

# **SOUTHERN HIGHLANDS COMMUNITY MENTAL HEALTH CENTER**

## **POLICY AND PROCEDURE MANUAL**

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**Section Number 104**

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### **Policy 104 – Substance Use Disorder Residential Treatment Services Admission Policy**

#### **I. POLICY**

It is the policy of Southern Highlands Community Mental Health Center that admissions to substance use disorder residential treatment services are completed in a timely and efficient manner to meet consumer needs in the least restrictive environment.

#### **II. DISCUSSION**

All Substance Use Disorder Residential Treatment services are voluntary programs designed to offer residential treatment and after care treatment for addiction to adult males and females. These facilities are not locked facilities. All Substance Use Disorder Residential Treatment Services will take consumers who are court ordered, however, a court ordered consumer will still be treated on a voluntary basis and may leave or be discharged at any time. If a consumer that is court ordered leaves or is discharged prior to scheduled discharge date, the proper authorities will be notified. This policy applies to routine admission of consumers to inpatient substance use disorder treatment and does not apply to emergency services. Emergency service provisions are described under the emergency services policy.

Substance Use Disorder Residential Treatment staff are committed to providing substance use disorder treatment to the best of our ability and available resources. We are committed to our residents and their future welfare. In order for recovery to occur, all participants must feel cared for, safe, and respected. It is the goal of the Substance Use Disorder Residential Treatment Program to create and maintain such an atmosphere for our consumers as well as our staff.

#### **III. PROCEDURES**

- A. The Substance Use Disorder Residential Treatment Program accepts referrals from adults at least 18 years of age or older for the treatment of the illness of addiction. The Substance Use Disorder Residential Treatment Program does not have the ability to detox individuals. Appropriate candidates must have already been detoxed prior to their acceptance to the program.
- B. Substance Use Disorder Residential Treatment residents are voluntary participants in the addiction program. They should have the ability to read, write, and comprehend on at least an eighth (8<sup>th</sup>) grade level in order to receive full benefit from the treatment regimen.

- C. Substance Use Disorder Residential Treatment does not have the ability to staff one-on-one staffing; therefore, all appropriate candidates should be medically and/or psychiatrically stable. They should not have a history of/or recent exhibition of violent behavior or violent felony offenses. Applicants cannot have a history of sexual offenses. Staff will check the sex offender registry to verify the applicant does not have a history. If a sexual offense is discovered after a consumer is admitted in the program, the consumer will be immediately discharged.
- D. Pregnancy test will be administered to all female residents at the time of admission. Pregnant women are required to have a letter from their treating physician that they are medically stable for substance use disorder treatment. SUD residential program will not admit pregnant females past 30 weeks of pregnancy.
- E. All medications will be administered and monitored by Southern Highlands LPN's and/or RN's. Nurses will not administer, provide, or stock any controlled medications during the residents stay. Suboxone will be self-administered under supervision by LPN with a written prescription. Suboxone will be triple locked in the nursing office. No over the counter medications, creams, vitamins or supplements will be permitted. Any medications, including over the counter medications, creams, vitamins or supplements, that are brought in without a prescription will not be provided to the resident. Controlled substances, opiate antagonists, muscle relaxers, or stimulants are not permitted. Medications that are highly abused will not be permitted unless approved by the Medical Director/Chief Nursing Officer and the admissions committee. If a resident is on any unapproved medications at the time of admission/intake he/she will be denied admission and placed back on waitlist until alternative medications can be prescribed. All medications must be prescribed and presented with the referral. The LPN will observe the taking of all medications including mouth checks to ensure that medications are taken as prescribed. Any medication cost is the resident's responsibility. Southern Highlands Policy 148 Substance Use Disorder Residential Treatment Medication Administration will be followed.
- F. Applicants must meet ASAM criteria levels of admission, continued stay, and discharge. Discharge may occur anytime criteria is satisfied or no longer met. Applicants must also be willing to receive follow up treatment upon discharge from the residential program. Discharge can occur also at the discretion of the Director of Substance Use Disorder Services or designee. The Director may discharge a consumer based on not following program rules/guidelines and/or violation of handbook policies.
- G. Referrals are made via telephone, fax, correspondence, and/or by completing the Substance Use Disorder Residential Treatment Client Referral Sheet Form SH-713.
- H. Upon referral by self, family, other individual, or service provider, a referral form is completed. This form will be reviewed for appropriateness due to treatment regimen. The form will include status of admission – if consumer is accepted for admission, if put on waiting list, or if denied with the reason for denial. If there are no available beds existing, the referral will be placed on the waiting list by date and

time of receipt. All applicants will receive notification of their status. To ensure that the applicant remains interested in the program, the applicant or their representative must remain in contact with the SUD Program weekly either via mail, phone, email, etc. Removal from waitlist by only means of refusal of treatment or request of removal.

- I. All admissions to the Substance Use Disorder Residential Treatment Program will be determined by the Admissions Committee consisting of the Program Director and daytime clinical and support staff to include: Case Manager, Therapist, and Registered Nurse. The Committee will meet at least one time a week or as needed to discuss admissions, continuing stay, and discharges. Preference will be given to pregnant women, IV drug users, and then to all others.
- J. The available candidates will be contacted and provided with a twenty-four (24) hour window of time to contact the Program Director or Home Manager to confirm their continued interest in admission to our facility. If the prospective residents do not arrive or contact the Program Director or Home Manager within that twenty-four (24) hour time period, an interpretation will be made that they are no longer interested in treatment at SUD residential program, replacement individuals will be chosen off of the waiting list and will be contacted.
- K. Residents who are court ordered must abide by the same rules as all other residents of the SUD residential program.
- L. SUD residential program are not locked facilities. This should be kept in mind when referring Court Ordered candidates. Incarcerated applicants must complete their sentence prior to admission to SUD residential program.
- M. Upon admission, residents will receive a needs assessment including the following: treatment planning with a discharge plan/aftercare plan, nursing assessment, orientation to program including, but not limited to, program description, program rules, sanctions, incentives, restrictions, program handbook, etc. Residents are not permitted to have any electrical devices such as cell phones, cameras, computers, IPODs, IPADs, etc., unless approved by Program Director per handbook.
- N. Once a resident completes the residential program the resident must be willing to receive follow up/aftercare treatment as agreed upon by their treatment team during their initial treatment plan. This may include, but not limited to, other residential treatment facilities, IS care, outpatient referrals, 12 step meetings, etc. The Program Case Manager(s) or representative will remain in contact with the resident or their representative up to 6 months upon completion of the program to prevent or reduce possible relapse.