

CCBHC

Standards of Care

Mark Disselkoen, MSW, LCSW, LADC

CASAT

March 7, 2017

Disclaimer

- *The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).*

10,000 foot view



Screening

- All new consumers requesting or being referred for behavioral health will, at the time of first contact, receive a preliminary screening and risk assessment to determine acuity of needs.
- That screening may occur telephonically or in person.

Screening

- The preliminary screening will be followed by:
 - (1) an initial evaluation, and
 - (2) a comprehensive person-centered and family-centered diagnostic and treatment planning evaluation, with the components of each specified in program requirement, 4.
 - Each evaluation builds upon what came before it.

Types of Screening Tools

- Screening, Assessment and Diagnostic Services will include a range of evidence based practices.
- The use of standardized screening tools is required by all CCBHCs.
- These standardized screening tools include developmentally appropriate measures to determine the existence of behavioral and symptom indicators that may signify the existence of a behavioral health need.

Children's Behavioral Health Screenings

- *Achenbach Children's Behavioral Checklists, the Ages and Stages Questionnaire-Social Emotional, and*
- *The CRAFTT* screening for adolescent substance use.

Types of Screening Tools

- *The Patient Health Questionnaire-9 (PHQ-9)* and the *DSM-5 Level 1 and 2 Cross-Cutting Symptom* screens are also standardized screening tools that provide a wide variety of validated screenings as well as symptom severity ratings for on-going monitoring of symptoms during treatment and recovery.
- Standardized screenings assist clinical decision making to determine if an individual may meet criteria for a behavioral health issue and require additional diagnostic assessment.

Types of Screening Tools

- All individuals requiring further diagnostic assessment will be provided with standardized bio-psycho-social assessments to help guide the clinician, in collaboration with the individuals seeking services and their families, to make informed decisions on the treatment and recovery support options.

Crisis Management Services

- A note on training and requirements
- Crisis Management Requirements:
 - Comprehensive suicide assessments and interventions using the *Collaborative Management and Assessment of Suicidality* to identify and address immediate safety needs of the client will be used.
 - In accordance with the requirements of program requirement 4, the CCBHC provides crisis management services that are available and accessible 24-hours a day and delivered within three hours.

Crisis Management Services

- Identifying and managing individuals who may be at-risk of or currently experiencing withdrawal is essential to mitigating risk and determining the level of care needed to safely manage the severity of withdrawal. Individuals will be assessed for signs and symptoms of withdrawal using the *Clinical Institute Withdrawal Assessment of Alcohol Scale (CIWA/CIWA-Ar)* and the *Clinical Opiate Withdrawal Scale (COWS)*.

Crisis Management Services

- If the screening identifies an emergency/crisis need, appropriate action is taken immediately, including any necessary subsequent outpatient follow-up.
- If the screening identifies an urgent need, clinical services are provided and the initial evaluation completed within one business day of the time the request is made.
- If the screening identifies routine needs, services will be provided and the initial evaluation completed within 10 business days.

Crisis Management Services

- For those presenting with emergency or urgent needs, the initial evaluation may be conducted telephonically or by telehealth/telemedicine but an in-person evaluation is preferred.
- If the initial evaluation is conducted telephonically, once the emergency is resolved the consumer must be seen in person at the next subsequent encounter and the initial evaluation reviewed.

Crisis Management Services

- All new consumers will receive a more comprehensive person-centered and family-centered diagnostic and treatment planning evaluation to be completed within 60 calendar days of the first request for services.
- This requirement that the comprehensive evaluation be completed within 60 calendar days does not preclude either the initiation or completion of the comprehensive evaluation or the provision of treatment during the 60 day period.

Case Management

- Coordination of care related to psychosocial supports. (Medicaid Training being planned)

Assessment

- The comprehensive person-centered and family-centered diagnostic and treatment planning evaluation is updated by the treatment team, in agreement with and endorsed by the consumer and in consultation with the primary care provider (if any), when changes in the consumer's status, responses to treatment, or goal achievement have occurred.

Assessment

- The assessment must be updated no less frequently than every 90 calendar days unless the state has established a standard that meets the expectation of quality care and that renders this time frame unworkable, or state, federal, or applicable accreditation standards are more stringent.

Assessment

- The initial evaluation (including information gathered as part of the preliminary screening and risk assessment), as required in program requirement 2, includes, at a minimum:
 - (1) preliminary diagnoses;
 - (2) the source of referral;
 - (3) the reason for seeking care, as stated by the consumer or other individuals who are significantly involved;
 - (4) identification of the consumer's immediate clinical care needs related to the diagnosis for mental and substance use disorders;

Assessment

- The initial evaluation (including information gathered as part of the preliminary screening and risk assessment), as required in program requirement 2, includes, at a minimum:
 - (5) a list of current prescriptions and over-the-counter medications, as well as other substances the consumer may be taking;
 - (6) an assessment of whether the consumer is a risk to self or to others, including suicide risk factors;
 - (7) an assessment of whether the consumer has other concerns for their safety;
 - (8) assessment of need for medical care (with referral and follow-up as required); and
 - (9) a determination of whether the person presently is or ever has been a member of the U.S. Armed Services.

Assessment

- Factors that should be considered related to the assessment include:
 - (1) reasons for seeking services at the CCBHC, including information regarding onset of symptoms, severity of symptoms, and circumstances leading to the consumer's presentation to the CCBHC;
 - (2) a psychosocial evaluation including housing, vocational and educational status, family/caregiver and social support, legal issues, and insurance status; behavioral health history (including trauma history and previous therapeutic interventions and hospitalizations);
 - (3) diagnostic assessment, including current mental status, mental health (including depression screening) and substance use disorders (including tobacco, alcohol, and other drugs);

Assessment

- Factors that should be considered related to the assessment include:
 - (4) assessment of imminent risk (including suicide risk, danger to self or others, urgent or critical medical conditions, other immediate risks including threats from another person);
 - (5) basic competency/cognitive impairment screening (including the consumer's ability to understand and participate in their own care);
 - (6) drug profile including the consumer's prescriptions, over-the-counter medications, herbal remedies, and other treatments or substances that could affect drug therapy, as well as information on drug allergies;

Assessment

- Factors that should be considered related to the assessment include:
 - (7) description of attitudes and behaviors, including cultural and environmental factors, that may affect the consumer's treatment plan;
 - (8) the consumer's strengths, goals, and other factors to be considered in recovery planning;
 - (9) pregnancy and parenting status;

Assessment

- Factors that should be considered related to the assessment include:
 - (10) assessment of need for other services required by the statute (i.e., peer and family/caregiver support services, targeted case management, psychiatric rehabilitation services, LEP or linguistic services);
 - (11) assessment of the social service needs of the consumer, with necessary referrals made to social services and, for pediatric consumers, to child welfare agencies as appropriate; and

Assessment

Monitoring of Key Health Indicators

- Factors that should be considered related to the assessment include:
 - (12) depending on whether the CCBHC directly provides primary care screening and monitoring of key health indicators and health risk pursuant to criteria 4.G, either:
 - (a) an assessment of need for a physical exam or further evaluation by appropriate health care professionals, including the consumer's primary care provider (with appropriate referral and follow-up), or
 - (b) a basic physical assessment as required by criteria.
- All remaining necessary releases of information are obtained by this point.

Standardized Biopsychosocial Assessment Tools

- ASI – Addiction Severity Index
- The intensity of needs determination measures include the:
 - *Child and Adolescent Service Intensity Instrument (CASII),*
 - *Level of Care Utilization System (LOCUS) and*
 - *the American Society of Addiction Medicine Criteria 3rd Edition*

Standardized Biopsychosocial Assessment Tools

- Functional impairment measurement using the *World Health Organization Disability Assessment Scale Version 2 (WHODAS 2.0)* will provide the client's treatment team with valuable information they can use to determine eligibility for additional supports, such as Long-term Services and Supports (LTSS) and address the degree to which an individual's level of impairment may impact treatment and recovery outcomes.

Standardized Biopsychosocial Assessment Tools

- The *Child and Adolescent Needs and Strengths (CANS)* is comprehensive measurement of the child's and caregiver's needs and strengths which will inform treatment planning.
- The CANS may also be used as outcome measure to monitor progress as a family and help the child develop additional strengths.

Standardized Biopsychosocial Assessment Tools

- The *Children's Uniform Mental Health Assessment (CUMHA)* is a comprehensive bio-psycho-social assessment resulting in determination of any Diagnostic Criteria: 0-3 or DSM-5 diagnostic criteria met.

Standardized Biopsychosocial Assessment Tools

- DSM 5 Diagnosis (Differential Diagnosis)
- Recommended Level(s) of Care including EBP implemented with Fidelity

Integrated Treatment Plan

- Substance Use Related Goals, Action Steps, Interventions
- Mental Health Diagnosis Related Goals, Action Steps, Interventions
- Medical Related Diagnosis Related Goals, Action Steps, Interventions
- Case Management Related Goals, Action Steps, Interventions

ASAM Continued Service Criteria

- Measure Stage of Change (Dim 4)
- Severity Rating 0-4 for each dimension and over all low, medium, high collectively
- Client is making progress toward treatment plan goals, but has not accomplished goals for the current level of care.
- Client is actively working toward goals.
- Capacity to continue in current levels of care.
- New problems have been identified that are appropriately treated at the present level of care.

Case / Progress Notes

- Client Condition
- Continued Service Criteria
- Progress toward treatment plan goals

ASAM Transfer / Discharge Criteria

- Client has achieved the goals articulated in his or her individualized treatment.
- Client has been unable to resolve the problem(s) despite amendments to the treatment plan.
- Client has demonstrated a lack of capacity to resolve his or her problem(s).
- Client has experienced and intensification of his or her problem(s) or has developed new problems(s).

Integrated Continued Care Plan

- Substance Use related plan
- Mental Health related plan
- Medical Status related plan
- Case Management related plan

Training Plan

- **Supervision Oversight**
 - TAP 21
 - TAP 21-A
 - TIP 52

Service Areas

- There are nine required services that must be offered.
- The CCBHC must itself provide the first 4 services, whereas the CCBHC may provide the last 5 either itself, or through a Designated Coordinating Organization (DCO).
- The State may also specify additional state specific services.
 - 1) Crisis mental health services including 24-hour mobile crisis teams, emergency crisis intervention and crisis stabilization
 - 2) Screening, assessment and diagnosis including risk management
 - 3) Patient-centered treatment planning

Service Areas

- 4) Outpatient mental health and substance use services
- 5) Outpatient clinic primary care screening and monitoring of health indicators and health risk
- 6) Targeted case-management
- 7) Psychiatric rehabilitation services
- 8) Peer support, counseling services, and family support services
- 9) Intensive community-based mental health care for members of the armed forces and veterans, particularly in rural areas; care consistent with minimum clinical mental health VA guidelines

Questions?

Thank you for participating!