



LEARNING MODULE I

Seminar # 16

Treatment Centers Intervention

Learning Objectives

1. What is the issue.
2. How can the issue impact the family.
3. What are the options.

Pathfinder: The 12 Key Issues a Family Faces

#1 Enabling vs Consequences

#2 Addiction Behavior

#3 Family Intervention

#4 The Police

#5 Emergency Medical Services

#11 Bereavement
(Learning how to move forward)

#12 Spirituality, Faith Practices

What is the issue?

#6 Legal Court System

#7 Treatment Centers

#8 Support Agencies
Mapping

#9 The Relapse

#10 Successful Lifelong Recovery

Currently

By the time a treatment center is required the family members have been through a great number of issues and decisions. Most likely, the thought of a treatment center being needed was considered but not fully reviewed, “we will cross that bridge when it comes”. As we have identified in the other seminars, this is not to the family’s member’s best interest. This is because when it is time for a treatment center it is typically at a time when the family members are scared, angry, stressed and not at their best towards making decisions and communicating with others. It is the worst time to be looking for a treatment center. They just want their loved one placed into a facility and treatment started. They want this all to be over, and that is what a treatment center does. **Wrong**, that is not what a treatment center does. It is not over when the patient is discharged off service. The family members are setting themselves up for a huge disappointment if they think a treatment center is the final answer.

The point is, the disease existed before the admit to a treatment facility, during the treatment facility therapy and will be there after the treatment facility care. The **Acute Care Treatment** is only a small part of the patients **Chronic Disease Management**. And acute care setting has never been and never will be a proper site of care for managing the long-term needs of a chronic disease. It is the work that follows, which will make the greatest, lasting impact to the loved ones sustained recovery. And that means the family members have a direct role in making the necessary changes which will ensure a stronger, supportive, and empowering environment for everyone that is on this journey.

So, given this is a chronic disease, it is likely the family members will find themselves back at the treatment center, repeatedly until recovery is finally sustained. It may take as many as four to six times through a treatment center before longer recovery is achieved.

Therefore, if you know your loved one is addicted, then start looking now for a facility. Do not wait until you are up against a crucial moment to for a treatment center. Know your options, do your homework now and it will pay off in the future when the time come to use them.

The Challenges

If you ask me if my facility is the right place for your child, I will tell you, yes. Would this surprise you? I have answered your question and you are relieved. If you needed tires, and I sold tires and you asked me if I would sell you tires, I would say, yes. Would this surprise you? I have answered your question and you are relieved. When you call the on-line phone number and get a call center, and ask me for recommendations, as a call center, I will send you to the provider who pays me the most. And you will unknowingly be relieved.

The problem is, when looking for a treatment centers, the family members have no idea what they are asking for, how to evaluate the facility and how to compare them against their competition. And this industry does not make it easy for you to do a “treatment facility search and compare”.

Solutions

This seminar is designed to show the family members how to think this through, what to consider and what questions to ask when searching for a drug treatment center. The first and most important step is to have an un-bias evaluation of your loved one. It is only from that vantage point where you will learn what to ask for and expect as an outcome. For example: If your loved one has an addiction, then you treat the addiction. If they have an addiction and mental illness, then you treat the addiction then the mental illness. If you only treat one, you will likely not have a good outcome. It is possible the mental illness will be under treated and the likely hood for relapse is increased after treatment discharge.

Get three types of assessments:

1. Medical Assessment.
2. Addiction Assessment.
3. Mental Health Assessment.
- 4.

How can the issue impact the family?

First Find Out What You Are Dealing With

There are several levels of treatment centers and all of them depend on a multitude of criteria from insurance, to diagnosis, to severity of disease and stage of addiction cycle, dual diagnosis, Medical Comorbidities. All of these are included to the management of a plan of treatment.

Health care professionals who can conduct your assessment:

- Physicians (M.D.) who are trained in addiction treatment
- Licensed psychologists (with a Ph.D. or a Psy.D.) who are trained in addiction treatment
- Licensed clinical social workers (L.C.S.W.), marriage and family therapists (L.M.F.T.) or mental health counselors (L.M.H.C.; L.P.C. or L.C.M.H.C.) who are trained in addiction treatment
- Licensed or certified addiction counselors

What are the options?

Determine Types of Treatment, (Recommended)

Based on scientific research since the mid-1970s, the following key principles should form the basis of any effective treatment program:

- Addiction is a complex but treatable disease that affects brain function and behavior.
- No single treatment is right for everyone.
- People need to have quick access to treatment.
- Effective treatment addresses all the patient's needs, not just his or her drug use.
- Staying in treatment long enough is critical.
- Counseling and other behavioral therapies are the most used forms of treatment.
- Medications are often an important part of treatment, especially when combined with behavioral therapies.
- Treatment plans must be reviewed often and modified to fit the patient's changing needs.
- Treatment should address other possible mental disorders.
- Medically assisted detoxification is only the first stage of treatment.
- Treatment does not need to be voluntary to be effective.
- Drug use during treatment must be monitored continuously.

- Treatment programs should test patients for HIV/AIDS, hepatitis B and C, tuberculosis, and other infectious diseases as well as teach them about steps they can take to reduce their risk of these illnesses.

There are many options that have been successful in treating drug addiction, including:

- Behavioral counseling
- Medication
- Medical devices and applications used to treat withdrawal symptoms or deliver skills training.
- Evaluation and treatment for co-occurring mental health issues such as depression and anxiety
- Long-term follow-up to prevent relapse.
- A range of care with a tailored treatment program and follow-up options can be crucial to success. Treatment should include both medical and mental health services as needed. Follow-up care may include community- or family-based recovery support systems.

The family will need to research each of these treatments on the internet to find out what is involved with each treatment options.

An integrated treatment program, which may combine medication and behavior modification, is best applied as part of a long-term plan to achieve recovery. Individuals may opt to receive treatment in a long-term residential setting that provides time for easing withdrawal, learning, and employing relapse prevention strategies, and selecting follow-up options for continued care, including community programs that support and encourage an individual to live a drug-free lifestyle.

Acute Care Setting Required

What to ask when contacting a treatment center?

- What types of treatment therapies are offered?
- Can the program offer medication?
- Are staff members qualified to treat both mental health issues and addiction?
- Is treatment tailored for each patient?
- What will they have to do during rehab?
- What can and should the family do while they are in treatment?
- Can you provide patient rights and responsibilities in writing?

Select Best Facility for Their Level of Care

First Consideration is Detoxification:

Detoxification, or detox, is the process of letting the body remove the drugs in it. The purpose of detox is to safely manage withdrawal symptoms when someone stops taking drugs or alcohol.

Everyone has a different experience with detox. The type of drug and how long it was used affect what detox will be like.

Medications used in detox help keep former users comfortable while the drugs leave their body.

It can take days or months to get through withdrawal symptoms for most drugs. The length of withdrawal depends on several factors, including:

- Type of substance the user is addicted.
- Duration an addiction has lasted.
- The severity of the addiction
- Method of abuse (snorting, smoking, injecting, or swallowing)
- The amount of a substance the user takes at one time.
- Family history
- Genetic makeup
- Medical condition
- Underlying mental health conditions

Speak with someone who can help you find a medically assisted detox.

After Detox, learn about what treatment setting is right for you?

Intensive Outpatient

- Overview: Offers similar services to outpatient care, but services are offered more frequently. Can also arrange for treatment of mild to moderate physical and mental health conditions at the same time.
- Hours Per Week: Usually 9 or more hours of therapy and education per week involving a mixture of individual and group counseling.
- Best For: People who can benefit from outpatient treatment but require more frequent contact with therapists.
- Living Environment: You live at home and may be able to work or go to school Partial

Hospitalization

- Overview: A type of outpatient treatment, also called day treatment, for individuals requiring more services than intensive outpatient.
- Hours Per Week: Usually 20 or more hours of therapy and education per week—up to 9 hours per day, up to 7 days a week.
- Best For: People with more severe addiction and/or other serious health conditions or whose living environment is safe but does not provide enough structure or positive support for recovery.
- Living Environment: You live at home, but usually spend a lot of time each day in treatment, which can make working or going to school difficult.

Residential (Non-Hospital)

- Overview: Services are provided in a live-in setting. Residential non-hospital care (also called “rehab”) includes 3 different levels of care, which differ in the intensity of services offered and their ability to treat more severe forms of addiction and/or other serious health conditions.
- Hours Per Week: Usually 24-hours/day
- Best For: Residential treatment is best for people whose drinking or drug use puts themselves or others at risk for serious harm, who are often unemployed, homeless or in trouble with the law, or who do not have a safe and stable living environment.
- Living Environment: You live at the facility, away from home (for any time between a few weeks to many months), with others in treatment and always have access to professional support.

Inpatient (Hospital)

- Overview: Round-the-clock hospital treatment for people with severe medical problems, sometimes due to addiction, or severe psychiatric disorders.
- Hours Per Week: Offers 24-hour treatment supervised or provided by a physician.
- Best For: People with addiction and severe physical or mental health problems who need constant medical supervision and treatment.
- Living Environment: You stay in the hospital until treatment is completed or until you can be safely transferred to another treatment setting Source: Adapted from American Society for Addiction Medicine Patient Placement Criteria.

Second Consideration is where is the Level of Care:

The patient must first go through detoxification before an y level of care can be used for treatment. After detoxification, the quest is “what level of care is most suitable for the patient”. Therefore, an assessment needs to be completed for what level of care is best. From the assessment a level is selected. These include:

- **Who has Outpatient treatment?** Patients live at home and go to a clinic or facility regularly for sessions with addiction treatment professionals.
- **Who has Inpatient treatment?** Patients stay in a hospital and receive intensive and highly structured care for addiction and other severe medical problems.
- **Who has Residential treatment?** Patients stay in a nonhospital setting and receive intensive and highly structured care for addiction and other medical problems.

- **Who has Recovery housing?** Patients live in supervised, temporary housing and can participate in treatment program.

Other Treatment Settings (ordered from the least to the most intensive)

Outpatient

- Overview: Delivered in a variety of locations, such as a professional's office or a health, mental health, or addiction clinic. Other health conditions, including mental health, can also be addressed.
- Hours Per Week: Usually less than 9 hours of therapy and education per week; most often involves once or twice weekly individual, group, or family counseling sessions.
- Best For: People who do not have a serious health problem whose drinking or drug use does not put them at risk for serious harm, who have a good recovery support system and a safe and stable living environment.
- Living Environment: You live at home and may be able to work or go to school.

Methadone Maintenance Clinic.

- Overview: A specially licensed outpatient clinic that dispenses methadone to patients with opioid addiction. Some programs also provide buprenorphine (Suboxone)
- Hours Per Week: Methadone doses are picked up once a day during the early stage of treatment and then less frequently over time. Most clinics offer therapy services, but infrequently (monthly), so you may need to seek additional therapy.
- Best For: People with severe or long-term addiction to opioids who have experienced serious health, family, employment, or legal problems.
- Living Environment: Initially, you must live close enough to the clinic to pick up your medication most days of the week Treatment settings range from more to less restrictive. They also vary in the level of medical care provided. The treatment setting that is right for you will depend on your individual needs.

Non-Commercial Search Engines

SAMHSA.COM

RELINK.ORG

DRUGHELP.CARES

EMERALDJENNINGS.ORG

Third Consideration is Type of Therapy:

Therapy (also called counseling) is the most common treatment for substance abuse and addiction. There are several different types of therapies that are effective, depending on your individual needs and circumstances. Research does not yet tell us exactly which therapy is best for which people, but we do know that family therapy is usually the best treatment for teens. Look for an addiction treatment provider who offers a range of effective therapies, including one or more of the following:

Motivational Interviewing and Motivational Enhancement

- **Therapy**
 - How It Works: Bolsters motivation to change substance use behaviors, encourages planning for change and then making and maintaining changes in behavior
- **Cognitive Behavioral Therapy**
 - How It Works: Helps identify, recognize, and avoid thought processes, behaviors and situations associated with substance use. Helps manage cravings, refuse offers of alcohol or other drugs, and develop better problem solving and coping skills.
- **Community Reinforcement Approach**
 - How It Works: Focuses on improving family relations, learning skills to reduce substance use, acquiring job skills, and developing recreational activities and social networks that can help to minimize the drive to use substances.

Know the Facilities Treatment Paths

An Individual: addiction treatment provider offers office based, outpatient treatments, usually meeting with you once or twice per week. It is important that individual providers have specific training and expertise in addiction treatment. When in doubt, ask about their specialized training in addiction and how long they have been treating patients with addiction. Individual providers can include: • Addiction medicine physicians and addiction psychiatrists (M.D./D.O.)

- Psychologists (Ph.D./Psy.D.)
- Licensed clinical social workers (L.C.S.W.), marriage and family therapists (L.M.F.T.), and mental health counselors (L.M.H.C., L.P.C. or L.C.M.H.C.)

An addiction treatment program usually offers more intensive care. At a program, a team of health care providers will work together to treat you. The team should include a physician (M.D.), a psychologist (Ph.D./Psy.D.) or one of the counselors or social workers listed above and may also include addiction counselors.

Treatment programs may also employ physician's assistants, nurses, and nurse practitioners with training in addiction treatment. If you need addiction medication, you need to find a provider who is licensed to prescribe it.

- Most physicians, including primary care doctors, can prescribe medications for nicotine and alcohol addiction.
- Methadone can only be prescribed at a specially licensed methadone clinic. To find one near you, visit <http://dpt2.samhsa.gov/treatment/directory.aspx>.
- Physicians with special training can prescribe buprenorphine in their office. To find one near you, visit http://buprenorphine.samhsa.gov/bwns_locator.
- Addiction treatment programs should be able to connect you with a physician who prescribes addiction medications.

Acute Care is Small Part of the Journey

Addiction treatment programs

- should be licensed by the state government. State licensing means that the provider meets basic quality and safety requirements. It does not guarantee that they provide effective treatments. Some states do not require all addiction programs to be licensed.
- In addition to licensing, addiction treatment programs may be accredited. Accreditation means that providers meet standards of care set by a national organization that reviews programs for compliance, but it does not necessarily mean the provider offers effective treatments. Individual health care providers should be licensed and/or certified to practice their profession and have specialized training and experience treating addiction. All addiction treatment providers and programs should have a doctor on staff or available for consultation.
- At a treatment program, a doctor will oversee your care and/or work with other health care professionals who are treating you.
- If you are seeing an individual provider, he or she should consult with a physician regarding your health care needs and your need for addiction medication, if appropriate.
- If you are seeking treatment in a residential setting, look for a program that has an addiction medicine physician or addiction psychiatrist on staff full time

Provides treatment for co-occurring physical or mental health conditions.

- Many people with addiction live with other diseases like heart or lung disease, diabetes, cancer, HIV/AIDS, hepatitis C, depression, anxiety, post-traumatic stress disorder and other physical and mental health conditions. Health conditions that can complicate or reduce the effectiveness of addiction treatment should be treated at the same time.

Offers a range of effective treatments.

- Although there is no cure for addiction, there are treatments that are effective, including several medications and therapies.

The best treatment providers or programs offer more than one form of effective treatment.

- People who are addicted to opioids (such as heroin or prescription painkillers), alcohol or nicotine should look for a treatment provider who can prescribe medication for their addiction. Medications can reduce tobacco, drug and alcohol use and cravings, and help keep people in treatment longer. Tobacco-free – Look for a treatment setting that is tobacco-free.

- both inside the facility and on the facility grounds.

- and offers smoking cessation treatment. Continuing care.

- Addiction treatment providers should offer ongoing, continuing care and support after your treatment to help you maintain the progress you achieved during treatment and avoid or treat relapse.

Most do not, so family members should plan to complete this without the acute care facilities involvement.

The Family Needs Therapy Too

Contingency Management

– How It Works: Alters behavior by rewarding constructive behaviors, like reducing or stopping substance use, and sometimes by discouraging unhealthy behaviors

Behavioral Couples/Family Therapy

– How It Works: Improves communication and support and reduces conflict between couples and families that have a member with addiction

12-Step Facilitation

– How It Works: Based on the philosophy of anonymous self-help groups like Alcoholics Anonymous (AA), 12-Step Facilitation teaches about the disease of addiction, offers tools to maintain sobriety and encourages people to attend self-help group meetings in their community

Family Therapy for Adolescents Includes

- Multidimensional Family Therapy,
- Functional Family Therapy.