

Workshop Session 2 - Monday, October 12, 2015, 2:30-3:45 PM

The ASAM Criteria and Its Application in the ADIS Journal

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Train for Change Inc.™

The ASAM Criteria & Its Application in ADIS Scott Covert VP of Early Intervention Services The Change Companies Train for Change Inc."

28.7 million

people reported driving under the influence of alcohol at least once in the prior year

SAMHSA 2014

1	🦅 9.9 million 🦠	5
	people reported driving 🕴	
D.	under the influence of	*
	illicit drugs during the	
	year prior	
A	National Survey on Drug Use and Health 2013	5

Welcome

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Statistic

- 21 million people age 12+ needed treatment in the past year, but didn't receive it
- 95.5% did not feel they needed treatment & did not seek it
- 3% felt they needed treatment
- 1.5% made the effort to seek help

SAMHSA National Survey on Drug Use & Health

How many ADIS
participants are at risk for
developing substancerelated or addictive
behavior problems?

For how many of these participants will ADIS be their only intervention?

Lost Opportunity

- > Education & compliance only
- SBI focus only on brief intervention & not referral to treatment
- Occupational hazard to reinforce compliance perception
- > Critical provider function

Criminal Justice Offence

RWC 46.61.502 Driving under the influence

(5) Except as provided in subsection (6) a violation is a gross misdemeanor

Agents of *Compliance* versus Agents of *Change*

"Both drinking-driving programs and out patient treatment facilities for the DUI/ DWI mandated client have in many cases become mirrors of the criminal justice system, especially the probation system."

David Mee-Lee, MD, 2009

Criminal Justice Three Cs

- ✓ Consequences Loss of license
- ✓ Compliance ADIS class
- ✓ Control Interlock and probation

Consequences

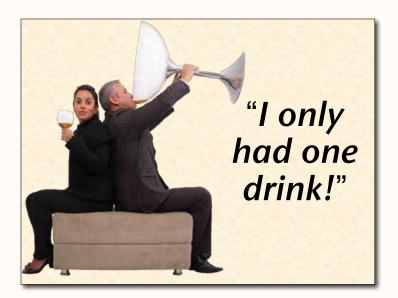
Jail time
Fines
Revocation
AOD assessment
ADIS



Consequences

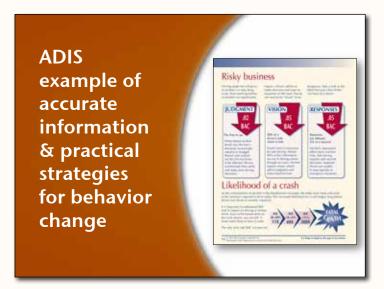
"The obligation of providers in impaired driving programs is to ensure individuals are exposed to accurate information and practical strategies that can enhance their investment in making behavioral changes."

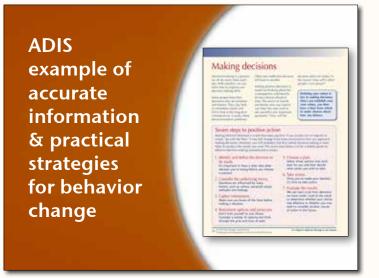
David Mee-Lee, MD, 2009

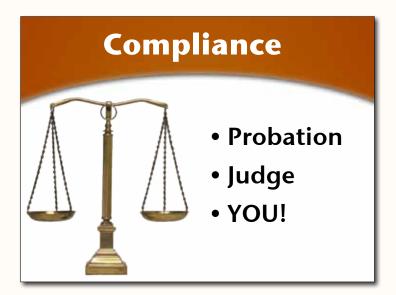


FACT 1.5 oz. liquor @ 80 proof = .02 BAC

If a martini contains 3 ounces of Vodka, consuming 2 martinis in 45 minutes = .08 BAC







Compliance

"Services should be designed to address participant needs along a continuum of care, not to meet compliance with 'doing time.'"

David Mee-Lee, MD, 2009

ADIS
example of
addressing
participant
needs along
a continuum
of care



EXERCISE: Compliance vs. Change

List three examples of being an ADIS agent of compliance.

1. _____

Compliance vs. Change

- List three examples of being an ADIS agent of compliance.
- List three examples of being an ADIS agent of change.
- Circle the activity you find most difficult to fulfill.
- Square the activity you find easiest to fulfill.

Ζ,_____

3. _____

List three examples of being an ADIS agent of change.

1. _____

2. _____

3. _____

Circle the activity you find most difficult to fulfill.

Square the activity you find easiest to fulfill.



Control

- ✓ Deferred sentence
- ✓ Ignition interlock
- ✓ SR22 insurance
- ✓ Conditional license

"I know you don't want to be here, but the judge says you have to be, so you might as well try to get something out of it."

Impaired driving program instructor

Control

- ✓ Providers are focused on a collaborative intervention & engaging the individual in behavioral change.
- ✓ Empowerment replaces control.

ADIS
example of
empowering
participants
& engaging
them in
behavior
change



Doing Time vs. Doing Change

"Whether a person is safe to drive should not depend on 'time done' but on evidence that lasting change has been initiated."

Attitudinal... behavioral... functional

David Mee-Lee, MD, 2009

EXERCISE: Time vs. Change List three strategies for getting participants to "do change" rather than "do time" during your ADIS course.	Time vs. Change • List three strategies for getting participants to "do change" rather than "do time" during your ADIS course.
1	
2.	
3	

SBIRT

Screening, Brief Intervention and Referral to Treatment

- **♦ Emergency rooms**
- **♦ Trauma centers**
- **♦ Primary care**
- **♦ Impaired driving intervention**

The ASAM Criteria p:179

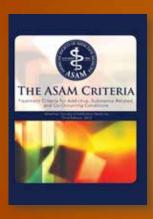
SBIRT attempts to intervene early with nonaddicted people and to identify those who do have a substance use or addictive disorder & need linking to formal treatment.

Washington Alcohol and Other Drug Information School

is an

ASAM Level 0.5 Early Intervention





Dimensions & Levels of Care

Diagnostic & Dimensional Assessment

- ✓ Imminent danger transfer to appropriate level of care
- ✓ Appropriate level of care & 0.5 service concurrently
- ✓ Complete 0.5 services and then transfer to appropriate level of care

Levels of Care

- ➤ Level 0.5: Early Intervention Services
- Level 1: Outpatient Services
- ➤ Level 2: Intensive Outpatient Partial Hospitalization Services
- ➤ Level 3: Residential Inpatient Services
- Level 4: Medically Managed Intensive Inpatient Service

Level 0.5: Early Intervention Services

"Designed to explore and address problems or risk factors that appear to be related to substance use and addictive behavior, and help the individual recognize the harmful consequences of high-risk substance use and/or addictive behavior."

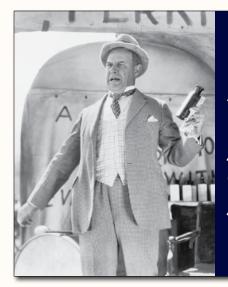
The ASAM Criteria p:179

Level 0.5: Early Intervention Services

"Level 0.5 constitutes a service for specific individuals who, for a specific reason, are at risk of developing substance-related or addictive behavior problems, or those for whom there is not yet sufficient information to document a substance use or addictive disorder."

The ASAM Criteria p:179





"We have solutions for problems you don't even know you have."

ASAM Dimensions

- Acute Intoxication and/or Withdrawal Potential
- Biomedical Conditions and Complications
- Emotional, Behavioral and Cognitive Conditions and Complications
- Readiness to Change
- Relapse, Continued Use or Continued Problem Potential
- 6 Recovery Environment
- Acute Intoxication and/or Withdrawal Potential
 - The individual's withdrawal conditions and problems, if any, are stable.

 Biomedical Conditions and Complications The individual's biomedical conditions and problems, if any, are stable or are being actively addressed, and thus will not interfere with therapeutic interventions. 	
Emotional, Behavioral and Cognitive Conditions and Complications	
 The individual's emotional, behavioral or cognitive conditions and complications, if any, are being actively addressed through appropriate mental health services and thus will not interfere with therapeutic interventions. 	
Readiness to Change	
 Expresses willingness to gain understanding of current addictive behavior that may be harmful or impair ability to meet/achieve goals 	



Readiness to Change

- Includes individuals who are ambivalent about exploring behavior
- Includes those whose motivation is to achieve goals other than substance use modification

ADIS & ASAM Dimension 4





Relapse, Continued Use or Continued Problem Potential

 Individual does not understand the need to alter his/her current behavior or pattern of use...

OR

 Individual needs to acquire specific skills to change current pattern of use or behavior

Risky business The principal of the prin



Recovery Environment

 Individual's social support network consists of individuals whose substance use prevents them from meeting obligations (family, work, etc.)

OR

Individual's family members are currently addictively using substances

OR

 Individual's significant other condones/encourages high-risk behavior and/or substance use

ACONOLICIDE CHARGE & relationships If when the date of the first charge is the first charge in the first

EXERCISE: Back at the Office

After this workshop, where do you see ADIS as part of the continuum of care?

Back at the Office

- After this workshop, where do you see ADIS as part of the continuum of care?
- How might this knowledge change how you facilitate ADIS in the future?

How might this knowledge change how you facilitate ADIS in the future?



Notes	

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