SAPTA is working with the Division of Child and Family Services (DCFS) to Administer an Administration for Children and Families (ACF) Grant to Improve Women and Children Services



 WestCare Nevada, Las Vegas – 5 year subgrant to enhance services to Pregnant and Parenting Women

#### HIV/TB Services

- Federal Block Grant Requirement: to provide HIV/TB testing, counseling, referral and outreach services at Treatment Centers
- Contractual Agreements with Carson City Health and Human Services, Northern Nevada HOPES, Southern Nevada Health District, and Frontier and Rural Health to provide services
- Must use NIDA Community Outreach Model or other appropriate model for services to increase high risk clients access to care

## Opioid Maintenance Therapy

- Bureau of Health Care Quality and Compliance is the State Methadone Authority (SMA)
- SAPTA certifies levels of care:
  - Outpatient
  - Opioid Maintenance Therapy
  - Ambulatory Detoxification
- Methadone and Buprenorphine (Federal priority)
- Investigative Authority and Responsibilities

### Drug Court Service

- Offers a general assessment and referral for adult clients referred from local and state courts related to alcohol and drug violations
- Programs work collaboratively with criminal justice system to coordinate identified treatment objectives developed through the assessment and supported by the DSM-IV-TR diagnosis

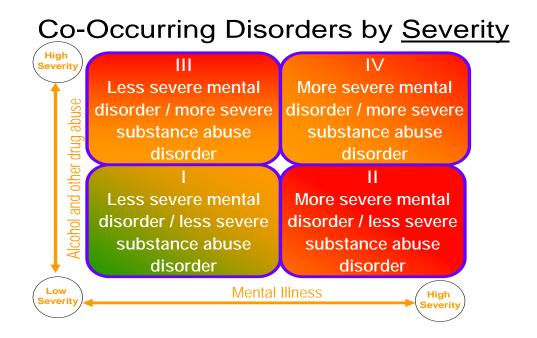


#### **Adolescent Services**

- Early Intervention Treatment school and juvenile justice referral
- Residential Placement usually by Juvenile Justice (DCFS)
- Continued Care/Recovery Support within family and community
- Best Outcomes require addressing early intervention regarding abuse and development of appropriate continued care after release from residential settings
- Most Nevada Certified Programs provide outpatient adolescent treatment

## Co-occurring Disorders - Integrated Treatment Services

- Quadrant I: Less severe mental disorder/less severe substance disorder
- Quadrant II: More severe mental disorder/less severe substance disorder
- Quadrant III: Less severe mental disorder/more severe substance disorder
- Quadrant IV: More severe mental disorder/more severe substance disorder



#### Co-occurring Disorders - continued

- The concept of *no wrong door* to treatment allows those suffering from persistent mental illness and chronic substance abuse disorders to engage in *seamless* treatment for co-occurring issues
- It is the driving principle of current Nevada providers that any person entering mental health care, substance abuse treatment, or primary care should be screened for mental disorders and substance abuse and then provided appropriate treatment

#### Co-occurring Disorders - continued

- The top three challenges for providing care of these clients are:
  - One: Lack of access or availability
  - Two: Cost
  - Three: Stigma and issues about providing services for clients on Opioid Maintenance Therapy (Methadone)



#### **COD** Initiatives

- Co-occurring Disorders (COD) Pilot Project To provide services to Severely Mentally Ill (SMI) and Severely Emotionally Disturbed (SED) populations
- Southern-Adult Services Las Vegas Community Counseling Center with SNAMHS
- Southern-Adolescent Services WestCare with DCFS and CJJS
- Northern-Adult Services Bristlecone Family Resources and Family Counseling Services
- Northern-Adolescent Services Quest Counseling and Consulting

#### Wait List Initiative



- Wait List reduction is overall goal
- Awarded dollars to 12 SAPTA funded providers
- Designed to decrease time on the wait list, increase treatment capacity, admissions, retention rates, and client engagement
- Improve treatment completion rate