

LEVEL 4 MEDICALLY MANAGED INTENSIVE INPATIENT SERVICES BY SERVICE CHARACTERISTICS SELF ASSESSMENT CHECKLIST

I. Setting

Self Assessment Checklist

1. May be offered in any appropriately licensed acute care setting that offers addiction treatment services in concert with intensive biomedical and/or psychiatric services.
2. Implements written procedures that address the handling of items brought into the program including illegal substances, legal medication, prescription medication, weapons, tobacco products, gambling paraphernalia, and pornography.
3. Implements procedures that reasonably ensure the safety of patients and staff, including but not limited to searches of persons served, of belongings, and the physical facility; communications, including mail, telephone use, and use of personal electronics; visitation; and emergency evacuation.
4. Evidence of a written policy or criteria for program entry/admission, transition, and exit; patient-centered variable length of stay. Admission criteria include ASAM dimensional criteria as well as DSM diagnosis.
5. Evidence of a 24-hour staff schedule that includes weekends and holidays.
6. Evidence of a written daily schedule of activities that includes weekends and holidays.

I. SETTING (1 sub-service characteristic)

I.1. Level 4 program services may be offered in any appropriately licensed acute care setting that offers addiction treatment services in concert with intensive biomedical and/or psychiatric services (*The ASAM Criteria*, p. 281).

The organization implements written procedures that address the handling of items brought into the program, including:

- Illegal substances
- Legal medication
- Prescription medication
- Weapons
- Tobacco products
- Gambling paraphernalia
- Pornography

The program implements procedures that reasonably ensure the safety of patients and staff, including but not limited to:

- Searches of persons served, of belongings, and of the physical facility. Searches will be done to preserve privacy and dignity, and will be sensitive to potential trauma of persons served.
- Communications, including mail, telephone use, and use of personal electronics.
- Visitation.
- Emergency evacuation.

Evidence of a written policy or criteria for program entry/admission, transition, and exit. Patient-centered variable length of stay. Admission criteria include ASAM dimensional criteria as well as DSM diagnosis.

Evidence of a 24-hour staff schedule that includes weekends and holidays.

Evidence of a written daily schedule of activities that includes weekends and holidays.

II. SUPPORT SYSTEMS (1 sub-service characteristics)

II.1. In Level 4, necessary support systems include a full range of acute care services, specialty consultation and intensive care (*The ASAM Criteria*, p. 281 -282).

The program has written procedures describing the utilization of and access for:

- Specialty medical services.

II. Support Systems

Self Assessment Checklist

1. Include a full range of acute care services, specialty consultation and intensive care.
2. Has written procedures describing the utilization of and access for specialty medical services, intensive care services, pharmacy services, lab services, psychiatric services, and psychological services.

- Intensive care services.
- Pharmacy services.
- Lab services.
- Psychiatric services
- Psychological services.

III. STAFF (3 sub-service characteristics)

III.1. An interdisciplinary team of appropriately credentialed clinical staff (including addiction-credentialed physicians, nurse practitioners, physician assistants, nurses, counselors, psychologists, and social workers) who assess and treat patients with severe substance use disorders, or addicted patients with concomitant acute biomedical, emotional, behavioral, and cognitive disorders staff Level 4 programs (*The ASAM Criteria*, p. 282).

The program has a written policy and procedures on clinical staff responsibility for treatment plan coordination.

The program has a written policy on credentials of clinical staff.

The program has a written job description and qualifications for the program director.

III.2. Level 4 programs are staffed by a team of appropriately trained and credentialed professionals who provide medical management by physicians 24 hours a day, primary nursing care and observation 24 hours a day, and professional counseling services 16 hours a day (*The ASAM Criteria*, p. 282).

The program has a written position description for a medical director.

Evidence of a daily schedule of appropriately trained and credentialed professionals who provide medical management by a physician 24 hours a day and primary nursing care and observation 24 hours a day, and professional counseling services 16 hours a day.

III.3. Facility-approved addiction counselors, or licensed, certified, or registered addiction clinicians who administer planned interventions according to the assessed needs of the patient (*The ASAM Criteria*, p. 282).

The program has a written policy and procedure on privileging for addiction clinicians.

The program has a written policy and procedure for periodic and regular review of addiction clinicians' status to continue a clinical practice within the facility.

III. Staff

Self Assessment Checklist

1. Staffed by an interdisciplinary team of appropriately credentialed clinical staff who assess and treat patients with severe substance use disorders, or addicted patients with concomitant acute biomedical, emotional, behavioral, and cognitive disorders. ●
2. Has a written policy and procedures on clinical staff responsibility for treatment plan coordination. ●
3. Has a written policy on credentials for clinical staff. ●
4. Has a written job description and qualifications for the program director. ●
5. Has a written position description for a medical director. ●
6. Has a daily schedule of appropriately trained and credentialed professionals who provide medical management by a physician 24 hours a day and primary nursing care and observation 24 hours a day, and professional counseling services 16 hours a day. ●
7. Has facility-approved addiction counselors, or licensed, certified, or registered addiction clinicians who administer planned interventions according to the assessed needs of the patient. ●
8. Has a written policy and procedure on privileging for addiction clinicians. ●
9. Has a written policy and procedure for periodic and regular review of addiction clinicians' status to continue a clinical practice within the facility. ●

IV. THERAPIES (5 sub-service characteristics)

IV.1. Level 4 program offer an individualized array of treatment services for substance use disorders, as well as any concurrent biomedical, emotional, behavioral, or cognitive problems, delivered by an interdisciplinary team (*The ASAM Criteria, p. 269*).

Evidence of a daily schedule of activities that includes medical, nursing, and other clinical services.

Evidence of a staff schedule documenting interdisciplinary involvement in activities. Evidence of a program description describing services and objectives of services

IV. Therapies *Self Assessment Checklist*

1. Offer an individualized array of treatment services for substance use disorders, as well as any concurrent biomedical, emotional, behavioral, or cognitive problems, delivered by an interdisciplinary team.
2. Has a daily schedule of activities that includes medical, nursing, and other clinical services.
3. Has a staff schedule documenting interdisciplinary involvement in activities.
4. Has a program description that describes services and objectives of services.
5. Cognitive, behavioral, motivational, pharmacologic, and other therapies are provided on an individual or group basis, depending on the patient's needs. For the patient who has a severe biomedical disorder, physical health interventions are available to supplement addiction treatment.
6. Has a schedule that show individual and group programs that cover the full range of therapies and educational activities matched to the population served.
7. Has a written policy on staff training on a range of evidence-based cognitive and behavioral therapies on addiction and on psychiatric pharmacotherapies.
8. Has a schedule of individualized treatment services to manage a patient's biomedical disorder.
9. Health education services are provided for patients.
10. Has planned clinical interventions that are designed to enhance the patient's understanding of his or her addiction illness.
11. Has a schedule of clinical activities to enhance patients' understanding of their addiction disorder.

IV.2. Cognitive, behavioral, motivational, pharmacologic, and other therapies are provided on an individual or group basis, depending on the patient's needs. For the patient who has a severe biomedical disorder, physical health interventions are available to supplement addiction treatment (*The ASAM Criteria, p. 283*).

Evidence of a schedule that shows individual and group programs that cover the full range of therapies and educational activities matched to the population served.

Written policy on staff training on a range of evidence-based cognitive and behavioral therapies, on addiction, and on psychiatric pharmacotherapies.

Evidence of a program description of services and their objectives.

Evidence of a schedule of individualized treatment services to manage a patient's biomedical disorder.

IV.3. Health education services are provided for patients in Level 4 programs (*The ASAM Criteria, p. 283*).

Evidence of a schedule of activities that includes health education sessions. Evidence of a program description of services and their objectives.

IV.4. Planned clinical interventions that are designed to enhance the patient's understanding of his or her addiction illness (*The ASAM Criteria, p.283*).

Evidence of a schedule of clinical activities to enhance patients' understanding of their addiction disorder.

Evidence of a program description of services and their objectives.

IV.5. Services for the patient's family, guardian, or significant others (*The ASAM Criteria, p. 283*).

Evidence of a schedule that includes offering services for the patient's family, guardian, or significant others.

Evidence of a program description of services and their objectives.

V. ASSESSMENT/TREATMENT PLAN REVIEW (4 sub-service characteristics)

V.1. A comprehensive nursing assessment, performed at the time of admission (*The ASAM Criteria, p.284*).

There are written procedures that a nursing assessment is conducted by a Registered Nurse at admission.

There are written procedures for ongoing nursing monitoring 24 hours/day, 7 days/week.

Evidence of a 24 hours/day, 7 days/week nursing schedule and credentials of the staff in the schedule.

Evidence of nursing assessments in the patient record.

V.2. Physician approval of the admission (*The ASAM Criteria, p. 284*).

V.3. A comprehensive history and physical examination, performed by a physician within 12 hours of admission (*The ASAM Criteria, p. 284*).

The program has a written policy on which medical needs/conditions would prevent admission to the program.

The program has a written procedure that details when and how a physical exam is done.

Patient records include a copy of the medical evaluation completed within the timeframe specified in the program's procedures.

Treatment plan addresses and integrates co-occurring biomedical or mental disorders/disabilities (should a patient have them) into the plan.

V.3. A comprehensive biopsychosocial assessment, begun at the time of admission (*The ASAM Criteria, p. 284*).

Written policy that all patients receive an assessment that addresses the six dimensions of The ASAM Criteria.

Evidence that there is an independent process for conducting the assessment.

Written procedure on ASAM Criteria training for personnel doing assessments, and/or other qualifications of the personnel conducting the assessment.

Written procedures identifying timeframes for reviewing and modifying treatment plans to ensure that the

V. Assessment/Treatment Plan Review Self Assessment Checklist

1. There is a comprehensive nursing assessment performed at the time of admission.
2. Has written procedures that a nursing assessment is conducted by a Registered Nurse at admission.
3. There are written procedures for ongoing nursing monitoring, 24 hours/day, 7 days/week.
4. Has a 24 hours/day, 7 days/week nursing schedule and credentials of the staff in the schedule.
5. Has nursing assessments in the patient record.
6. There is physician approval of the admission.
7. Includes a comprehensive history and physical examination, performed by a physician within 12 hours of admission.
8. Has a written policy on which medical needs/conditions would prevent admission to the program.
9. Has a written procedure that details when and how a physical exam is done.
10. Patient records include a copy of the medical evaluation completed within the timeframe specified in the program's procedures.
11. Treatment plan addresses and integrates co-occurring biomedical or mental disorders/disabilities (should a patient have them) into the plan.
12. There is a comprehensive biopsychosocial assessment begun at the time of admission.
13. Has a written policy that all patients receive an assessment that addresses the six dimensions of The ASAM Criteria.
14. Has an independent process for conducting the assessment.
15. Has a written procedure on ASAM Criteria training for personnel doing assessments, and/or other qualifications of the personnel conducting the assessment.
16. Has written procedures identifying timeframes for reviewing and modifying treatment plans to ensure that the plan for each patient served reflects current issues, maintains relevance, and is reviewed formally once a week (more often if the person is quite unstable).
17. Includes an individualized treatment plan that includes formulation and articulation of short-term, measurable treatment goals, and activities designed to achieve those goals. The plan is developed in collaboration with the patient, reflects the patient's personal goals.
18. Treatment plan reviews are conducted at specified times, as noted in the treatment plan.
19. Implements written procedures identifying timeframes for initial development of, and review of, treatment plans to ensure that the plan for each patient served reflects current issues, maintains relevance, is reviewed formally at least once a week (and more often if the person is quite unstable), and patient consent for treatment.

plan for each patient served:

- Reflects current issues.
- Maintains relevance.
- Is reviewed formally once a week, and more often if the person is quite unstable.

V.4. An individualized treatment plan that includes problem formulation and articulation of short-term, measurable treatment goals, and activities designed to achieve those goals. The plan is developed in collaboration with the patient, reflects the patient's personal goals. Treatment plan reviews are conducted at specified times, as noted in the treatment plan (The ASAM Criteria, p. 284).

The program implements written procedures identifying timeframes for initial development of, and review and modification of, treatment plans to ensure that the plan for each person served:

- Reflects current issues.
- Maintains relevance.
- Is reviewed formally at least once a week, and more often if the person is quite unstable.
- Patient consent for treatment.

VI. DOCUMENTATION (1 sub-service characteristic)

VI.1. There are personalized and individualized progress notes in the patient's record that clearly reflect implementation of the treatment plan, the patient's response to therapeutic intervention for all disorders treated, as well as subsequent amendments to the plan (ASAM Criteria, p. 285).

VI. Documentation

Self Assessment Checklist

1. There are personalized and individualized progress notes in the patient's record that clearly reflect implementation of the treatment plan, the patient's response to therapeutic intervention for all disorders treated, as well as subsequent amendments to the plan.
2. Has written policies and procedures on progress note documentation.

The program has written policies and procedures on progress note documentation.
