

ASAM Criteria What it is and Why it's Important

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ASAM Criteria: What it is and Why it's Important Webinar

Wednesday, June 10, 2015 10:00 AM – 11:30 AM

Facilitator:

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Presenter

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Primary Reference: The American Society of Addiction Medicine (ASAM) Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions

> American Society of Addiction Medicine, Third Edition, 2013 The Change Companies, Publisher



To help you learn more about ASAM....

- Illustrate the important role of ASAM in the changing world of behavioral health care
- Define and review the ASAM Criteria
- Connect the ASAM with other effective EBP, namely Motivational Interviewing (MI)
- Discuss the updates to the ASAM Criteria in the 3rd Edition (2013)
- Locate where to receive ASAM Criteria training



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Why the ASAM Criteria?

The ASAM Criteria helps, clinicians, counselors and care managers make objective decisions about patient admission, continuing care, and transfer/discharge for individuals with addictive, substance-related, and cooccurring conditions. Through their multidimensional assessment and the continuum of care, the criteria can improve patient outcomes.

ASAM 3rd Edition. Dust Cover

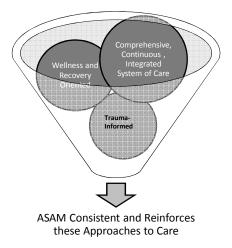
Intention of ASAM

- Move practitioners AWAY FROM determining treatment driven by diagnosis or the program (you get this because it is what we offer)
- Move us TOWARD care that is
 - Individualized
 - Clinically-driven
 - Participant-directed
 - Outcome-informed



ASAM Criteria, 3rd Ed, p. xiii

Consistent with Current Thought in providing EBP in Behavioral Health





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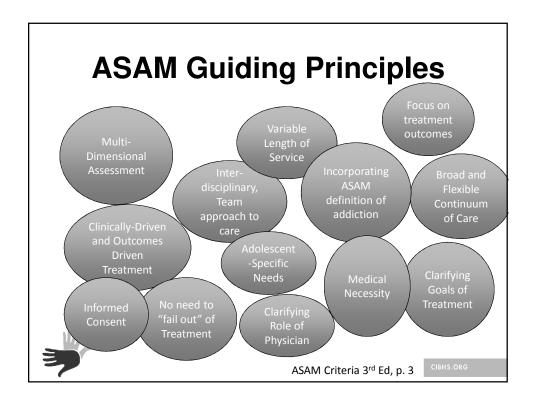
Promoted in 1115 Waiver

- Programmatic components of the Drug Medi-Organized Delivery System Waiver include:
 - Continuum of Care: Creating a continuum of care those services available to address substance use.
 - Assessment Tool: Establishing the American Society of Addiction Medicine (ASAM) assessment tool to determine the most appropriate level of care so that clients can enter the system at the appropriate level and step up or step down in intensive services, based on their response to treatment.



http://www.dhcs.ca.gov/provgovpart/Documents/Draft_DMC_Waiver_STCs_7-16-14.ndf

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Dianavahaaasial	Biopsychosocial Assessment Elements	
Biopsychosocial Assessment	History of the present episode	
Elements	Family history	
	Developmental history	
These	Alcohol, tobacco, other drug use, addictive history	
components are	Personal/social history	
collected in the	Legal history	
assessment process and are organized in the	Psychiatric history	
	Medical history	
ASAM	Spiritual history	
dimensions ASAM Criteria, 3 rd Ed,	Review of systems – including present and past medical/psychological symptoms	
	Mental Status Exam	
	Physical examination	
	Formulation and diagnoses	
pp.39-40	Survey of assets, vulnerabilities and supports	
	Treatment recommendations	

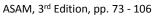
ASAM Dimensions

ASAM Dimensions		
Dimension 1	Acute Intoxication and/or Withdrawal Potential – Exploring an individual's past and current experiences of substance use and withdrawal.	
Dimension 2	Biomedical Conditions and Complications – Exploring an individual's health history and current physical condition.	
Dimension 3	Emotional, Behavioral, or Cognitive Conditions and Complications – Exploring and individual's thoughts, emotions and mental health issues.	
Dimension 4	Readiness to Change – Exploring and individual's readiness and interest in changing.	
Dimension 5	Relapse, Continued Use, or Continued Problem Potential – Exploring an individual's unique relationship with relapse or continued use or problems.	
Dimension 6	Recovery/Living Environment – Exploring an individual's recovery or living situation, and the surrounding people, places and things.	
ASAM Criteria, 3 rd Ed. P. 43		

Levels of Service

- As assessment material is organized into the dimensions, severity for each dimension is considered
- ASAM has four levels of service and an early intervention level for both adolescents and adults







Levels of Care - Adult

Level of Care	Adult Title	Description
0.5	Early Intervention	Assessment and education for @ risk individuals who do not meet dx criteria for SUD
1	Outpatient Services	Less than 9 hours of service/week for recovery or motivational enhancement/strategies
2.1	Intensive Outpatient Services	9 or more hours of service/week to treat multi- dimensional instability
2.5	Partial Hospitalization Services	20 or more hours service/week for multi-dimensional instability not requiring 24 hour care
3.1	Clinically Managed Low-Intensity Residential Services	24-hour structure with available trained personnel; at least 5 hours of clinical service/week
3.3	Clinically Managed Population-Specific High-Intensity Residential Services	24 hour care with trained counselors to stabilize multi- dimensional imminent danger. Less intense milieu and group treatment for those with cognitive and other impairments unable to use full active milieu or therapeutic community

ASAM Criteria, 3rd Ed., p. 106.



Levels of Care - Adults

Level of Care	Adult Title	Description
3.5	Clinically Managed High-Intensity Residential Services	24 hour care with trained counselors to stabilize multidimensional imminent danger and prepare for outpatient treatment. Able to tolerate and use full active milieu or therapeutic community
3.7	Medically Monitored Intensive Inpatient Services	24 hour nursing care with physician availability for significant problems in Dimensions 1,2, or 3. 16 hour/day counselor ability
4	Medically Managed Intensive Inpatient Services	24-hour nursing care and daily physician care for severe, unstable problems in Dimensions 1, 2 or 3. Counseling available to engage patient in treatment
OTP (Level 1)	Opioid Treatment Program (Level 1)	Daily or several times weekly opioid agonist medication and counseling available to maintain multidimensional stability for those with severe opioid use disorder

Not included in this slides set: Adolescent LOC and Level of Withdrawal Management for Adults

ASAM Criteria, 3rd Ed., p. 106

Connection to Motivational Interviewing (MI)

- We might be CORRECT that an individual is best suited for a particular level of care, but we won't be EFFECTIVE if we insist they are placed in that level.
 - Important role of assessing Dimension 4
 - MI starts with engagement, uses focusing and evocation to move toward change planning
 - Motivation shifts throughout levels of care and treatment. MI provides skills to respond to client's changing motivation by engaging, re-engaging and GUIDING toward change.

New and Important ASAM Terms

- Move beyond "placement" to challenge the idea that placing people in treatment is the "primary and sufficient" goal.
- "Withdrawal Management" The liver detoxifies/clinicians manage withdrawal.



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New and Important ASAM Terms

- Co-Occurring Mental Health and Substance-Related Conditions and Disorders
 - Co-Occurring Capable
 - Co-Occurring Enhanced
 - Complexity Capability
- Opioid Treatment Services includes all meds to treat opioid disorders
- Clinically Managed Population-Specific High Intensity Residential Services

ASAM Criteria, 3rd Edition, pp. 15-16

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New and Important Applications of ASAM

- Older adults
- Parents or Parents to be in addiction treatment with their children
- "Safety-sensitive" Occupations
- Persons in criminal justice settings
- Gambling Disorder
- Tobacco Use Disorder



ASAM Criteria, 3rd Ed, pp. 307-367

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Questions?



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