Welcome!

All lines have been muted. We will get started shortly.
INTRODUCTIONS

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- Clinician, IDOC District 7 Probation and Parole Office in Idaho Falls, ID
GOALS OF TODAY’S WEBINAR

- Project Overview:
  - Initial survey in 2016
  - Clinical Workgroup
  - Additional Research
  - Presentation to Stakeholders
  - Stakeholder Feedback – follow-up survey

- Discuss research on 3 assessments:
  - ASAM Continuum
  - ASI
  - CAAPE-5

- Feedback opportunity – online follow-up survey
PROJECT OVERVIEW

- **Fall 2016**: Initial Stakeholder Survey
- **Spring 2017**: Clinical Workgroup
- **Fall 2017-Spring 2018**: Additional Research on ASI, CAAPE-5, and ASAM Continuum
- **Summer 2018**: Presentation to Stakeholders
- **Late Summer 2018**: Recommendation to partner agency leadership
ASAM CONTINUUM INTRODUCTION

- Computer guided biopsychosocial assessment
- DSM 5 criteria for diagnoses
- CIWA-Ar & CINA withdrawal scores
- Addiction Severity Index (ASI) composite scores
- ASAM Level of Care recommendations addressing all 6 dimensions
  - Including co-occurring disorder sub-levels
ASAM CONTINUUM HIGHLIGHTS

- Designed to develop a working rapport
- Assessment is conversation driven relying on the clinician’s ability to conduct a clinical interview
- Officially endorsed by ASAM
- Severity is determined on some questions with a Likert scale
- Makes a provisional recommendation for level of care at the conclusion of the interview, but the clinician does have the ability to override if it is justifiable.
- Allows clinician flexibility to ask questions to rephrase them in language the patient can understand
Helping the Clinician Stay on Track

In the past year, think about your use of alcohol. (If the patient has not used in the past year, enter “No” for each of the following items.)

1. “Do you need to use more alcohol to get the same feelings you used to by using less? Or do you get less of a high by using the same amount? This indicates either need for increased dose or reduced effect with same dose.”

2. “Do you ever get physically sick when you stop using alcohol?” Indicates characteristic physical or psychological withdrawal symptoms.”

3. “When you are using alcohol, do you ever feel that you don’t stop when you want to or feel that you should? Indicates substance abuse in larger amounts or over longer period than was intended.”

4. “Have you ever tried to cut down?” Indicates persistent desire or unsuccessful effort(s) to control substance use.”

5. “Does alcohol take up a lot of your time? Indicates much time is spent obtaining, using, or recovering from substance.”

Have you been unable to do the things that you need to do at work, school or home because of your alcohol use again and again?

- Work: [ ] Yes, [ ] No
- Home: [ ] Yes, [ ] No
- School: [ ] Yes, [ ] No
- More than once in dangerous situations: [ ] Yes, [ ] No
ASAM CONTINUUM AND MENTAL HEALTH

- Mood disorders
- Anxiety
- Thought and behavioral personality disorders
- Examines symptoms during the past 24 hours, past month and patient’s lifetime
- Helps determine symptoms that might be related more to intoxication and/or withdrawal
- Identifies risks related to harming self or others and medication compliance
ASAM CONTINUUM WITHDRAWAL SYMPTOMS

- Does have an extensive section regarding withdrawals (CIWA-Ar & CINA withdrawal scores).
- Allows clinician to give a nursing quality assessment on withdrawal symptoms. Requires clinician to make a simple medical observation, which was designed specifically for the clinician to do without having a nursing degree.
ASAM CONTINUUM NARRATIVE REPORT

Patient: Joanne Jones

Interview: joanneljones@gmail.com
Assessment Date: 2/23/2019
Assessment Time: 12:30 PM
Assessment End: 3/4/2019

IDENTIFYING INFORMATION

Name: Joanne Jones
DOB: 2/1/1959

GENERAL INFORMATION SECTION

Joanne is a 57-year-old female who was referred for a treatment program by her primary care physician. She has a history of alcohol abuse, with a family history of alcoholism. Joanne has no history of drug abuse.

MEDICAL SECTION

Joanne has been treated for hypertension. She has a history of high blood pressure, which has been managed with medication. Joanne has no medical problems that require ongoing medical care. She is currently taking medication for high blood pressure.

Client Perceived Severity of Medical Problems and Desire for Treatment

Although Joanne has experienced symptoms of hypertension, she has not sought medical attention. She has no history of drug abuse.

Interviewer Impressions and Recommendations - Medical

Joanne has a medical problem that requires attention. She should be referred to a doctor for further evaluation.

Interviewer Comments

The interviewer did not have any comments for this section.

ALCOHOL & DRUG SECTION

Lifetime and Recent Alcohol Use

In her lifetime, Joanne has used alcohol regularly for a period of 10 years. For approximately 10 years, her drinking was regular and heavy (generally defined as 5 or more drinks per day). In the past 30 days, she drank 10 days, and on 4 of those days, she drank more than 5 drinks per day. In the past 30 days, she reported spending $700 on alcohol in the past 30 days. She has never experienced alcohol-related problems.

Lifetime and Recent Drug Use

Joanne does not report any recent use of illegal drugs or prescription drugs. She has no history of illegal drug use or prescription drug use.

Alcohol and Drug Treatment History

Joanne has received treatment for alcohol problems in the past. She has been in treatment for alcohol abuse and has been in treatment for alcohol-related problems. She has completed a treatment program for alcoholism in the past 30 days.

Client Perceived Severity of Alcohol and Drug Problems and Desire for Treatment

Joanne has experienced alcohol-related problems on 5 of the past 30 days, and is profoundly bothered by these problems. Obtaining alcohol treatment is of profound importance to Joanne. Joanne expressed drug-related problems on 5 of the past 30 days, and is slightly bothered by these problems. Obtaining drug treatment is of moderate importance to Joanne.

Interviewer Impressions and Recommendations - Alcohol and Drugs

Joanne has a history of alcohol abuse, and she needs ongoing treatment to manage her alcohol-related problems. She should be referred to a treatment program for alcoholism.
ASAM CONTINUUM ADMINISTRATION CONSIDERATIONS

- Time to complete
  - Interview 60-75 minutes
  - Editing: Typically no additional edits required after interview

- Clinician credentials: CADC or higher

- WITS compatibility: Yes

- Population suitable: Adults. Some entities have tried to adapt it for adolescents.

- Languages: English but it is written to be translated to other languages

- Other states using tool: California and Massachusetts

- Training requirements: Free online webinar or option of in person training at a cost
ADDICTION SEVERITY INDEX (ASI) INTRODUCTION

- Brief, semi structured interview
- Covers important areas including:
  - Medical
  - Employment/support
  - Drug and alcohol use
  - Legal
  - Family/social
  - Psychiatric
- ASI was the first research instrument in addictions that used a clinical approach
- Focuses on 30 days prior to the assessment and lifetime
- Captures minimal information necessary
- Requires clinical judgement to know when follow up questions are necessary
- ASI 5th edition is not suitable for all adolescents; however adolescent versions exist
ADDICTION SEVERITY INDEX (ASI) OVERVIEW

• ASI uses patient rating scale:
  • Rates patient severity items as
    • 0 – Not at all
    • 1 – Slightly
    • 2 – Moderately
    • 3 – Considerably
    • 4 – Extremely
Interviewer rating scale:

Each section gives an overall score which is interpreted as:

- 0-1 No real problem, treatment not indicated
- 2-3 Slight problem, treatment probably not necessary
- 4-5 Moderate problem, some treatment indicated
- 6-7 Considerable problem, treatment necessary
- 8-9 Extreme problem, treatment absolutely necessary
- 8-9 Extreme Problem, treatment absolutely necessary
ADDICTION SEVERITY INDEX (ASI) AND MENTAL HEALTH

- Depression
- Anxiety or tension
- Hallucinations
- Concentrating or remembering
- Violence
- Suicidal ideation
ADDICTION SEVERITY INDEX (ASI) SCORING SHEET
ADDICTION SEVERITY INDEX (ASI) HIGHLIGHTS

- Following the ASI interview, composite scores are created
- ASI does not auto generate a summary report
  - Clinician would develop an ASAM summary report with the overall treatment recommendation and DSM 5 diagnosis
- Some counties in Idaho use ASI for DUI evaluations
  - Extra documentation required
ADDICTION SEVERITY INDEX (ASI) ADMINISTRATIVE CONSIDERATIONS:

- Time to complete
  - Interview 30-60 minutes
  - Editing 30-60 minutes.
- Clinician credentials: CADC or higher
- WITS compatibility: Yes, as an upload
- Population suitable: Adults and adolescents over the age of 16. Other versions exist for adolescents under age 16.
- Languages: English and Spanish
- Training requirements: No formal training required; however, it is likely the State would organize something to measure competency.
CAAPE-5 INTRODUCTION

- Comprehensive Addictions And Psychological Evaluation
- Utilizes criteria from DSM 5
- Aims to document drug/alcohol related issues
- Gathers information to see if there is an indication of common mental health conditions
CAAPE-5 OVERVIEW

- Goes over each diagnostic criteria for substance use disorders
- Screens for some mental health
- Allows the patient to rate some questions on number of days or based on timeframes
- Does not give an actual mental health diagnosis, but identifies areas where more screening might be appropriate
- Might need additional questions for dimensions 2, 4, 5, and 6 to determine an overall level of care
- Does not have a function that automatically generates a summary report
CAAPE-5 AND MENTAL HEALTH

- Screens for:
  - Major Depressive Disorder
  - Manic episodes
  - Panic Disorder
  - Anxiety and phobia indications
  - Posttraumatic Stress Disorder
  - Obsessive-Compulsive Disorder
  - Psychosis
  - Antisocial Personality Disorder
  - Paranoid Personality Disorder
  - Schizoid Personality Disorder
  - Borderline Personality Disorder
  - Dependent Personality Disorder
  - Obsessive-compulsive Personality Disorder
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Have you ever felt you needed to cut down on your drinking or drinking more than you planned?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>11. (i) How many times during the last 12 months have you been drunk?</td>
<td>less than 1 time, 1-4 times, 5 or more times</td>
</tr>
<tr>
<td>12. (i) How many times during the last 12 months have you used tobacco?</td>
<td>less than 1 time, 1-4 times, 5 or more times</td>
</tr>
<tr>
<td>13. (i) How many times during the last 12 months have you used marijuana?</td>
<td>less than 1 time, 1-4 times, 5 or more times</td>
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<tr>
<td>14. (i) Have you ever had a drinking problem?</td>
<td>Yes, No</td>
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<tr>
<td>15. (i) Have you ever had a drinking problem?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>16. (i) Have you ever had a drinking problem?</td>
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<td>17. (i) Have you ever had a drinking problem?</td>
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<td>18. (i) Have you ever had a drinking problem?</td>
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<tr>
<td>19. (i) Have you ever had a drinking problem?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>20. (i) Have you ever had a drinking problem?</td>
<td>Yes, No</td>
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<tr>
<td>21. How many times during the last 12 months have you had a hangover?</td>
<td>less than 1 time, 1-4 times, 5 or more times</td>
</tr>
<tr>
<td>22. How many times during the last 12 months have you used illegal drugs?</td>
<td>less than 1 time, 1-4 times, 5 or more times</td>
</tr>
<tr>
<td>23. How many times during the last 12 months have you used prescription drugs?</td>
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</tr>
<tr>
<td>24. How many times during the last 12 months have you used non-prescription drugs?</td>
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<td>29. How many times during the last 12 months have you used prescription drugs?</td>
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<tr>
<td>30. How many times during the last 12 months have you used non-prescription drugs?</td>
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<td>31. How many times during the last 12 months have you used alcohol?</td>
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<tr>
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</table>

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CAAPE-5 ADMINISTRATIVE CONSIDERATIONS

- Time to complete
  - Interview 60 minutes or less
  - Editing-30 minutes.

- Clinician credentials: CADC

- WITS compatibility: Yes, as an upload

- Population suitable: Adults. Adolescent version exists and it is called the PADDI-5.

- Languages: English

- Other states using tool (not necessarily exclusively): Hawaii, North Carolina, and Florida.

- Training requirements: No formal training required; however, it is likely the State would organize something to measure competency.
### SIDE BY SIDE COMPARISONS

<table>
<thead>
<tr>
<th></th>
<th>ASAM Continuum</th>
<th>ASI</th>
<th>CAAPE-5</th>
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<tbody>
<tr>
<td>Time to complete:</td>
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<td>Interview 30-60 minutes Edits 30-60 minutes</td>
<td>Interview 60 minutes Edits 30 minutes</td>
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<td>Credentials to administer:</td>
<td>CADC or higher</td>
<td>CADC or higher</td>
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<tr>
<td>WITS compatibility:</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>ASAM and DSM 5 criteria:</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Population:</td>
<td>Adults-could possibly be adapted for adolescents</td>
<td>Adults and adolescents</td>
<td>Adults and adolescents</td>
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<tr>
<td>Language(s):</td>
<td>English-written for translation</td>
<td>English and Spanish</td>
<td>English</td>
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<tr>
<td>Training requirements:</td>
<td>Free online webinar or in person training for cost</td>
<td>No formal</td>
<td>No formal</td>
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</table>
CLOSING/NEXT STEPS

• Watch for email in the next week or so
• Follow-up electronic survey open until July 8th
• Feedback will be compiled and presented to partner agency leadership (IDOC, IDHW, IDJC, Courts, BPA Health)

THANK YOU!!