

California's Best System Practices for Substance Use Conditions

Performance Measures

Screening and Brief Intervention for Substance Use Conditions

Screening

Clients in general healthcare settings and students in secondary schools and colleges should be screened annually for at-risk drinking, alcohol use problems and dependency, illicit drug use, and any tobacco use.

Performance Measures:

- % of patients admitted to emergency departments and trauma units that are screened and/or receive a brief intervention and/or are referred to appropriate care.
- % of college students that are screened each year and/or receive a brief intervention and/or are referred to appropriate care.
- % of patients who, during their general healthcare visits, are screened by healthcare professionals and/or receive a brief intervention and/or are referred to appropriate care.

Brief Intervention

All persons identified by screening to have problems related to alcohol or other substance use including tobacco, should receive a brief motivational counseling intervention by a health educator trained in this technique.

Performance Measures:

- % of at-risk persons that receive a brief intervention and/or are referred to appropriate care.
- % of persons screened who are current smokers, for whom smoking cessation medications were recommended or discussed.
- % of persons screened who are current smokers, for whom smoking cessation methods or strategies were recommended or discussed.

Initiation and Engagement in Treatment

Assessment

Clients seeking services for a substance use problem or dependency should receive a validated multidimensional, biopsychosocial assessment to guide client-centered treatment planning for substance use treatment and any co-occurring conditions.

Performance Measures:

- % of clients that receive a placement assessment within 30 days of first contact.
- % of clients that receive a second assessment within 60 days of care that includes substance use, health conditions, employment, social supports, living environment, and criminal justice involvement .
- % of clients in care over 120 days that receive a third assessment.
- % of clients who received a short, extended care assessment at 3 mos, 6 mos, and yearly thereafter.

Engagement in Treatment

Counties and providers should systematically promote initiation of care and engagement in ongoing treatment for substance use problems. Persons with substance use problems or dependency should receive supportive services to facilitate their initiation, engagement, and participation in ongoing treatment.

Performance Measures:

- Initiation: % of clients with an outpatient index service who received a second service within 14 days of the outpatient index service.
- Engagement: % of clients who initiated outpatient treatment and received two additional services within 30 days of initiating treatment.
- Retention: % of clients still receiving services after 90, 120, and/or 240 days.

Withdrawal Management

Based on a systematic assessment of the symptoms and risk of serious adverse consequences related to the withdrawal process, support (including pharmacotherapy where indicated) should be provided to manage the symptoms and adverse consequences of withdrawal. Withdrawal management alone does not constitute treatment for dependence and should be linked with ongoing treatment for substance use.

Performance Measure:

- % of clients receiving withdrawal management services who are actively referred to treatment services.

Services and Supports Planning

Service providers should collaborate with clients and their identified support system to develop a multidimensional treatment and support plan that is client-centered, and is periodically re-evaluated to support engagement, progress and retention in treatment.

Performance Measures:

- % of clients with an initial service plan within 30 d of first service.
- % of clients with a revised service plan within 60 d of first service.
- % of clients who have initiated their continuing care plan within 90 d of first service.

Care Management / Services Coordination

Clients should receive coordinated management of their care for substance use problems and any co-occurring conditions, and this care management should be adapted based on ongoing monitoring of their progress.

Performance Measures:

- % of clients with child care arrangements, living in a sober environment, and receiving appropriate mental healthcare.
- % of clients who were administered the 21-item Modular Survey on Consumer Perception of Care, or other satisfaction survey.

Therapeutic Interventions to Treat Substance Use Conditions

Psychosocial Interventions

Empirically validated psychosocial treatment interventions should be initiated for all persons with substance use problems or dependency.

Performance Measures:

- % of intervention strategies that are evidence-based practices.
- % of intervention strategies that are best practices.
- % of clients who receive at least one biweekly session geared toward specific needs.
- % of counselors who receive ongoing clinical supervision.

Adjunct Pharmacotherapy for Opioid Dependence

All clients diagnosed with opioid dependence should be provided with information on the efficacy of pharmacotherapeutic interventions (e.g. methadone and suboxone) and supported in making an informed choice best suited to their needs. Pharmacotherapy, if prescribed, should be provided in addition to and directly linked with psychosocial treatment and support.

Performance Measures:

- % of clients aged 18 or older with a diagnosis of current opioid dependence who were counseled regarding psychosocial AND pharmacologic treatment options for opioid dependence.
- % of clients aged 18 or older with a diagnosis of current opioid dependence who received psychosocial AND pharmacologic treatment for opioid dependence.

Adjunct Pharmacotherapy for Alcohol Dependence

All clients diagnosed with alcohol dependence should be provided with information on the efficacy of pharmacotherapeutic interventions (e.g. naltrexone and acamprosate) and supported in making an informed choice best suited to their needs. Pharmacotherapy, if prescribed, should be provided in addition to and directly linked with psychosocial treatment and support.

Performance Measures:

- % of clients aged 18 or older with a diagnosis of current alcohol dependence who were counseled regarding psychosocial AND pharmacologic treatment options for alcohol dependence.
- % of clients aged 18 or older with a diagnosis of current alcohol dependence who received psychosocial AND pharmacologic treatment for alcohol dependence.

OUTCOME MEASURES:

- % of clients abstinent or with reduced use.
- % of clients employed or volunteering in useful work, or who are presently attending job training or educational courses.
- % of clients with reduced past 30 day arrests.