

Andrew M. Cuomo
Governor

Arlene González-Sánchez
Commissioner

TREATMENT MODALITIES

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NEW YORK STATE
OFFICE OF ALCOHOLISM & SUBSTANCE ABUSE SERVICES
Addiction Services for Prevention, Treatment, Recovery

Treatment Modalities

New York State Office of Alcoholism and Substance Abuse Services (NYS OASAS) regulates the addiction treatment modalities offered in New York State. Treatment modalities are provided in a variety of settings by a multidisciplinary team of registered professional, licensed practical nurses, and nurse practitioners, certified alcohol and substance abuse counselors, social workers, activity/recreational providers, mental health workers, medical doctors and psychiatrists. The services provided, nursing interventions, as well as roles of other health professionals are described as follows:

REGULATION 816

Inpatient Detoxification

Inpatient Detoxification, defined as “a medical regimen under the supervision of a physician or nurse practitioner that systematically reduces the amount of addictive substances in the patient’s body”, is implemented as indicated by the severity of dependence on one or more substances. Individuals, who require medical management and acute nursing care, including monitoring and control of active withdrawal symptoms, should be treated at this level. Detoxification provides a quick assessment and treatment of these symptoms. Failure to assess and treat symptoms of withdrawal can be life-threatening. Inpatient services are required for acute alcohol withdrawal and for the management of patients with other co morbid psychiatric and/or medical conditions. The goals of this inpatient program, in addition to safe and effective detoxification, include health promotion and health education about communicable disease (i.e. HIV, Hepatitis) prevention, infection control and harm reduction. The program seeks to motivate and prepare the patient to be an active participant in his/her recovery. The program offers counseling services as well as evidence-based and traditionally beneficial therapeutic modalities. These are directed to help substance dependent patients discontinue or regain control of, their substance use and the management of their lives. The length of stay for this treatment ranges from 2-5 days, depending on the complexity of detoxification interventions.

Nursing interventions in an inpatient detoxification facility include an initial nursing assessment, monitoring the detoxification of patients who are admitted, and implementing the health teaching component in the immediate post-withdrawal period. Substance dependent patients may experience physical withdrawal for the first several days of admission and require close monitoring of vital signs, general health, mental status and behavior. Nurses implement ongoing nursing assessments, deliver appropriate interventions, administer medications as needed, and document changes in patient condition as well as communicating with the patient's physician and other members of the health care team.

Medically monitored withdrawal and Stabilization Services

Medically monitored withdrawal and stabilization services are also known as Crisis Centers. These provide monitoring of mild withdrawal symptoms and uncomplicated withdrawal. They also provide services for those in situational crises at risk for relapse. Individuals enter crisis centers as a 'bridge' between different levels of care. These are essential for those persons unable to maintain abstinence without a residential setting and/or at risk for relapse. They are generally deficit funded through NYS OASAS and do not require insurance coverage.

Crisis centers are not required to have a physician or other prescriber on staff, therefore do not provide any medication assistance with withdrawal or assessment and treatment of other medical issues. Crisis centers usually permit a longer length of stay than services focused on withdrawal for dependent persons which are medically supervised and medically managed, and offer nursing care.

REGULATION 817

Adolescent Residential Treatment Services

Adolescent residential treatment is defined as chemical dependency treatment for individuals 12-17 years of age, tailored to the needs of adolescents and their families, and incorporating family, vocational, educational, health, recreational, and aftercare service. Treatment services are provided in individual and group counseling and didactic sessions focused on substance abuse and related topics. The indicators for adolescents to enter residential treatment are problems at home, school and/or within the juvenile justice system. The goal of residential treatment is provision of an age-appropriate treatment in a structured, consistent and caring environment. Optimally, the treatment approach is individualized, with interventions which identify, develop and re-enforce the adolescent's strengths and potential resources. Residential treatment is supported by a full academic program and extra-curricular activities. The length of stay is usually 9 months.

The nurse is responsible for developing and maintains a therapeutic milieu which is caring and safe. The nurse provides comprehensive assessment to support triage, participates in the formulation of the treatment plan, counsels patients and families, supervises treatment, including the administration of medications, and manages events which threaten the progress of recovery such as crisis situations. In addition, the nurse provides guidance, support and direction as recovery begins.

REGULATION 818

Short Term Inpatient Rehabilitation:

Short term inpatient addiction services are designed to initiate and deliver treatment and initiate the recovery process for persons who require a 24-hour structured treatment

setting in order to remain abstinent. These are medically supervised services which are based in general hospitals, psychiatric hospitals and/or free standing facilities. Inpatient treatment includes multidisciplinary treatment for the management of addiction as well as physical or mental complications or co-morbid conditions. Comprehensive nursing services are available around the clock (24/7). A typical length of stay is 21-28 days.

Nurses in this treatment setting provide comprehensive assessment for medical and psychiatric disorders, participate in treatment planning, and provide education about the prevention and treatment of addiction, and health promotion and self-care. They supervise and administer medications and medical and nursing interventions treatments as part of the medically authorized treatment regimen.

Mentally Ill Chemically Addicted (MICA) Short Term Inpatient Program:

This rehabilitation program services the MICA patient mentally ill/ chemically addicted patient. The patient's psychiatric symptoms must be stable at the time of admission because acute psychiatric care is not within the scope of this service. Programs are designed to teach patients and families about on their addictions and their psychiatric diagnoses. Patient education on the relationship of all diagnoses to recovery and health maintenance is emphasized correlating the connection between the two. The education is presented in a parallel process, in which nurses and other health care team members take part.

Nursing and medical staff are readily accessible. Nurses deliver comprehensive psychiatric care, including care for substance abuse/dependence at the generalist level, with options for consultation with advanced practice psychiatric nurses. The average length of stay is 21 -28 days.

REGULATION 819

Intensive Residential Rehab

Intensive Residential Rehabilitation is a treatment setting that provides a 24 hour structured program for those with chronic substance abuse, dependence diagnoses. Patients unable to maintain sobriety outside of a structured setting as indicated in multiple failed attempts at abstinence can be voluntarily admitted to the residential facility. These patients frequently demonstrate high risk behavior as well as being unable to maintain sobriety. Services at the 24 hour structured residences may include: medical oversight, educational, psychological, nursing, social and vocational services provided in individual and group settings. The average length of stay is 9-12 months.

Nurses in these settings monitor patient's health care and health care delivery, provide health education and education on addiction and supervise and/or administer medications.

REGULATION 822

Outpatient Chemical Dependency Services:

Outpatient treatment is designed for individuals' diagnoses with dependence or abuse and demonstrated inability to participate in treatment and adhere to treatment regimens without 24 hour care. Outpatient services provide support to enable the client to establish or maintain early recovery from alcohol and/or other drugs dependence. Outpatient programs provide specialized care services for adolescents, young adults, adults, persons with co-occurring mental health or chronic pain disorders, family of choice/origin members (including children), schools and employers.

The nursing role is integral Outpatient Chemical Dependency Services and includes Evaluation/consultation/support, Intervention, Psychiatric nursing care, Medication management, Education, Health Assessment, Tobacco Cessation, Stress management, Nutrition, and Employer services. Additionally, the nurse may deliver in the following client care services: Individual and group psychotherapy and family counseling and may also provide outreach education and primary care coordination (case management).

Opioid Treatment Programs (OTP'S)

Opioid Treatment Programs (OTP's) provide opioid replacement therapy in outpatient settings to patients with narcotic dependence. Medication assisted treatment (MAT) is designed to stabilize patients and may include provision of medications such as methadone or buprenorphine in conjunction with supportive services such as medical, nursing, psychiatric, counseling, vocational services, peer services and case management. It is an evidenced –based approach with the greatest likelihood of long-term success for opioid addicted patients.

In New York State, Opioid Treatment Programs (OTP's) are licensed and approved specific to modality by the NYS Department of Health, OASAS (Office of Alcoholism and Substances Abuse Treatment Services), CSAT (Center for Substance Abuse Treatment and the DEA (Drug Enforcement Agency). CSAT also requires programs to choose an authorized accreditation agency such as JCAHO or CARF to seek and maintain accreditation in conformance with CSAT accreditation requirements.

The scope of practice of the nurse in the OTP includes admin of meds, health teaching and maintenance of all accreditation standards. Guidelines for nursing participation in Buprenorphine administration are available in the CSAT TAP #30, Buprenorphine, a Guide for Nurses.

Dept of Corrections Treatment

Treatment services operated by New York State Department of Corrections and Community Services (NYS DOCCS) in collaboration with the NYS Office of Alcoholism and Substance Abuse Services (OASAS). DOCCS offers an option for inmates to

receive substance abuse treatment while incarcerated. DTC is a residential therapeutic program which includes participation in Twelve Step programs as available.

OTHER SERVICES

Recovery

Recovery is an intensely personal experience that is hard to define in a general way. There are multiple pathways to recovery including: treatment, faith/spirituality, natural, criminal justice interventions, support from individuals, and/or family, mutual assistance groups and recovery community centers. Everyone's journey results in hi/her own unique experience of recovery. While it is hard to agree on a single definition of recovery, it is generally agreed that recovery is more than abstinence alone and includes a full re-engagement based on hope, resilience, health and wellness, and includes family, friends and community. Recovery starts when a person begins to make better choices about his or her physical, mental and spiritual health. There are several phases of recovery which include: transition/stabilization, early, middle and sustained recovery. The journey leading to sustained journey is often not a linear progression.

Peer Assistance

In New York State, confidential peer assistance services are offered at no charge by the Statewide Peer Assistance for Nurses (SPAN) program. The mission of SPAN is to be the resource for New York State nurses affected by substance use disorders, while fostering public safety through outreach and education. Services offered include: education, identification and prevention, support and advocacy, linkages to community services, peer support groups, a toll free Helpline, and mentoring. As of 2012, there are 32 peer support groups located across the State, supervised by six Regional Coordinators, who live in the regions they serve. This program is funded through a nursing registration surcharge.

Addiction Program Specialist/Quality Services Management Investigator

The overall goal of this role is to provide needed assistance to ensure that OASAS providers operate in accordance with all applicable standards; therefore, ensuring that quality care is provided to improve the lives of all New Yorkers. Responsibilities include, but not limited to: working with the Program Review Unit, Technical Assistance and the Field Office in the analysis of all clinical and regulatory appropriateness of services being provided; conducting quality service reviews of identified documentation of clinically inappropriateness services billed to Medicaid; conduct investigations regarding formal complaints against OASAS Credentialed Alcohol and Drug Abuse Counselors (CASAC); follow-up on identified death reports and liaison to various providers to assure appropriate documentation and billing of services that are in accordance with OASAS.