

LEVEL 3.1 CLINICALLY MANAGED LOW-INTENSITY RESIDENTIAL CO-OCCURRING ENHANCED SERVICES BY SERVICE CHARACTERISTICS ¹

I. SETTING

No additional sub-service characteristic

II. SUPPORT SYSTEMS (2 sub-service characteristics)

Address those services which to be readily available through affiliation or contract.

II.1. Level 3.1 co-occurring enhanced programs offer appropriate psychiatric services, including medication evaluation and laboratory services (*The ASAM Criteria, p 224*).

Patients admitted to Level 3.1 co-occurring enhanced programs meet the diagnostic criteria for both a mental disorder and substance use disorder. Providing active psychiatric services, including medication evaluation and laboratory services is a defining service characteristic of the co-occurring intensity of service.

II.2. Services are provided on-site or closely coordinated off-site, as appropriate to the severity and urgency of the patient's mental conditions (*The ASAM Criteria, p 224*).

Level 3.1 co-occurring enhanced programs have latitude and flexibility to provide services on-site or off-site given the severity and urgency of the patient's mental conditions.

Goal: Provide active psychiatric services, including medication evaluation and laboratory services.

III. STAFF (3 sub-service characteristics)

Address the composition and competencies of professionals on the staff of the program.

III.1. Level 3.1 co-occurring enhanced programs are staffed by appropriately credentialed mental health professionals, who are able to assess and treat co-occurring disorders with the capacity to involve addiction trained psychiatrists (*The ASAM Criteria, p 225*).

Patients presenting for treatment at Level 3.1 co-occurring enhanced services require a set of treatment services that are provided by mental health clinicians with the education, training, and expertise to assess and manage co-occurring disorders. Since psychiatric services are an integral part of the services, staff must work in conjunction with addiction trained psychiatrists to provide an integrated treatment service.

III.2. Some (if not all) of the addiction treatment professionals should have sufficient cross-training in addiction and mental health to the signs and symptoms of mental disorders, and to understand and be able to explain to the patient the purposes of psychotropic medications and their interactions with substance abuse (*The ASAM Criteria, p 225*).

In order to provide optimal clinical services to patients with a mental and substance use disorder, addiction professionals working in a Level 3.1 co-occurring enhanced program must be competent to recognize the signs and symptoms of mental disorders and be able to be a resource to patients to explain the purpose of psychotropic medications and their interactions with substance abuse.

III.3. The intensity of nursing care and observation is sufficient to meet the patient's needs (*The ASAM Criteria, p 225*).

Level 3.1 co-occurring enhanced programs, unlike Level 3.1 programs, must plan for the availability of on-site nursing services to meet the needs of patients as they arise.

¹This document provides an overview of the characteristics of co-occurring enhanced programs at Level 3.1 Clinically Managed Low-Intensity Residential Services. Clinically Managed Low-Intensity co-occurring enhanced programs should review *The ASAM Criteria*, 2013, 3rd edition, for criteria specific to Level 3.1.

Goal: Services are provided by mental health clinicians with the education, training, and expertise to assess, monitor, and manage severe and chronic mental disorders.

IV. THERAPIES (3 sub-service characteristics)

Cover the range of therapies that programs need to offer to ensure they meet the personalized biopsychosocial needs of patients.

IV.1. Level 3.1 co-occurring enhanced programs offer planned clinical activities (either directly or through affiliated providers) that are designed to stabilize the patient's mental health problems and psychiatric symptoms and to maintain such stabilization (*The ASAM Criteria, p 226*).

Level 3.1 co-occurring enhanced programs provide a regular schedule of planned clinical activities (individual counseling, group counseling, medication management and education) that work to stabilize the patient's mental health problems, psychiatric symptoms and maintain such stabilization.

IV.2. The goals of therapy apply to both the substance use disorder and any co-occurring mental disorder (*The ASAM Criteria, p 226*).

Level 3.1 co-occurring enhanced programs provide integrated mental health and substance use disorder treatment, and as such, develop and implement a unified treatment plan with a single set of therapy goals.

IV.3. Specific attention is given to medication education and management and to motivational engagement strategies, which are used in preference to confrontational approaches (*The ASAM Criteria, p 226*).

The use of motivational engagement strategies can positively impact readiness for change as well as promote positive engagement in treatment. Experience shows that these strategies are particularly effective when providing medication education and management services.

Goal: Provide a regular schedule of planned clinical activities that work to stabilize the patient's mental health problems, psychiatric symptoms and maintain such stabilization.

V. ASSESSMENT/TREATMENT PLAN REVIEW (2 sub-service characteristics)

Addresses assessment of the patient for withdrawal management services, addiction treatment, and patient's recent psychiatric history.

V.1. Level 3.1 co-occurring enhanced programs provide a review of the patient's recent psychiatric history and mental status examination. (If necessary, this review is conducted by a psychiatrist). A comprehensive psychiatric history, examination, and psychodiagnostic assessment are performed within a reasonable time as determined by the patient's needs (*The ASAM Criteria, p 226*).

A comprehensive review and assessment of the patient's recent psychiatric history, as well as psychodiagnostic assessment are part of the standard multidimensional assessment. The assessment is the foundation for developing an individualized treatment plan.

V.2. Level 3.1 co-occurring enhanced programs (either directly or through affiliation with another program) also provide active reassessment of the patient's mental status, at a frequency determined by the urgency of the patient's psychiatric disorders and follow through with mental treatment and psychotropic medications (*The ASAM Criteria, p 227*).

Active reassessments of the patient's mental status at a frequency determined by the urgency of the patient's psychiatric disorder ensures that the patient's response to treatment and medications is accurately tracked and appropriate adjustments to treatment and medications are made.

Goal: Provides a review of the patient's recent psychiatric history and mental status examination.

VI. DOCUMENTATION (1 sub-service characteristic)

Detail the expectations regarding the individualized patient information that needs to be captured to ensure optimal patient care.

VI.1. Level 3.1 co-occurring enhanced programs document the patient's mental health problems, the relationship between the mental and substance use disorders, and the patient's current level of mental functioning (*The ASAM Criteria, p 227*).

The primary method for documenting progress is through regular notes that describe the implementation of the treatment plan, patient response to interventions and any amendments made. Co-occurring enhanced program documentation specifically record the patient's mental health problems, the relationship between the mental and substance use disorders, and the patient's current level of mental functioning. Notes should be timely, complete, and accurate, in accordance with established policies and procedures.

Goal: Specifically record the patient's mental health problems, the relationship between the mental and substance use disorders, and the patient's current level of mental functioning.