


Understanding and Accessing ALL SUD Treatment Levels of Care

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Agenda

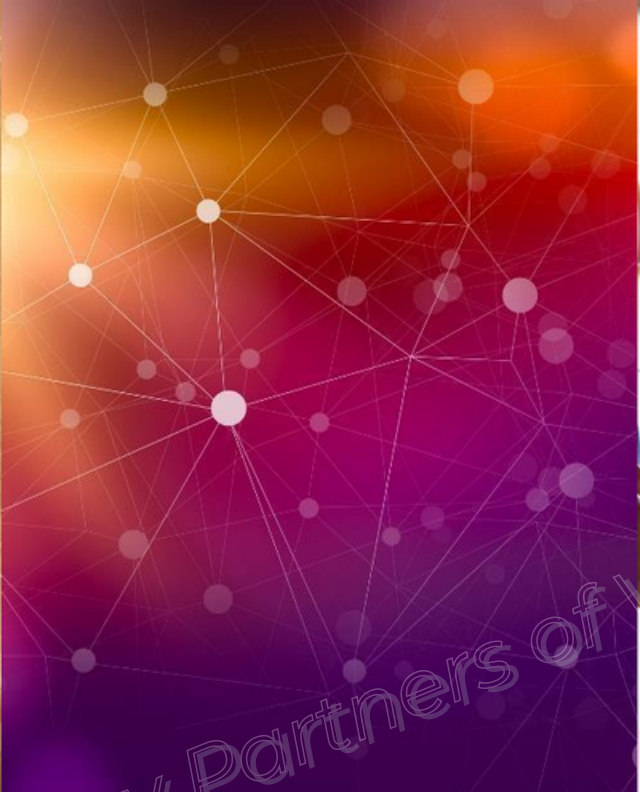
ASAM Overview

Vermont's System of Care

Accessing Treatment

Recovery Partners





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ASAM Levels of Care

- ASAM is the American Society of Addiction Medicine
- Levels of Care Range from 0.5-4
- What does it mean to “be in treatment?”

ASAM

Levels of Care

4

4.0 Hospital: Medically Managed Intensive Inpatient Services

3

3.7 "Rehab Detox:" Medically Monitored High Intensity Inpatient Services
3.5 "Rehab:" Clinically Managed High Intensity Inpatient Residential Services
3.1 Clinically Managed Low Intensity Residential Services

2

2.5 Partial Hospitalization Services
2.1 Intensive Outpatient Services

1.0 Outpatient

1

1.0 Opioid Treatment Program (OTP)

0

0.5 Early Intervention

*Important Note:
These levels of care operate like a set of stairs. It is important to walk up and down these stairs appropriately. One should not jump from 4.0 to 1.0.

4.0 Hospital: Medically Managed Intensive Inpatient Services

- When is hospital appropriate?
 - When severely withdrawing from alcohol and/or benzodiazepines
 - When co-occurring medical issues need to be addressed in a hospital
- What does severe alcohol/benzodiazepine withdrawal look like?
 - Seizures
 - Delirium Tremens (severe shaking and hallucinations)
- Length of Stay?
 - Typically, as long as “medically necessary”

3.7 “Rehab Detox:” Medically Monitored High Intensity Inpatient Services

3.5 “Rehab:” Clinically Managed High Intensity Inpatient Residential Services

3.1 Clinically Managed Low Intensity Residential Services

- When is 3.7 appropriate?
 - When withdrawal management (detox) is needed
- When is 3.5 appropriate?
 - When lower levels of care are not successful, and 24/7 interventions are needed
 - When use or living environment do not allow for recovery efforts
- When is 3.1 appropriate?
 - When multiple attempts at 3.5 have not been successful, and;
 - When aftercare attempts at appropriate levels of care have not been successful

2.5 Partial Hospitalization Services

2.1 Intensive Outpatient Services

- When is Partial Hospitalization appropriate?
 - When the individual needs daily treatment, but the recovery environment allows for them to be outside of a 24/7 setting
- When is Intensive Outpatient appropriate?
 - Typically, after leaving inpatient/residential treatment
 - When once per week counseling is not meeting the current level of support needs
 - When individual is in relapse-mode – as to have greater supports than individual outpatient



1.0 Outpatient

1.0 Opioid Treatment Program (OTP)

- When is Outpatient appropriate?
 - Anytime – the counselor should understand if a higher level of care is indicated
 - Excellent introduction to treatment/counseling
 - While in the maintenance stage of change
- When is an OTP appropriate?
 - When struggling with opioid use/withdrawal
 - Opioid withdrawal can be medically managed at the OTP level of care
 - When harm reduction is needed – OTP's save lives

0.5 Early Intervention

- Who provides “early intervention?”
 - Clinical/Medical services with an ability to recognize SUD issues and make appropriate referrals
- Examples of 0.5 settings:
 - Hospital Emergency Rooms
 - Primary Care clinics
 - SBIRTs
 - CRASH/IDRP programs
 - Public Inebriate Programs

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Principles of Effective Treatment

For any Level of Care

- Addiction is complex, but treatable
- No single treatment is appropriate for all
- Treatment must be readily available
- Treatment attends to multiple needs, not just drug use
- Remaining in treatment is critical
- Counseling is the most common form of treatment
- Medications are important
- Treatment plans must be continually updated
- Many people have co-occurring SUD and Mental Health Disorders
- Detoxification is only the first step in treatment
- Treatment does not need to be voluntary to be effective
- Relapses occur; monitor drug use continually
- Treatment should include assessment for infectious disease

(National Institute on Drug Abuse)

Vermont Examples in ASAM

ASAM 4.0	ASAM 3.7/3.5	ASAM 2.5	ASAM 1.0 OTP	ASAM 0.5
UVM	Serenity House	No Partial Hospital	Chittenden Clinic	Public Inebriate
SVMC	Valley Vista	ASAM 2.1	West Ridge Center	Vermont IDRP
RRMC	Valley Vista Vergennes	Rutland Mental Health	Habit Op-Co	Emergency Depts
CVMC	ASAM3.1	HCRS	BAART	FQHCs
Springfield Hospital	Grace House	UCS	ASAM 1.0	SBIRTs
Windham Center	McGee House*	Howard Center	Designated Agencies	Urgent Care
Brattleboro Retreat		WCMHS	Private Practices	Work EAPs



Addiction is complex and requires a multifaceted approach to care.

Accessing Treatment

Client makes the first call, with or without a referring agency.

Arriving for the intake appointment. Transportation is a barrier for rural SUD populations. Vermont has a network of Medicaid funded transportation.

Client is deemed appropriate for the level of care; engages in services; develops aftercare plan for next level of care when clinically appropriate.

First Call

Screening

Transportation

Assessment

Engagement

Agencies screen, determining appropriateness to their level of care and program. If not appropriate, referral is made.

Clinical Biopsychosocial conducted by qualified staff, to determine diagnosis, treatment needs, and appropriateness in level of care.

Points to Consider

LENGTH OF STAY

- There is no clear research on best length of stays
- Length of stay should be determined by clinical needs, according to ASAM
- An individual should be in the least restrictive environment according to their needs (i.e. IOP vs. Inpatient; Hospital vs OTP)

ACCESS

- If a referral source/agency/individual wants to stay informed with the client's intake and treatment, a signed Authorization for the Release of Information **MUST** be valid and signed.
- Treatment is available in the system of care. Best to access early and often. Don't wait until a crisis.



Summary

Treatment is available. Best outcomes are when people remain in the treatment system. There are multiple levels of care, with many providers in the state. There are no wrong doors – call a provider and they can help you navigate best referral.

Thank You

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