

<p style="text-align: center;">York/Adams Drug and Alcohol Commission Treatment Policy and Procedure Manual</p>	<p><i>Number: C-13</i></p> <p><i>Policy: Assessment and Placement Determination</i></p>
<p><i>Most Current Revision : 6/1/20</i> <i>Effective Date: 7/1/20</i></p>	<p style="text-align: right;"><i>Page: 1 of 3</i></p>

I. Purpose:

To set forth parameters and protocol for individuals receiving a Drug and Alcohol assessment.

II. Policy:

A Level of Care Assessment (LOCA) is a face to face interview to ascertain the treatment and treatment-related needs of an individual based on the degree and severity of substance use and the treatment and treatment-related needs of the individual based on the six dimensions of the ASAM Criteria, 2013.

- A. Individuals shall be referred to the appropriate level of care as indicated through the completion of a LOCA tool, ASAM Summary and Risk Rating.
- B. Assessors must assess individuals and address identified individualized treatment and treatment-related needs.
- C. Assessors must maintain neutrality when referring individuals into a level of care, facility, or provider.
- D. Assessors must utilize a tool that includes required components identified by DDAP.
- E. In order to determine the appropriate level of care, the individual conducting the LOCA must apply the ASAM Criteria, 2013 to complete the ASAM Summary and Risk Rating. The ASAM Summary is a multidimensional assessment of the strengths and needs of the individual and the Risk Rating addresses an individual's severity and level of function.
- F. The ASAM Summary and Risk Rating must be completed in PA WITS to record and exchange information necessary in making or validating placement determinations. The information documented on the ASAM Summary and Risk Rating must comply with state and federal confidentiality regulations.
 - The ASAM Summary and Risk Rating must reflect a multi-dimensional approach to determining the appropriate level of care an individual needs regardless of whether funding is available for a specific level.
 - The ASAM Summary should not be solely based on the level of care requested by the individual or referral source.
 - If the level of care received is different than the level recommended, the ASAM Summary as well as the case notes must document attempts to engage the individual into clinically appropriate services.

A LOCA must be completed in WITS within (7) calendar days from the date of initial contact with the individual. The LOCA must be completed in its entirety in one session prior to referring the individual to the appropriate

level of care.

- When an individual requires withdrawal management the LOCA does not need to be done prior to admission into withdrawal management but must occur before the individual is referred to the next level of care.
- Individuals in need of withdrawal management must be admitted to treatment within 24 hours. If this time frame cannot be met, the case manager must document the reason in the individual's file.
- If either the 7 day timeframe or the completion of the assessment in one session cannot be met, the reason must be documented in the individual's record.
- Priority Populations must be admitted to the appropriate level of care immediately.
- All other individuals must be referred and admitted to the appropriate level of care available within 14 days of the LOCA. If this time frame cannot be met, the case manager must document the reason in the individual's file.

SCA funded individuals must also be screened for Communicable Diseases at the time of the LOCA

- Tuberculosis (TB): Providers must administer and document the TB screen by utilizing Miscellaneous Notes
- Hepatitis C: Providers must follow current Department of Health guidelines for ensuring that appropriate individuals are tested for Hepatitis C. Those identified as high risk must be referred to the county or nearby public health clinic for testing and treatment and the individual's acceptance or rejection of the referral must be documented in the WITS encounter notes for that LOCA episode. At a minimum, the Department of Health indicates that individuals who should be tested include:
 - (a) A person who was born between the years of 1945 and 1965;
 - (b) Persons who inject drugs;
 - (c) Persons who have previously injected drugs;
 - (d) Persons who received a clotting factor produced before 1987;
 - (e) Persons who have been on hemodialysis;
 - (f) Persons who have HIV; and
 - (g) Persons who have previously received a blood transfusion or organ transplant.
- HIV: Providers must determine whether the individual is at high risk for HIV. Persons who inject drugs are at high risk for HIV. Risk factors for contracting HIV include engaging in unprotected sexual activities and sharing needles. Individuals identified as high risk must be referred to the County's DOH or a DOH partner agency for testing and treatment. The individual's acceptance or rejection of the referral must be documented in the WITS encounter notes for that LOCA episode.

Once a LOCA is completed, it will be valid for a period of six months. This applies to individuals who have never engaged in treatment after being assessed or who have been discharged and are seeking to reinitiate services.

- The six-month timeframe does not pertain to individuals actively engaged in treatment. An exception to this timeline may be made for individuals who were incarcerated during this six-month time period. Specifically, time prior to being in the controlled environment may be considered when determining the LOC.

- If an individual requests to reinstate services prior to the end of the six-month period, the assessor may complete a follow-up assessment in lieu of a new one; however, a new ASAM Summary and Risk Rating must be completed.

An individual shall be admitted to treatment at the first attended appointment with a provider after the LOCA has been completed. A treatment episode is a combined service provided to an individual during a period of treatment and begins with the admission to treatment. The substance abuse treatment episode should be assumed to have ended if the individual has not received a treatment service in three days in the case of inpatient or residential treatment or 30 days in the case of outpatient treatment.

Approved By:

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YADAC Administrator

6/1/20

Date