

Service Name	ADULT SUBSTANCE USE DISORDER DAY TREATMENT ADULT ASAM LEVEL 2.5
Setting	Outpatient hospital or community based.
Facility License	As required by DHHS Division of Public Health.
Basic Definition	Adult Substance Use Disorder (SUD) Day Treatment offers person-centered, culturally and linguistically appropriate, comprehensive, coordinated, and structured treatment services and activities. A day treatment program consists of a scheduled series of structured, face-to-face therapeutic sessions organized at various levels of intensity and frequency in order to assist the individuals served in achieving the goals identified in their individualized treatment/recovery plan. This level of care is designed to offer highly structured intensive treatment to those individuals whose condition is sufficiently stable so as not to require twenty-four-hour per day monitoring and care, but whose illness has progressed so as to require consistent near-daily treatment intervention. Day Treatment may also be referred to as Partial Hospitalization.
Service Expectations (Title 471 chapter 20)	<ul style="list-style-type: none"> • A SUD assessment and mental health screening conducted by a licensed clinician at admission with ongoing assessment as needed. If a prior SUD assessment is determined to be clinically relevant and includes a current diagnosis, level of care recommendation and a discharge plan it can serve as the admission assessment for treatment. All clients will be screened for co-occurring conditions during the assessment. If the clinician is a LADC or a PLADC and suspects a possible psychiatric condition, a referral is to be made to a clinician capable of diagnosing and treating co-occurring psychiatric and substance use disorders; • Individualized treatment/recovery plan, including discharge and relapse prevention, developed under clinical supervision with the client (consider community, family and other supports) within 14 days of admission; • Review and update of the treatment/recovery plan with the client and other family/supports every seven days or more often as medically indicated; • Day treatment programs are offered four or more days per week for at least three hours, typically with support available in the evenings and on weekends; • Provision for 20 hours of skilled treatment per week in a structured program; • Skilled treatment will include individual, family (as clinically indicated and with permission from the individual being served), group psychotherapy, psycho-educational groups, motivational enhancement engagement strategies, and peer support; • Emergency services available 24-hours a day, seven days a week when the program is not in session; • Monitoring co-occurring mental health problems to include providing for, or arranging for psychiatric services to meet the needs of the individual; • Monitoring to promote successful reintegration into regular, productive daily activity such as work, school or family living; • Consultation and/or referral for general medical, psychiatric, psychological, nutritional and laboratory needs; and • A referral system for needs identified but not available through the day treatment program.
Length of Service	The length of stay is at least two to six weeks, depending on the severity of the individual's substance use disorder.
Staffing	<ul style="list-style-type: none"> • The Clinical Director is an APRN, RN, Licensed Psychologist, LIMHP, LMHP or a LADC working with the program and responsible for all clinical decisions (admissions, assessment, treatment/discharge planning and review) and to provide consultation and support to care staff and the client; • Appropriately licensed and credentialed professionals working within their scope of practice to provide substance use disorder treatment; and

	<ul style="list-style-type: none"> • Non licensed 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 of experience/training or two years of lived recovery experience with demonstrated skills and competencies in treatment with individuals with a substance use disorder diagnoses is acceptable.
Desired Individual Outcome	<ul style="list-style-type: none"> • The client has substantially met the treatment plan goals and objectives; • The precipitating condition and relapse potential is stabilized such that the client’s condition can be managed without professional external supports and intervention; and • The client has alternative support systems secured to help them maintain stability in the community.
Admission guidelines	<ul style="list-style-type: none"> • Meet diagnostic criteria for a substance-related disorder of the DSM, current edition; • Be at low risk for withdrawal symptoms or have minimal remaining withdrawal symptoms; • Be physically stable but may have a medical condition that is severe enough to distract from recovery efforts or would be aggravated by continued use of alcohol or drugs or be psychologically stable enough not to require twenty-four-hour observation and care but may have a psychiatric condition that would be aggravated by continued use of alcohol or drugs; and • The client meets at least two of the following: <ul style="list-style-type: none"> ○ requires repeated, structured, clinically directed motivational enhancement strategies not available at a less-intensive level of care; ○ has made previous attempts at a treatment program of lower intensity with an inability to remain clean and sober; ○ has been an active participant at a less-intensive level of care but is experiencing an intensification of symptoms of the substance-related disorder; ○ the individual’s functioning is deteriorating despite modifications of the treatment plan or there is a high likelihood that the client will continue to use or relapse without close outpatient monitoring and structured therapeutic services; ○ has minimal support for sustaining recovery in his or her home, or customary environment; ○ has experienced significant impairment in life areas that require a high level of intervention intensity; and ○ has experienced significant life traumas or stresses that require addiction treatment to assure continuing recovery.
Continued stay guidelines	<p>It is appropriate to retain the client at the present level of care if the client is:</p> <ul style="list-style-type: none"> ○ making progress but has not yet achieved the goals articulated in the individualized treatment plan; ○ continuing treatment at this level of care is assessed as necessary to permit the client to continue to work toward his or her treatment goals; ○ not yet making progress, but has the capacity to resolve his or her problems; ○ actively working toward the goals in his or her treatment plan; ○ exhibiting new problems have been identified that are appropriately treated at this level of care; or ○ this level of care is the least intensive level of care at which the client’s new problems can be addressed effectively.