Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

LEADER FOCUS
Workshop 1

Treatment Planning M.A.T.R.S.:
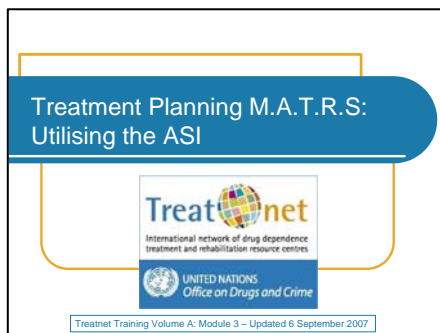**Utilizing the Addiction Severity Index (ASI) –**
Making Required Data Collection Useful

Workshop 1

EMPHASIS AREAS:

FOCUS

Training Goals and Objectives

How Do Practitioners View Treatment Planning: What Research Says

Who, What, When, and How of Treatment Planning

Addiction Severity Index (ASI) Applications in Treatment Planning

Training Package
- Copy of Presentation Slides
- ASI Instrument
- Recommended Readings
- Blank Master Problem List
- U.S. Addiction Technology Transfer Center (ATTC) Desk Reference
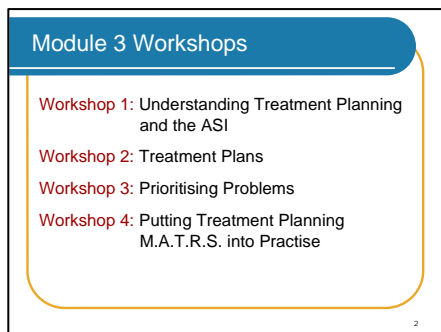
Training Development Sources
- U.S. Joint Commission on Accreditation of Healthcare Organizations (JACHO)
- U.S. Commission on Accreditation of Rehabilitation Facilities (CARF)
- U.S. Center for Substance Abuse Treatment's TAP 21: *Addiction Counsellor Competencies*
- U.S. Medicaid Regulations
- Addiction Severity Index (ASI)
- Other public domain resources and research

Note on LCD/Overhead Slides
The PowerPoint slides provided with this curriculum package may be customized to suit the trainer's needs and may be viewed on an LCD projector or converted to overhead transparencies.

Treatment Planning M.A.T.R.S:
Utilising the ASI

Treat☉net
International network of drug dependence
treatment and rehabilitation resource centres

UNITED NATIONS
Office on Drugs and Crime

Treatnet Training Volume A: Module 3 – Updated 6 September 2007

Overhead 1

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

Overhead 1

Treatment Planning M.A.T.R.S:
Utilising the ASI

Treat net
International network of drug dependence
treatment and rehabilitation resource centres

UNITED NATIONS
Office on Drugs and Crime

Treatnet Training Volume A: Module 3 – Updated 6 September 2007

Overhead 2

Module 3 Workshops

Workshop 1: Understanding Treatment Planning
and the ASI

Workshop 2: Treatment Plans

Workshop 3: Prioritising Problems

Workshop 4: Putting Treatment Planning
M.A.T.R.S. into Practise

2

LEADER(S) INTRODUCTION / WELCOME

Introduce Self
- Educational background
- Clinical experience
- Expertise in assessment and treatment planning
- Experience in administering and training on the ASI

Participant Introductions (if 10 or fewer participants)
- Participant name
- Agency affiliation
- Role
- Experience with assessment and treatment planning

Leader Notes:

The trainer opens the session by first introducing himself/herself to participants and providing background information to assert his or her credibility in this topic area. The trainer introduction may include educational background, clinical experience, expertise in assessment, treatment planning, and/or experience in administering the Addiction Severity Index (ASI) in clinical practice.

It is important to emphasise that treatment planning process guidelines have evolved over time with changes in state policy, federal regulations, and programme certification requirements. This training emphasises the process a practitioner may use to develop a treatment plan using ASI information.

The ASI (McLellan, Luborsky, Woody, & O'Brien, 1980) is the most widely used assessment tool in the field and has been shown to collect reliable and valid information. Other assessment tools often incorporate ASI domains and questions. For these reasons, the ASI is used as an example assessment throughout this training.

Module 3 training goals

1. Increase familiarity with treatment planning process
2. Increase understanding of guidelines and legal considerations in documenting client status
3. Increase skills in using the Addiction Severity Index (ASI) in developing treatment plans and documenting activities

3

Overhead 3

Leader Notes:

Review the goals of the Training

- To help participant become familiar with a simple approach to treatment Planning
- To understand why treatment planning is important
- To help participants become familiar with using standard assessment tools to develop treatment plans

Workshop 1: Understanding Treatment Planning and the ASI

Overhead 4

Leader Note:

Before starting the training, it is important to understand what treatment planning means.

- The training will start with an assessment of current knowledge
- The discussion will then move to the positives and negatives of treatment planning.

Pre-assessment

Please respond to the pre-assessment questions in your workbook.

(Your responses are strictly confidential.)

10 minutes

5

Overhead 5

Leader Notes:

- Hand out Pre-assessment Form
- Allow participants 10 minutes to complete the assessment
- Collect the assessment before proceeding with the rest of the training.

Workshop 1	Leader's Guide

Icebreaker

How do you define
treatment planning?

Overhead 6

Icebreaker:
In order to start the discussion, it is important to define the concept of treatment planning:

- ☐ Ask participants to define treatment planning.
- ☐ Remind participants that there are no right or wrong answers.
- ☐ Record the responses on a flip chart.

Icebreaker: The Good and the Bad

Overhead 7

Leader Notes:
Explain that we are going to talk about what people like and don't like about treatment planning, and to do that we will break into small groups.

The Good and the Bad

	Negative Aspects of Treatment Planning	Positive Aspects of Treatment Planning
1		
2		
3		
4		
5		

Overhead 8

Leader Notes:

- ☐ Divide participants into groups of 4-5 participants.
- ☐ Give each group flipchart paper and ask them to come up with 5 things that are negative about treatment planning and 4 things that are positive.

- ☑ If participants have difficulty defining **negative** aspects, suggest things like the following:
  - ▪ *Time consuming*
  - ▪ *More paperwork*
  - ▪ *Everyone's looks the same*

- ☑ If participants have difficulty defining **positive** aspects, suggesting things like the following:
  - ▪ *Sets goals*
  - ▪ *Helps define success in treatment*
  - ▪ *Insures provider and client commitment to goals*

Workshop 1	Leader's Guide

Workshop 1: Training objectives (1)

At the end of this workshop, you will be able to:

1. Use ASI information to develop individualised treatment plans
2. Identify characteristics of a programme-driven and an individualised treatment plan
3. Understand how individualised treatment plans help to keep people in treatment and lead to better outcomes   Continued

9

Overhead 9

Leader notes
> Review each of the training objectives.

Workshop 1: Training objectives (2)

At the end of this workshop, you will be able to:

4. Use Master Problem List (provided) to formulate treatment plans and develop:
   - Problem statements
   - Goals based on problem statements
   - Objectives based on goals
   - Interventions based on objectives
5. Practise writing documentation notes reflecting how treatment plan is progressing (or not progressing)

Overhead 10

Leader notes
> Review each of the training objectives.

What is <u>not</u> included in training

- Administering and scoring the ASI
- Administering any other standardised screening / assessment tool
- Training on clinical interviewing

11

Overhead 11

What is Not Included in This Training
- Administering or scoring the ASI or other standardized assessment/screening instruments is not the focus of this training.
- Training is focused on the process of treatment planning rather than on clinical interviewing skills.

Leader Note:
> There are no prerequisite skill requirements for this training (e.g., to be trained in ASI administration). However, it is helpful to be familiar with the ASI.
> A sample ASI Narrative and Problem List will be provided.

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

The goal of this training is…

To bring together the assessment and treatment planning processes

12

Overhead 12

The Goal of this Training is to bring together the processes of assessment and treatment planning
- By focusing on using the ASI in the treatment planning processes, the treatment plan serves as a real guide to service delivery.

A 2003 report, *Can the National Addiction Treatment Infrastructure Support the Public's Demand for Quality Care?* **documents the substance abuse treatment field's general frustration with paperwork**:
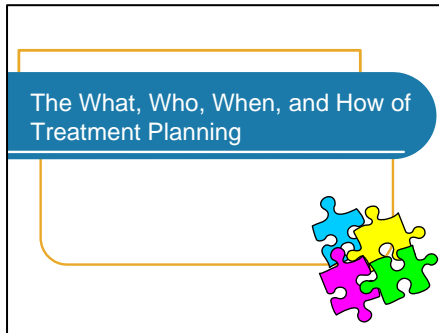- "Treatment programmes are choking on data collection requirements . . . almost none of the data collected were used in clinical decision-making or programme planning—it was just paperwork" (McLellan, Carise, & Kleber, 2003, p. 120).

Treatment plans are often. . .

"Meaningless & time consuming."

"Same plan, different names."

"Ignored."

13

Overhead 13
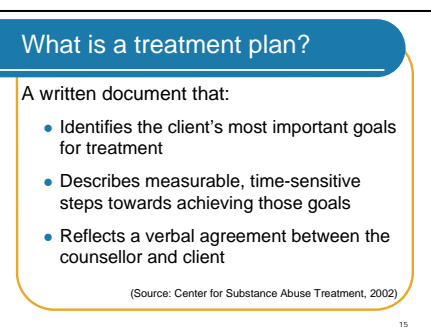
Frequently Heard Comments About Treatment Plans
- *They're meaningless and time consuming.*
- *They're never seen again or ignored in the treatment process.*
- *I copy the same form and just change the name at the top of the form.*
- *All our clients go through the same programme, so they have the same plan.*

Leader Note:
- Emphasise that supervisors often have not trained counsellors to use the assessment in the treatment planning process.
- Counsellors are practising what they have been trained to do.
- This training is an introduction to new methods of individualising treatment plans.

Workshop 1	Leader's Guide

The What, Who, When, and How of Treatment Planning

Overhead 14

What, Who, When, and How of Treatment Planning

What is a treatment plan?

A written document that:

- Identifies the client's most important goals for treatment
- Describes measurable, time-sensitive steps towards achieving those goals
- Reflects a verbal agreement between the counsellor and client

(Source: Center for Substance Abuse Treatment, 2002)

15

Overhead 15

What is Treatment Planning?
Treatment planning is a collaborative process in which a team of professionals and the client develop a written document that:

- Identifies important client treatment goals.
- Describes measurable, time-sensitive action steps towards achieving those goals.
- Reflects the verbal agreement between the counsellor and client.

Leader Note:
> There will be more focus on **problems**, **goals**, and **action-step** components of the treatment plan later in the training.

Who develops the treatment plan?

Client works with treatment providers to identify and agree on treatment goals and identify strategies for achieving them.

16

Overhead 16

Who Develops the Treatment Plan?
The client partners with treatment providers (ideally a multidisciplinary team) to identify and agree on treatment goals and identify the strategies for achieving them.

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

Who develops the treatment plan?

Client works with treatment providers to identify and agree on treatment goals and identify strategies for achieving them.

16

Overhead 16 (continued)

Why Involve the Client in Treatment Planning?

A key to a successful treatment plan includes the client:

- Understanding the treatment care instructions
- Being allowed to give feedback to the counsellor
- Stating other specific problems, goals, or needs he/she may have.

It is simply not enough to provide the client with a copy of her/his plan.

When is the treatment plan developed?

- At the time of admission
- And continually updated and revised throughout treatment

17

Overhead 17

When is the Treatment Plan Developed?

- It is developed at the time of admission.
- An agency may require a preliminary treatment plan at admission, followed by a comprehensive treatment plan shortly thereafter.
- The plan is continually updated and revised throughout treatment.
- Timing of revisions is guided by regulatory and credentialing requirements.

How does assessment guide treatment planning?

- The Addiction Severity Index (ASI), for example, identifies client needs or problems by using a semi-structured interview format
- The ASI guides delivery of services that the client needs

18

Overhead 18

How Does the Assessment (ASI) Guide the Treatment Plan?

- The ASI identifies the client's needs or problems using a semi-structured interview format. (Both closed- and open-ended questions are asked.)
- The treatment plan guides the delivery of services for those problems by establishing goals to address them.

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

How does assessment guide treatment planning?

- Treatment goals address those problems identified by the assessment

- Then, the treatment plan guides the delivery of services needed

19

Overhead 19

Assessment Guides the Treatment Plan (continued)
- Treatment goals are established to address problems identified by the ASI and other assessment information.
- The treatment plan objectives and interventions further map the course of treatment for both the counsellor and the client.

What is the ASI?

- A reliable and valid instrument, widely used both nationally and internationally
- Conducted in a semi-structured interview format
- Can be effectively integrated into clinical care

(Sources: Cacciola et al., 1999; Carise et al., 2004; Kosten et al., 1987; McLellan et al., 1980; 1985; 1992)

20

Overhead 20

What is the ASI?
The ASI is one of the most reliable and valid measurements of the nature and severity of client problems:
- Has been tested and retested over time.
- Has been studied in "real world" settings.
- Information can be effectively integrated into clinical care.

(Cacciola, Koppenhaver, McKay, & Alterman, 1999; Carise, Gurel, Kendig, & McLellan, 2004; Kosten, Rounsaville, & Kleber, 1987; McLellan et al., 1980; 1985; 1992)

What is the ASI?

Identifies 7 potential problem areas:
1. **Medical status**
2. **Employment and support**
3. **Drug use**
4. **Alcohol use**
5. **Legal status**
6. **Family/social status**
7. **Psychiatric status**

21

Overhead 21

ASI Identifies 7 Potential Problem Areas
- Clients are asked a series of questions in 7 potential problem areas:

1. Medical status
2. Employment and support
3. Drug use
4. Alcohol use
5. Legal status
6. Family/social status
7. Psychiatric status

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

What is the ASI?

Identifies 7 potential problem areas:
1. **Medical status**
2. **Employment and support**
3. **Drug use**
4. **Alcohol use**
5. **Legal status**
6. **Family/social status**
7. **Psychiatric status**

21

Overhead 21 (continued)

Leader Note:
> The ASI is not all encompassing.
>
> Questions are not asked about homelessness or pregnancy, for example, which may be central to the client.
>
> Rather, the ASI provides a baseline for all counsellors to ask the same questions (reliability), and additional questions can be tailored for the client.
>
> Using a standardized instrument (ASI) can "level the playing field" by building consistency between agencies and counsellors.

The ASI is NOT…

- A personality test
- A medical test
- A projective test such as the Rorschach Inkblot Test
- A tool that gives you a diagnosis

22

Overhead 22

What the ASI is NOT

- The ASI is not a personality or medical test.
- It is not a projective test such as the Rorschach Inkblot Test.
- Findings from the ASI do not lead to a diagnosis of substance abuse or dependence.

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

Overhead 23

Why Use the ASI?
- Clinical applications
- Evaluation uses

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

Recent developments

- Efforts focused on making the ASI more useful for clinical work
  - (Example: Using ASI for treatment planning)
- The Drug Evaluation Network System (DENS) Software uses ASI information to create a clinical narrative

24

Overhead 24

ASI is now <u>more</u> clinically useful!

New and Improved DENS Software (2005)

Uses ASI information to define possible problem lists and prompt and guide clinician in developing a treatment plan.

25

Overhead 25

Recent Developments

- ☐ Based on clinician feedback, efforts are underway to make the ASI more clinically useful. For example, this training is one of those efforts to make the ASI useful by bringing ASI information to treatment planning.
- ☐ The U.S. Drug Evaluation Network System (DENS) software was developed to make the ASI easier to administer and document.
- ☐ The DENS takes the ASI information and creates a clinical narrative.

Notes:
The DENS is a software, not an alternative to interviewing using the ASI.

ASI Now More Clinically Useful!

- ☐ The DENS now includes treatment planning software.
- ☐ The purpose in using the software is to prompt and guide clinicians in developing and writing an actual individualized treatment plan!
- ☐ The software has a documentation function:
  - ☑ It tracks completed goals and objectives.
  - ☑ It allows addition of new problems, goals, objectives, and interventions.

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

Clinical application

Why use the ASI?
- Uses a semi-structured interview to gather information a clinician generally collects during assessment
- Shown to be an accurate or valid measure of the nature and severity of client problems

(Sources: Kosten et al., 1987; McLellan et al., 1980; 1985; 1992)

26

Overhead 26

Clinical Application
- The semi-structured interview format allows the counsellor to gather required information.
- The ASI has been proven reliable and valid (Kosten et al., 1987; McLellan et al., 1980; 1985; 1992).
  - ☑ "Reliability" is how well the questions consistently give you accurate information.
  - ☑ "Validity" means that the questions assess what you intended to assess.
- How the clinician asks questions makes a difference.
  - ☑ Example of a vague clinical question: "Are you depressed?"
  - ☑ Example of a more specific clinical question: "Do you feel hopeless, have less energy, or have difficulty concentrating?"

Clinical application

Why use the ASI?
- Prompts clinician to focus session on important problems, goals, and objectives
- Basis for reviews of progress during treatment and documentation
- Basis for discharge plan

27

Overhead 27

Clinical Application
- Helps the client and counsellor identify problems and agree on goals, objectives, and interventions.
- Useful in justifying need for services.
  - ☑ Example: service authorization/approval for a particular level of care
- Provides information useful in justifying need for continued services.
- Gives basis for documentation and discharge planning.

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

Clinical application

Why use the ASI?

NIDA Principle 3:

"To be effective, treatment must address the individual's drug use and any associated medical, psychological, social, vocational, and legal problems."
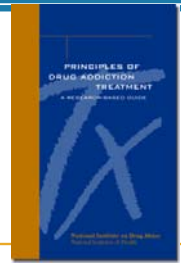
The ASI assesses all these dimensions.

28

Overhead 28

Clinical application

29

Overhead 29

Clinical application

Clinical use of ASI improves rapport

". . . If patients' problems are accurately assessed, they may feel 'heard' by their counsellor, potentially leading to the development of rapport and even a stronger helping alliance."

(Sources: Barber et al., 1999, 2001; Luborsky et al., 1986, 1996)

30

Overhead 30

Clinical Application

- The U.S. National Institute on Drug Abuse (NIDA) has outlined a variety of specifically based approaches to drug addiction treatment in *Principles of Drug Addiction Treatment: A Research-Based Guide*.
- The third principle states, "To be effective, treatment must address the individual's drug use and any associated medical, psychological, social, vocational, and legal problems" (NIDA, 1999, p. 1).
- The ASI assesses all these dimensions.

Clinical Application

Research Shows Clinical Use of ASI Improves Rapport
Studies have indicated client retention improves when a client's problem is accurately assessed and when the client feels "heard" by the counsellor (Barber et al., 1999, 2001; Luborsky et al., 1986, 1996).

Treatment Planning M.A.T.R.S.: Utilizing the Addiction Severity Index (ASI) –
Making Required Data Collection Useful

| Workshop 1 | Leader's Guide |

Overhead 31

Clinical Application

Research Supports Treatment Planning
- Retention in treatment improves when services are matched to a client's problems.
- Clients "whose problems are identified at admission and then receive services that are matched to those problems, stay in treatment longer."

(Carise et al., 2004; Hser, Polinsky, Maglione, & Anglin, 1999; Kosten et al., 1987; McLellan et al., 1999)

Leader Note:
Remember, the treatment plan is an active document that:
- Guides the delivery of services.
- Is continually updated and revised throughout treatment.
- Gives the counsellor and client a way to see if progress is made.

Workshop 1	Leader's Guide

Evaluation uses

For Programme Directors
- Identifies types of client problems not addressed through the programme's treatment services
- Quantifies client problems
- Identifies trends over time

Continued

32

Overhead 32

Evaluation uses

For Programme Directors
- Assists with level-of-care choices
- Provides measure of programme success
- Documents unmet client service needs
- Includes data needed for reports to various stakeholders

Continued

33

Overhead 33

ASI Evaluation Uses for Programme Directors
- ☐ Identifies types of client problems not addressed by in-house services.
- ☐ Quantifies the severity of client problems.
  - ☑ Example: 80% of clients in the residential programme rated their need for treatment as considerable.
- ☐ Identifies trends in client problems or needs over time.
  - ☑ Example: A director might ask, "Do I need to add a parenting class or a hepatitis C educational group to this treatment programme?"
  - ☑ The ASI data can help answer that question.

Clinical Example:
Most counsellors cannot answer the question "What is your programme success rate?" Typically, this is more important to programme administrators. Frontline staff, however, are the individuals who usually collect the data to answer that question. Frontline staff are also concerned that their clients get the best care. ASI information can be used to answer these questions (i.e., success rate and client care).

Being able to answer these questions helps to establish more credibility in the profession and promotes job security.

Evaluation Uses for Programme Directors
- ☐ Assists with level-of-care choices.
- ☐ Provides quantifiable measures of programme success.
  - ☑ Example: A programme director may look at the severity of client problems at the time of admission and then compare problem severity levels at time of discharge.
  - ☑ Example: A programme director may also look at the number of days clients were troubled by psychiatric problems.
- ☐ Documents unmet client service needs.
- ☐ Includes data needed for reports.

Workshop 1	Leader's Guide

Evaluation uses

For Programme Directors

- Positions programmes for increased funding though participation in clinical trials and other research opportunities

34

Overhead 34

Evaluation Uses for Programme Directors

- By providing standardised accepted baseline data, the ASI can help programmes be more eligible for various research opportunities.
- Using the ASI also positions programmes for increased funding through participation in clinical trials and research opportunities.

Evaluation uses

For Clinical Supervisors

ASI data can be used to

- Identify counsellor strengths and training needs
- Match clients to counsellor strengths
- Identify trends in client problems

35

Overhead 35

Evaluation Uses for Clinical Supervisors

- If automated, the ASI data can be used to:
  - ☑ Identify counsellor strengths and training needs.
  - ☑ Assist in matching client to counsellor strengths.
  - ☑ Identify trends in client problems.