


State of Vermont

Department of Disabilities, Aging and Independent Living

Protocol: Substance Use Problems Screening	Protocol #: 6.0
Applicable to: DAIL	Issue Date: August 5, 2015
Issued by: Monica Caserta Huff	Revision #: 1.0
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Purpose

The purpose of this protocol is to ensure DAIL's compliance with Agency of Human Services

(AHS) Policy 1.12, "Screening for Substance Abuse within AHS programs," effective 9/16/14. Each Department is expected to ensure its staff is able to use evidence-based screening methods and to assist at-risk clients in obtaining appropriate services.

The goal of the AHS policy is to identify AHS clients at risk for substance abuse problems in order to intervene early. It should be made clear to clients being screened that the screening process exists only as an assist to their health and wellbeing and will not be used to exclude clients from any program or services.

Background and Statement of Need

The prevalence of substance misuse and abuse in the populations we serve is well documented. Nonetheless, substance misuse and abuse among the elderly and some disabled persons has been a mostly hidden and ignored problem up to now.

AHS has established an initiative to educate AHS employees about substance use problems; how to communicate with AHS clients in a helpful and non-judgmental manner about the client's substance use; and to train designated employees to perform risk behavior screening tests and how to make referrals (recommendations) for appropriate risk-reducing services. Effective screening tools and methods of intervention and referral have been developed to address this need.

Definitions

Screening: A preliminary systematic procedure to evaluate the likelihood that an individual has a substance use problem.

Assessment: After a client has been screened, the procedure by which a licensed or other approved counselor identifies and evaluates a client's strengths, weaknesses, problems and needs for the development of a treatment plan. Assessment and diagnosis are the responsibility of those with specialized training to whom clients may be referred if they are found to have a positive screen and are willing, or become willing, to accept and pursue this form of help.

Substance Use Problem: A possible substance use problem is said to exist if a client screens positive on a routine screening or if the individual's health or well-being is at risk due to use of alcohol and/or drugs.

Staff Training

The Division of Vocational Rehabilitation (DVR) and the Division for the Blind and Visually Impaired (DBVI) have direct care staff that provide counseling and case management services for individual clients and, as such, are expected to offer substance abuse screening for all of their clients receiving these services. All of the current DVR and DBVI direct care staff and their supervisors will receive the 201 substance abuse screening training, and this training will become part of new counselor training in both divisions. • All of the DAIL staff not expected to perform individual substance abuse screening will receive the web-based 101 (substance abuse and co-occurring disorders) training available through the AHS training site.

Only DAIL staff trained in the use of the screening instruments will perform substance abuse screening. Provisions will be made to train new and appropriate staff as they are placed in DAIL programs. This trained staff will understand that the purpose of the substance abuse screening is to help clients receive needed services and that screening results will not affect clients' eligibility for DAIL programs.

Substance Use Screening Consultation

Staff members who administer screening tools will be supported and guided in this activity by their supervisor(s). Supervisors will receive appropriate training and have consultation available to them within DAIL from the Department SATC representative(s) or from other staff designated by the Commissioner.

Screening Procedures

All DVR and DBVI counselors conduct an initial interview with each new client, and this screening will be done during this process. Existing clients will receive such screening when appropriate and at least annually to ensure early identification of a need for substance abuse services. These divisions will maintain a record of screening performed and the results, and will report on the number of individual screenings performed, the number of positive screens, and the number of individuals referred for specialized help.

The remaining DAIL divisions (e.g., the Developmental Disabilities Services Division and the Adult Services Division) have only direct care staff that do not provide the kind of individual case management conducive to individual screening, or they perform services that are investigative in function (e.g. Division of Licensing and Protection). The staff of these divisions will not administer substance abuse screening but will refer clients to appropriate health and social service providers for such screening.

Screening Instruments

The evidence-based screening tests to be used with the clients in DAIL programs are as follows:

- S-MAST-G (short Michigan Alcohol Screening Test-geriatric version)-:ror adults age 60 and older
- DAST-10 (Drug Abuse Screening Test)-for all adults
- AUDIT (Alcohol Use Disorders Identification Test)-for adults under age 60
- PHQ-9 (Patient Health Questionnaire) for depression-for all adults

- CRAFFT (Adolescent screening test)

Settings

In all situations every effort must be made to conduct screenings in a setting with appropriate privacy, and the information gained from the process will be treated with respect of confidentiality and in accordance with applicable HIPAA and 42 CFR Part 2 standards. All of the DVR and DBVI counselors have private offices where they see clients so they can ensure appropriate privacy and confidentiality in the screening process.

Steps for Conducting Screening Test

1. The interviewer starts by raising the subject and obtaining the client's permission to ask questions about his/her alcohol and drug use.
2. Proceed if the client expresses willingness and seems engaged.
3. Ask screening questions in an objective and non-judgmental manner.
4. Provide feedback to the client on the screening test results, i.e. test score, risk level indicated, and whatever recommendation is appropriate.
5. Ask client what he/she would like to do about results.
6. Negotiate a plan for the next step(s).
7. Offer support for plan.

Screening Results and Referrals

Clients who are found to have a positive screen for problems will be informed of this result. Clients recommended for referral to specialized assessment and treatment will be given information about providers to contact. In instances where the client is accepting referral, the screener will attempt to connect the client to a provider immediately and, when this is not feasible, provide the client with all the necessary information for the client to make this contact. Staff follow-up activity should include ongoing support of treatment providers in the assessment process and thereafter as requested by providers or the client. Client screening results and follow-up activity by staff will be documented in individual client health and service files to the extent required by the programs performing the screening with appropriate respect for confidentiality.

Refusals

No detrimental or restrictive action will be taken by the Department or its employees against any client who does not wish to take the screening test. Screening tests may be offered and re-offered only to aid the client and not as a condition of eligibility. The exclusive purpose of this AHS initiative is to help clients who may have substance use problems, and this purpose should be evident in the structure and process of the screenings.

Compliance

Beginning October 1, 2015, and on a quarterly basis thereafter, Division Directors or their designees will submit the following information to the Department's State Unit Operations Team Leader (within the Adult Services Division):

- The number of individual screenings performed;
- The number of positive screenings found;
- The number of clients referred (recommended) for assessment and treatment;
- A list of all employees within the division requiring training; and
- A current list of all employees within the division who have completed the required trainings.

The State Unit Operations Team Leader will maintain a record of the above information for review by AHS upon request.