HIV Services Program

Substance Use Services (Residential) Service Standard

November 2023

Health Resources & Services Administration (HRSA) Service Definition:

Substance Use Services (Residential) is the provision of services for the treatment of drug or alcohol use disorders in a residential setting to include screening, assessment, diagnosis, and treatment of substance use disorder. This service includes:

- Pretreatment/recovery readiness programs
- Harm reduction
- Behavioral health counseling associated with substance use disorder
- Medication assisted therapy
- Neuro-psychiatric pharmaceuticals
- Relapse prevention
- Detoxification, if offered in a separate licensed residential setting (including a separately licensed detoxification facility within the walls of an inpatient medical or psychiatric hospital)

Program Guidance:

- Substance Use Services (Residential) is permitted only when the client has received a written referral from the clinical provider as part of a substance use disorder treatment program funded under the Ryan White HIV/AIDS Program (RWHAP).
- Acupuncture therapy may be allowable under this service category only when it is included in a documented plan as part of a substance use disorder treatment program funded under the RWHAP.
- RWHAP funds may not be used for inpatient detoxification in a hospital setting unless the detoxification facility has a separate license.

Key Service Components and Activities:

Substance Use Services (Residential) are provided by or under the supervision of physician or other qualified personnel with appropriate and valid licensure and certification by the State of Indiana. Services are provided as outlined in the service definition to persons screened, assessed, and diagnosed with a substance use disorder.

HIV Services Program Service Standards:

Key service components and activities are noted in the Service Standards below.

Standard	Documentation
Personnel Qualifications	
1. Provider qualifications are documented with degrees, certifications, registrations, and training records according to the scope of practice, agency policy, and Indiana law, and as dictated by the Substance Abuse and Mental Health Services Administration (SAMHSA) standards. 2. Licensed providers hold current and active licenses in good standing. 3. Providers must obtain continuing education according to the appropriate licensing board, or at minimum ten (10) hours of substance use-specific training per year.	1. Documentation of all applicable current and active licensures, certifications, registrations, or accreditations is available for review by Indiana Department of Health (IDOH) upon request. 2. Documentation of continuing education, with at least ten (10) hours of substance use specific training per year for unlicensed/certified staff member serving Ryan White clients.
Eligibility Criteria	
1. Subrecipients must have established criteria for the provision of Substance Use Services (Residential) that includes, at minimum: a. Eligibility verification consistent with recipient requirements	1. Service providers and sub-recipients must maintain documentation of current eligibility if providing HIV services reimbursable under the RWHAP Part B Program. 2. Documentation must be made available for review by IDOH upon request.
Facility Licensure	
1. Residential treatment facility is currently licensed or certified as required by Indiana law. 2. Detoxification center is currently licensed as required by Indiana law.	1. Documentation of all applicable and currently active facility licenses and/or certifications are available for review by IDOH upon request.
Intake	
1. Intake will be completed within 72 hours of client's initial contact to agency.	1. New client charts will have an individual intake completed within 72

2. In the event of any delay to accessing care (including delays due to the client's stage of recovery readiness), reasonable attempts will be made to maintain communication with the client for the purpose of preserving engagement with the substance use treatment system.	hours of client's initial contact to agency. 2. Client record documentation includes evidence of consistent client contact and evidence of referrals to or the provision of supportive services to maintain client engagement.
Assessment	
1. Each client receives a formal assessment within eight (8) hours of admission, except when documented reasons exist that preclude this standard from being met. 2. Evidence-based diagnostic tools will be used when needed to assess for suspected mental health diagnoses. 3. Client assessments will include, at a minimum: a. Substance use history and current use b. Suicidal ideation c. Appropriateness of referral for psychiatric needs d. Mental health and substance use treatment history e. History of trauma f. Activities of daily living across settings and associated needs g. Medical needs, including medically monitored detoxification 4. The diagnosed substance use disorder, as identified in DSM-5-TR, which will guide treatment	1. Client record documentation includes a written assessment completed within eight (8) hours of admission, and if completed after eight (8) hours, an explanation for the delay. 2. Subrecipient assessment tool/form must include, at minimum: a. Suicide ideation b. Crisis needs c. Medication history d. Appropriateness of referral for psychiatric needs e. Substance use history and current use f. Treatment recommendations g. Mental health treatment history h. Sexual and substance use risk-taking behavior 3. Client record documentation includes a substance use disorder diagnosis if treatment is indicated.
Service Delivery/Treatment	
1. Providers deliver the appropriate level of service for the client based on the client's ability and willingness to participate. 2. If necessary, providers must immediately refer the client to other	1. Client record documentation includes: a. Client Treatment Plan b. Signed and dated progress notes demonstrating counseling and services consistent with Treatment Plan

services better suited to meet the client's needs. 3. Providers create or adapt an individualized treatment plan for each client within 72 hours of assessment. Every plan calls for only allowable activities and includes: a. A description of the need(s) b. The treatment modality c. Start date and projected end date for residential substance use treatment services d. Regular monitoring and assessment of client progress e. Any recommendations for follow-up f. Provider and client signature 4. Notes in the service record reflect progress on and recommended updates to the treatment plan, as well as any collaborations or information exchanges that have taken place with other providers and members of the treatment team. 5. The mental health/substance use treatment provider coordinates medication management with primary care and other prescribing providers as appropriate.	2. Documentation in the client record of client referral to appropriate services. 3. Services provided must be recorded in CAREWare service tracking system no later than 20 days after the end of each month in which services were provided.
Discharge Plan	
1. Client Discharge Plan should be developed for every client, regardless of reason for discharge. At minimum, the Discharge Plan should include: a. Reason for client discharge from services (i.e., treatment goals achieved, client requested termination of services, client left facility, client deceased, etc.) b. Referrals to ongoing outpatient substance use treatment services	1. Client record documentation contains signed and dated Discharge Plan with required elements. 2. Client record signed and dated progress notes reflect provision of Discharge Plan to client.

c. Identification of housing options and address at which client is expected to reside d. Identification of medical care provider from whom client is expected to receive treatment e. Identification of case manager/care coordinator from whom client is expected to receive services f. Source of client's HIV medications upon discharge 2. Client Discharge Plan should be provided to client when feasible.	

Subservices:

- SUSR – Transitional Housing
- SUSR – Residential Treatment
- SUSR – Group Therapy
- SUSR – Detoxification
- SUSR – Assessment

Service Unit Definition:

- Unit = 1 day
- Unit = 1 visit