

**LAPEER COUNTY COMMUNITY MENTAL HEALTH****Date Issued** 11/03/2015**Date Revised:** 08/21/19; 01/9/24; 04/16/24; 02/18/25; 10/01/25; 01/20/26

CHAPTER Service Delivery	CHAPTER 02	SECTION 004	SUBJECT 175
SECTION Clinical and Support Services	DESCRIPTION Substance Use Disorder Treatment		
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**APPLICATION:**

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

**POLICY:**

Lapeer County Community Mental Health (LCCMH) provides person-centered substance use disorder (SUD) treatment.

**STANDARDS:**

- A. LCCMH as a Certified Community Behavioral Health Clinic (CCBHC) ensures no individual is denied access to services because of place of residence, homelessness, or lack of permanent address.
- B. LCCMH provides services based on the Substance Abuse and Mental Health Services Administration's (SAMHSA) Guiding Principles of Recovery and Recovery-Oriented, Person-Centered Behavioral Treatment.
- C. LCCMH provides American Society of Addiction Medicine (ASAM) Level I Outpatient services.
  1. Persons served are assessed based on the diagnostic criteria for SUD defined in the current Diagnostic and Statistical Manual of Mental Disorders (DSM-V) and the ASAM assessment.

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- 2. ASAM Level I program services are offered in an appropriate setting, meeting state licensure criteria, Commission on Accreditation of Rehabilitation Facilities (CARF) standards, and CCBHC requirements.
- 3. ASAM Level I program staff are appropriately credentialed treatment professionals who assess and treat SUD. Staff are knowledgeable about the biopsychosocial dimensions of alcohol and other substance use disorders, including the assessment of the person's readiness to change.
- D. LCCMH follows Licensing and Regulatory Affairs' (LARA) outpatient staff-to-patient ratios.
- E. LCCMH ensures the confidentiality of all SUD records in accordance with Health Insurance Portability and Accountability Act (HIPAA) and 42 Code of Federal Regulations (CFR) Part 2.
- F. LCCMH aligns policies, procedures, and practices to:
  - 1. Ensure timely entry and reentry information services.
  - 2. Foster and protect individual choice, control, and self-determination.
  - 3. Assure the provision of holistic, culturally based and influenced, strength- and research-based, trauma-informed, and gender-responsive services.
  - 4. Be inclusive of the person-centered planning process, community-based services, supports, and enhanced collaborative partnerships.
- G. LCCMH encourages peer support and offers the choice to work with Certified Peer Support Specialists (CPSS) and/or Recovery Coaches for persons served throughout services.
- H. LCCMH aligns services and supports to promote integration of mental and physical healthcare.
- I. LCCMH assesses and continually improves recovery promotion, competencies, and the environment in organizations throughout the services offered.

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**PROCEDURES:**

A. Individuals requesting services follow the LCCMH intake process, see LCCMH Policy 02.003.30 Intake Procedures.

B. Individuals requesting SUD services are screened and referred within:

1. 24 business hours if a pregnant person and offered admission within 24 business hours.
2. 24 business hours if a person is at risk of losing children and offered admission within 14 days.
3. 14 days for Michigan Department of Corrections (MDOC) referrals.
4. 7 days and offered admission within 14 days for all others.

C. Entry/Re-entry Criteria:

1. Aged 18 years or older.
2. Initial assessment.
3. Diagnosis of substance-related disorder.
4. Agrees and is willing to participate in the program.

D. The assessment and the treatment plan review include:

1. Use of the electronic health record (EHR) is required to complete the ASAM assessment annually.
2. All other clinical assessments and required documentation are entered into LCCMH's EHR OASIS. See LCCMH Form #339a SUD Documentation Requirements.

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E. The individual plan of service (IPOS) is developed following the person centered planning process. See LCCMH Policy 02.001.15 Person Centered Planning.

F. LCCMH staff may provide referrals for the following:

1. Laboratory and toxicology services.
2. Medical and psychiatric consultations. These can be available within 24 hours by telephone or in person, based on the urgency of the request.

G. Emergency services are available by telephone 24 hours a day, 7 days a week.

H. Exit Criteria:

1. Person served is no longer willing to participate in the program.
2. There is clinical evidence person served no longer benefits from SUD services.
3. Person served has met all treatment goals.
4. Person served requires a less intensive or higher level of care to meet their treatment needs.
5. Person served has died.

I. Persons served are discharged from services when exit criteria are met. See LCCMH Policy 02.002.50 Discharge Summary.

#### **DEFINITIONS:**

**American Society of Addiction Medicine (ASAM) Criteria:** comprehensive set of standards for placement, continued service, and transfer of patients with addiction and co-occurring conditions.

**ASAM Level 1 Outpatient:** this level encompasses organized outpatient treatment services can be delivered in a wide variety of settings. Addiction, mental health treatment or general health care personnel, provide professionally directed screening, evaluation, treatment and ongoing recovery and disease management services. These services are less than nine hours a week. These services are catered to each patient's

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level of clinical severity and function and are designed to help the patient achieve changes in drug/alcohol use.

**Psychiatric Services:** (mild to moderate co-occurring) (ASAM Level I, II, III) psychiatric services may be provided to persons served as an adjunct to a treatment service. The individuals being served must meet diagnostic criteria according to the current Diagnostic and Statistical Manual for a mental illness and a substance use disorder. The provision of such services is provided under the supervision of a State of Michigan Licensed Physician. The physician is licensed to prescribe medications in Michigan. Coordination of Care with the individual healthcare providers is completed at admission.

**Confidentiality:** the confidentiality of identifying information of persons served is maintained in accordance with 42 Code of Federal Regulations (CFR) 2 (confidentiality of alcohol and drug abuse records).

**Recovery Coach/Peer Support Services:** support services are recognized as critical resources for persons served in recovery, their families, and community allies to effectively extend, enhance, and improve formal treatment services. Support services are designed to assist persons served in achieving personally identified goals for their recovery by selecting and focusing on specific services, resources, and supports. These services are available within most communities employing a peer-driven, strength-based, and wellness-oriented approach and are grounded in the culture(s) of recovery and utilizing existing community resources..

**Substance Use Disorder:** condition where someone continues to use drugs or alcohol despite substantial harm and adverse consequences to self and others.

**Gender-Responsive Services:** services designed to meet the needs of people of all genders by considering differences in their development, behavior, and social experiences.

## **REFERENCES:**

LCCMH Form #339a SUD Documentation Requirements

LCCMH Policy 02.001.15 Person Centered Planning

LCCMH Policy 02.002.50 Discharge Summary

LCCMH Policy 02.003.30 Intake Procedures

[SAMHSA's Guiding Principles of Recovery](#)

[SAMHSA's Recovery-Oriented, Person-Centered Behavioral Treatment](#)