Special Populations

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Reminders

• Questions should be submitted 7 days in advance of the call to RA-DAASAM@pa.gov. If you want to submit a question in the chat, DDAP will record the question and post responses to all questions received during this call to the DDAP ASAM website. Questions will not be addressed during the meeting.
• This call is being recorded. Please exit now if you do not want to be recorded. You will be able to review the video in its entirety on the DDAP webpage following this event.
• Suggestions for future call topics should be submitted to RA-DAASAM@pa.gov.
Disclaimers

Alignment with The ASAM Criteria is required of drug and alcohol treatment providers that receive funding for providing treatment services under agreements with Single County Authorities and/or Managed Care Organizations.

The information presented today provides an overview and summary of the concepts of special populations across all levels of care. DDAP stresses the importance of reviewing the ASAM Criteria text in its entirety, attending the ASAM two-day training, and reviewing the resources available through DDAP including trainings and documents.
Updates to DDAP ASAM Transition Website
Learning Objectives

By the end of this presentation, you will have an
- Increase in understanding of the special populations identified within the ASAM text
- Increase in knowledge of additional considerations related to special populations
SPECIAL POPULATIONS

- Older Adults
- Parents or Prospective Parents Receiving Addiction Treatment Concurrently with Their Children
- Persons in Safety-Sensitive Occupations
- Persons in Criminal Justice Settings
Older Adults
(ASAM pp. 307-317)
Older Adults

- Over the age of 60
- Rapidly growing population
- Modifications to Application
By 2060, nearly one in four Americans is projected to be an older adult.

<table>
<thead>
<tr>
<th>Millions of people 65 years and older</th>
<th>Percent of population</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>49.2</td>
</tr>
<tr>
<td>2020</td>
<td>56.1</td>
</tr>
<tr>
<td>2030</td>
<td>73.1</td>
</tr>
<tr>
<td>2040</td>
<td>80.8</td>
</tr>
<tr>
<td>2050</td>
<td>85.7</td>
</tr>
<tr>
<td>2060</td>
<td>94.7</td>
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</tbody>
</table>

U.S. Census Bureau, 2020
SETTING
Across Levels of Care

- Mobility limitations
- Reimbursement Considerations
  - Medicare/Part B Premiums
  - General Hospital Affiliation
  - Level 2 with housing option
SUPPORT SYSTEMS

- Intake and Assessment
  - Comprehensive older adult-focused H&P
  - Geriatrician
- Medications
- Social Isolation
- Spouse
- Discharge planning
- Recovery support groups
Staff

- General attitude
- Training in:
  - Physical
  - Psychological
  - Social
  - Spiritual
- Countertransference
Therapies

- Age-specific
- Individualized
- CBT
- Educational component
- Social support
- Family counseling
- Avoid Confrontation
Assessment/Treatment Plan Review

- Sensory limitations
- Depression and anxiety
- Shame and guilt
- Religious beliefs

Documentation

- Consistent with level of care
Diagnostic Criteria

- DSM-5 limitations
  - Review pp. 311-313 of ASAM text (2013)
  - Variables in Older adults could limit the severity of SUD
- ICD-10

Refer to page 313 of the ASAM (2013) text for problem severity and suggested interventions.
## Nuances across the 6 Dimensions

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Longer</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Chronicity</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Anxiety/Depression/Dementia</td>
<td></td>
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<tr>
<td>4</td>
<td>Age of onset</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Mood/Social Pressure</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Most Needs</td>
<td></td>
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</tbody>
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Refer to pages 314-316 of the ASAM (2013) text for Dimensional information.
Levels of Care

- Specific Older Adult Program
- Integrate
- Older Adult Elements
- Late Onset Addiction
- Early Onset Addiction
Continued Service/Transfer/Discharge

- Longer/Slower
- New problems
  - Dimensions 2 & 3
- Assess for transfer or different intensity
- Community resources
- Continued support
Parents or Prospective Parents Receiving Addiction Treatment Concurrently with Their Children

(ASAM pp. 318-339)
Including (5) Subpopulations
-SUBPOPULATIONS-

1) Parents with young children or pregnant women in specially designed residential substance related or co-occurring disorders treatment

2) Parents with young children or pregnant women in specially designed intensive outpatient or partial hospitalization services for substance related or co-occurring disorders treatment

3) Factors involved in serving the accompanying child

4) Unique needs of pregnant and postpartum women

5) Needs of a parent and child connected with the court for reunification
<table>
<thead>
<tr>
<th>Special Population</th>
<th>Parents with young children or pregnant women in specially designed services for substance related or co-occurring disorders treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Qualifier</strong></td>
<td>Residential (p. 319-324)</td>
</tr>
<tr>
<td></td>
<td>Intensive outpatient or Partial hospitalization (p. 325-330)</td>
</tr>
<tr>
<td><strong>Qualifier</strong></td>
<td>Population appropriate for Level 3 services &amp; imminent danger</td>
</tr>
<tr>
<td></td>
<td>Population appropriate for Level 2 services &amp; adverse affects</td>
</tr>
<tr>
<td><strong>Setting</strong></td>
<td>May need special licensure that is required when services are provided to parents when children are not in the same room</td>
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<td></td>
<td>Conducive to parent child routines, i.e., sleeping arrangements, food preparation, mealtimes, bathrooms and common rooms</td>
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<td></td>
<td>Single gendered groups may be appropriate given possible sexual abuse or domestic violence history</td>
</tr>
<tr>
<td><strong>Support Systems</strong></td>
<td>Bringing in supportive resources as soon as possible, continuation throughout treatment, and upon transfer or discharge</td>
</tr>
<tr>
<td></td>
<td>Concrete supports, i.e., emergency funds, food, clothing, etc.</td>
</tr>
<tr>
<td></td>
<td>Case management as needed, i.e., signing up for MA, work force services, vocational rehabilitation, etc.</td>
</tr>
<tr>
<td><strong>Staff</strong></td>
<td>Clinical staff trained in child development, positive parenting, trauma informed care, gender specific treatment, etc.</td>
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<tr>
<td></td>
<td>Staff trained or have skills in couples and/or family therapy; current life partners and non-custodial parents included when appropriate</td>
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<tr>
<td></td>
<td>Staff have training or skills around providing trauma informed parenting training</td>
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<tr>
<td></td>
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</tr>
<tr>
<td>Special Population</td>
<td>Parents with young children or pregnant women in specially designed services for substance related or co-occurring disorders treatment</td>
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<td>Residential (p. 319-324)</td>
</tr>
<tr>
<td></td>
<td>Intensive outpatient or Partial hospitalization (p. 325-330)</td>
</tr>
<tr>
<td>Therapies</td>
<td>Interventions aimed at increasing understanding of child development</td>
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<tr>
<td></td>
<td>Staff observe to coach and encourage non-critical, consistent disciplinary techniques that increase positive interactions between the parent and child</td>
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<td>Family Centered goals, counseling for parenting couple, extended family, and non-custodial parent when appropriate</td>
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<td></td>
<td>Focus on improving and implementing parenting skills, motivate the parent to provide nurturing care for the child or children</td>
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<tr>
<td></td>
<td>Focus on acquiring, improving and implementing parenting skills, needed to address the demands of recovery</td>
</tr>
<tr>
<td>Assessment &amp; Treatment Planning</td>
<td>Determine the extent to which the parent child relationship has been affected by SUD and/or co-occurring disorders</td>
</tr>
<tr>
<td></td>
<td>Stresses of parenthood related to recovery</td>
</tr>
<tr>
<td>Documentation</td>
<td>Separate clinical record maintained for the child or children</td>
</tr>
</tbody>
</table>
ASAM Monthly Technical Assistance Series

3-Factors involved in serving the accompanying child

- Focus on Managing lifelong risk for the child
- Provide concurrent treatment to both parent and child
- Improve Health and Well Being of Family System
Setting

- Residential or Level 2
- Child Safety
- Specialized for this population
- Other Environmental Factors
  - Age Diverse Environment
  - Empathy
Support Systems

- Increased focus on Child needs
- Pediatric care 24/7
- Infection Control
- Educational Needs
- Case Management
- Transportation
Staff

- Appropriately Credentialed
- Familiar with Developmental Needs of Infants and Children
Therapies - Child

- Developmental Perspective
- Positive Parent/Child Interactions
- Individualized
  - Age appropriate
  - Awareness of Developmental Issues
ASSESSMENT/TREATMENT PLAN REVIEW

➤ Utilize Age-Appropriate Tools
➤ Individualized for Both Parent and Child
DOCUMENTATION

- Individualized Records for Both Parent and Child
Dimensional Admission Criteria

- Dimension 1 - Not generally applicable but....
- Dimension 2 - Current & Historical Medical
- Dimension 3 - Possible Cognitive and Emotional Developmental Impact
- Dimension 4 - Risk and Protective Factor Assessment
- Dimension 5 - Related to Parent's Problem Potential
- Dimension 6 - Living Environment and Supports
4. Unique Needs of Pregnant and Postpartum Women

- Targeted Interventions Improve Outcomes
  - Improved outcomes
  - Prenatal visits

- Treatment engagement
  - Ability to parent
  - Drug-free
  - CPS
Setting

- Residential
- Level 2
- Ability to accommodate physical stresses
Support Systems

- Healthcare needs
- Access to MAT
- Neonatal Abstinence Syndrome
  - Delivery
Staff

- Training:
  - Accessing medical services
  - Various outcomes of pregnancy
  - Multi-dimensional approach to individualized care
  - De-escalation techniques

See ASAM (2013) text beginning on p. 335
Therapies

- Interdisciplinary
- Comprehensive
- Evidence-based
- Coordinated
- Individualized
Assessment/Treatment Plan Review

- Physical needs and wellbeing
  - Woman & fetus
Dimensional Admission Criteria

- Review the 6 dimensions in ASAM (2013) text

Continued Service/Discharge/Transfer

- Stressors
  - Services after delivery
- Continued support
5) Parent and Child Connected with the Court for Reunification (p. 339)

- Collaboration with Court System
- Timelines May Differ
- Staff Training
Safety Sensitive Occupations (ASAM pp. 340-349)
Police Officers
Healthcare Professionals
Airline Pilots
Attorneys
• Four Distinctive Qualities
  • 1. Responsibility to the Public
  • 2. Cohort-Specific Treatment
  • 3. Direct Access to Addicting Substances
  • 4. Difficulty Accepting the Role of 'Patient'
SETTING

Cohort Specific is Best- Departure from "Least Intensive LOC That is Effective"

Discontinue Work Until:

- Public Risks have Been Addressed and Managed
- Work Regulations, Licenses, and Legal Issues Are Addressed and Permit a Return to Work
- Work Cues Have Been Delineated and a Management Plan is Established
- Work Environment has Made Alterations to Support Sustained Recovery
- Supervisory Staff Have Training to Address Potential Issues
ASAM Monthly Technical Assistance Series

- SUPPORT SYSTEMS
- Professional Associations
- Occupation-specific Support Groups
- Geographic Considerations
STAFF

Profession-Specific Awareness

Training and Supervision

Trauma Recognition
ASAM Monthly Technical Assistance Series

➢ THERAPIES
➢ Profession-Specific Group Therapy
➢ Profession-Specific Support Groups
➢ Job and Career Issues
➢ Drug Safety & Drug Refusal Skills
➢ Medication Management
ASSESSMENT/TREATMENT PLAN

- Privacy or Public Safety?
- Increased Need for Cognitive Testing
- Implications Across the 6 Dimensions
DOCUMENTATION

SAFE/UNSAFE to work?
Employer and Licensing/Credentialing Boards

Limitations of 255.5 with Employers
Persons in Criminal Justice Settings (ASAM pp. 350-356)
Who are we talking about?
Individuals with a substance use disorder who are incarcerated or under community-based supervision.
Where can we find them? Jails, prisons, work release centers, and other settings within the community.
Factors Identified within the ASAM

- Assessment
- Mandated treatment
- Treatment
- Readiness to change...
Factors Identified within the ASAM

- Before incarceration
  - MAT: What to do?
- After incarceration
  - Employment
  - Naloxone
  - Medical records
Factors Identified within the ASAM

- Working together
- Educating
Key Takeaways

- Complexities
- Ways to impact
- Employment
- Naloxone
- Assessments
- Communication
Q&A
Question: The ASAM talks about providing services for parents and parents with children. The residential programs we are contracted with only permit pregnant individuals or women with children into their programs. Is there any consideration of what to do with men who are the primary caretakers of children but need residential treatment?
Announcements/Reminders

1. Next ASAM TA Call is on Monday April 4, 2022, from 10am-11am. Topic is TBD.
2. Questions or need TA? Email RA-DAASAM@pa.gov.
References


