

Ryan White Part A Quality Management

Chemical Dependency/Substance Abuse
Residential
Service Delivery Model

Palm Beach County

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Palm Beach County Care Council
Quality Management Committee &
Medical and Support Services Committee

Ryan White Part A Quality Management

Chemical Dependency/Substance Abuse Residential

Service Delivery Model

Statement of Intent

All Ryan White Part A funded practitioners are required by contract to adhere, at a minimum, to the Public Health Service (HHS) Guidelines.

Service Definition

Provision of treatment to address substance abuse problems (i.e., alcohol and/or legal and illegal drugs) in a residential health services setting (short-term).

Provides room and board with substance abuse treatment and counseling, (including specific HIV counseling) in a secure, drug-free state-licensed residential (non-hospital) substance abuse detoxification and treatment facility. This treatment shall be short term. Anyone providing direct counseling services must be under the supervision of staff possessing a postgraduate degree in the appropriate counseling-related field, or a Certified Addiction Professional (CAP). Part A funds may not be used for hospital inpatient detoxification.

Practitioner Definition

Chemical Dependency and Substance Abuse Practitioners have appropriate license, certification, and/or authorization to perform services in the State of Florida.

Practitioner Continuing Education Recommendation

Practitioners must complete at least 2 (two) hours of HIV-related continuing education and 1 (one) cultural sensitivity training per year.

Standards of Care

Initial Treatment Plan

Standard	Indicator	Data Source
<p>1. Completed intake for every referred patient in a timely manner.</p>	<p>1.1 100% of clients receiving assessment have documentation of completed referral form.</p> <p>1.2 80% of clients have initial screening within 10 business days of referral.</p> <p>1.3 100% of clients that present with imminent risk to self or others (i.e. active suicidal plans/intentions, recent attempt, or psychotic symptoms influencing patient behaviors, presence of violence/impulsivity, inability to take appropriate care of self) have immediate referral, or within 24-48 hours, depending on the practitioner's evaluation of the risk.</p> <p>1.4 100% of assessments include:</p> <ul style="list-style-type: none"> • Behavioral health • Risk Data 	<p>1.1.1 Documentation in client chart 1.2.1 Documentation in client chart 1.3.1 Documentation in client chart 1.4.1 Documentation in client chart</p>
<p>2. Completed Rights and Responsibilities Agreement.</p>	<p>2.1 100% of clients sign agreement outlining rights and responsibilities, which should include the following:</p> <ul style="list-style-type: none"> • Confidentiality • Policy on active participation • Dismissal policies • Adherence to treatment plan and other agency policies, as appropriate 	<p>2.1.1 Documentation in client chart</p>

Progress in Treatment Plan

<p>3. Practitioners ensure ongoing progress with Treatment Plan</p>	<p>3.1 100% of client Records document progress towards meeting goals or variance explained.</p> <p>3.2 50% of desired outcomes should be achieved in accordance with treatment plan.</p> <p>3.3 100% of clients have a review of treatment plan, progress in treatment, and substance use every three months and/or at discharge.</p> <p>3.4 100% of discharged patients have an aftercare plan documented in record including the following information:</p> <ul style="list-style-type: none"> • Client objectives and interventions • Provision for referrals • Release of information • Ongoing services available • Self-help group affiliations • Relapse prevention education resources <p>3.5 100% of progress reports shared with case management agency/Other Treatment Providers for clients who have provided consent.</p>	<p>3.1.1 Documentation in client chart</p> <p>3.2.1 Documentation in client chart</p> <p>3.3.1 Documentation in client chart</p> <p>3.4.1 Documentation in client chart</p> <p>3.5.1 Documentation in client chart</p>
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*Standards of Care are guidelines or flexible directions to be used in the treatment of HIV/AIDS. Departures from these standards may arise due to a client’s unique situation and/or based on an experienced professional’s judgment.