

Governing Body: MARION COUNTY COMMUNITY AND PROVIDER SERVICES (CAPS)	Function: INTEGRATED DELIVERY SYSTEM (IDS) HANDBOOK	
Subject: Co-Occurring Mental Health and Substance Use Disorders	Prepared By: CAPS	Original Date: 10/01/2007 Revised Date:

PURPOSE AND SIGNIFICANCE:

Since 1998, local and regional providers of the Mid-Valley Behavioral Care Network (MVBCN), Marion County Integrated Delivery System (IDS) and Marion/Polk Community Health Plan (MPCHP) have been working to improve access to services for Members with co-occurring mental health and substance use disorders. By consensus our provider systems endorse the belief that all persons with co-occurring conditions deserve ready and welcoming access to services that are appropriate to their needs. Collaboration and cooperation among providers is critical in making these services accessible, welcoming and effective.

Based on national, regional and local data, our Providers operate on the belief that co-occurring conditions are the rule, rather than the exception. Out of that understanding, a vision of hope and recovery for everyone has become a guiding principle.

During the past 9 years, our Providers have incorporated a number of quality improvement measures related to co-occurring disorders in their annual quality improvement plans. While there may be some provider specific differences in language, those initiatives have been focused on the following areas.

- 1) Identifying co-occurring disorders through standardized screening
- 2) Performing a comprehensive, integrated assessment to identify disorder-specific and integrated treatment needs
- 3) Assuring that clients have access to appropriate care in the setting best matched to their identified needs
- 4) Developing treatment plans and interventions that are appropriate to the members' stage-of-change and focused on reducing harm or negative consequences of both substance use and psychiatric symptoms
- 5) Providing Dual Diagnosis Capable services for Members with lower severity substance use disorders.
- 6) Striving towards Dual Diagnosis Enhanced Services for Members with high severity mental health issues and substance dependence. When this is not feasible, well-coordinated service between our Mental Health and Chemical Dependency providers or those components within a single agency are expected.

Based on the progress of our system to date, many or all of these measures will be incorporated into the routine utilization review tools utilized by Community and Provider Services (CAPS) The audit tool is attached herein.

PROCESS AND/OR PROCEDURE:

IDS Providers should have the following policies, protocols or practices in place for serving members with co-occurring disorders:

- Policies that guide standardized screening for co-occurring disorders.
- Policies that guide response, referral and collaboration on immediate needs to include crisis, detoxification or medical services and imminent safety needs.
- Policies that guide integrated assessment processes
- Admission and referral policies that convey a welcoming, empathic and hopeful treatment philosophy.
- Resources and guidelines for providing Dual Diagnosis Capable Services.
- Quality assurance measures that routinely monitor clinician progress on integrated and stage-of-change specific treatment planning.
- Policies that guide more routine referral and collaboration with partner agencies or components to include the following:
 - Responding to crisis and safety issues
 - Timelines for the exchange of assessment information
 - Developing and reviewing a collaborative treatment plan
 - Assuring regular contact with the partner agency
 - Timelines for contacting the partner agency when there are significant changes in the client's status or needs
 - A collaborative review of critical incidents per Marion County IDS Policy as developed in April, 2003
 - Utilization Review processes in each agency to assure that collaboration occurs
 - Protocols for resolving differences in clinical opinions, approaches and treatment goals
 - Protocols or clinical guidelines that actively support peer recovery supports and assist Members in exploring and accessing those options.
 - Readmission guidelines based on the recognition that co-occurring disorders are often characterized by periods of stability, growth and relapse. As such, these guidelines should be flexible and designed to accommodate episodic as well as continuous treatment.