Substance Abuse Services

Service Name	THERAPEUTIC COMMUNITY (DUAL DIAGNOSIS CAPABLE) – LEVEL III.3: ADULT SA
Funding Source	Medicaid Behavioral Health Services
Setting	Facility based
Facility License	Substance Abuse Treatment Center
Basic Definition	Therapeutic Community is intended for adults with a primary Axis I diagnosis of substance dependence for whom shorter term treatment is inappropriate, either because of the pervasiveness of the impact of dependence on the individual's life or because of a history of repeated short-term or less restrictive treatment failures. This service provides psychosocial skill building through a set of longer term, highly structured peer oriented treatment activities which define progress toward individual change and rehabilitation and which incorporate a series of defined phases. The individual's progress must be marked by advancement through these phases to less restrictiveness and more personal responsibility.
Service Expectations	• A strengths based substance abuse assessment and mental health screening conducted by appropriately credentialed professionals at admission with ongoing assessment as needed • Individualized treatment/recovery plan, including discharge and relapse prevention, developed under clinical supervision with the individual (consider community, family and other supports) within 7 days of admission • Review and update of the treatment/recovery plan under clinical supervision with the individual and other approved family/supports every 30 days or more often as needed • A minimum of 30 hours of treatment and recovery focused services weekly including individual, family, and group psychotherapy, educational groups, motivational enhancement and engagement strategies • Program is characterized by peer oriented activities and defined progress through defined phases • Monitoring to promote successful reintegration into regular, productive daily activity such as work, school or family living • Other services could include 24 hours crisis management, family education, self-help group and support group orientation • Monitoring stabilized co-occurring mental health problems • Consultation and/or referral for general medical, psychiatric, and psychopharmacology needs
Length of Services	Length of service is individualized and based on clinical criteria for admission and continuing stay, but individuals typically require this service for up to one year for maximum effectiveness
Staffing	Clinical Director (APRN, RN, LMHP, LIMHP, LADC or Licensed Psychologist) to provide clinical supervision, consultation and support to all program staff and the clients they serve. This individual will also continually incorporate new clinical information and best practices into the program to assure program effectiveness and viability, and assure quality organization and management of clinical records, and other program documentation.

Service Name	THERAPEUTIC COMMUNITY (DUAL DIAGNOSIS CAPABLE) – LEVEL III.3: ADULT SA
	• Appropriately licensed and credentialed professionals working within their scope of practice to provide substance abuse and/or dual (MH/SA) treatment and are knowledgeable about the biological and psychosocial dimensions of abuse/dependence. LADC's and PLADC's are included and Behavioral Health Services funded programs must have a minimum of 50% licensed alcohol and drug counselors. For Medicaid: Provisionally licensed clinicians as approved by the ASO • DBH: Direct Care Staff, holding a bachelor's degree or higher in psychology, sociology or a related human service field are preferred but two years of coursework in a human services field and/or two years experience/training or two years of lived recovery experience with demonstrated skills and competencies in treatment with individuals with a behavioral health diagnoses is acceptable. • Medicaid and Long-Term Care: Direct Care Staff, holding a bachelor's degree or higher in psychology, sociology or a related human service field are preferred but two years of coursework in a human services field and two years experience/training or two years of lived recovery experience with demonstrated skills and competencies in treatment with individuals with a behavioral health diagnoses is acceptable. • All staff should be educated/trained in rehabilitation and recovery principles.
Staffing Ratio	• Clinical Director to direct care staff ratio as needed to meet all responsibilities • 1 awake staff for each 10 individuals during client sleep hours (overnight) with on-call availability for emergencies, 2 awake staff overnight for 11 or more individuals served • 1:10 Therapist to individual • On-call availability of direct care staff and licensed clinicians 24/7
Hours of Operation	24/7
Desired Individual Outcome	• The individual has substantially met their treatment plan goals and objectives • The precipitating condition and relapse potential is stabilized such that individual's condition can be managed without professional external supports and interventions • Individual has alternative support systems secured to help the individual maintain stability in the community
Rate	BHS: See Behavioral Services rate schedule; NMMCP: See Medicaid rate schedule 1 unit = 1 day