

Patient Placement Criteria Checklist - Kentucky Edition 2012

Based upon ASAM Adult Patient Placement Criteria-Second Edition Revised

Client Name: _____ Date: _____ Case Number _____

Directions: Rate the client or patient on each of the six Dimensions first and then analyze for Level of Care; emergency needs come first, then the least intensive LOC that is safe and can effectively help client reach goals.

ASAM-PPC Levels and Services	Level of Care I	Level of Care II.1	Level of Care III.1	Level of Care III.3	Level of Care III.5	Level of Care IV
Service Levels:	OUTPATIENT <i>(Less than 6 weekly service hours. Includes Medication Assisted Treatments/MAT*)</i>	INTENSIVE OUTPATIENT <i>(6 to 20 service hours per week. Can be combined with housing and supports to be level III care.)</i>	TRANSITIONAL <i>(including sober living facility with 5+ hours of clinical services per week)</i>	RECOVERY CENTER <i>(Staffed by peers and may include credentialed or non-credentialed staff rather than clinically managed.)</i>	RESIDENTIAL TREATMENT <i>(Clinically managed. Includes licensed short or long term rehabilitation unit, crisis stabilization unit, licensed detox unit)</i>	INPATIENT HOSPITAL <i>(Including medical detoxification and inpatient psychiatric units)</i>
<i>Admission specifications for each Level of Care:</i>	<i>Meets all Dimensions below at this level (if not, consider a higher level of care)</i>	<i>Meets Dimensions 1,2 & 3 at this level (if applicable), and one of Dimensions 4,5, or 6 at this level</i>	<i>Meets all Dimensions below at this level; has completed services for acute symptoms</i>	<i>Meets all Dimensions below at this level plus meets the criteria for a Substance Dependence Disorder</i>	<i>Meets all Dimensions at this level plus meets criteria for a Substance Dependence Disorder</i>	<i>Meets one of Dimensions 1, 2, or 3; plus meets criteria for a Substance Dependence Disorder or severe mental disorder</i>
Dimension 1: Acute Intoxication and/or Withdrawal Potential	No withdrawal needs or needs can be safely managed at this level, such as with MAT. <input type="checkbox"/>	No withdrawal needs or needs can be safely managed at this level. <input type="checkbox"/>	No signs or symptoms of withdrawal <input type="checkbox"/>	If present, minimal risk of severe withdrawal that can be managed at a social setting intake level with no medication support <input type="checkbox"/>	If present, mild to moderate risk of severe withdrawal that can be managed at a social setting detox level with possible medication support <input type="checkbox"/>	High risk of severe withdrawal which cannot be managed in a social-setting detox <input type="checkbox"/>
Dimension 2: Biomedical Conditions and Complications	None or sufficiently stable <input type="checkbox"/>	If present, stable or receiving concurrent medical attention that will not interfere with treatment. <input type="checkbox"/>	If present, stable and no medical monitoring needed, or can be monitored by outside provider. <input type="checkbox"/>	If present, stable and can self-administer meds or able to obtain medical supports from outside provider <input type="checkbox"/>	If present, stable and can self-administer meds or severe enough to warrant medical monitoring but not in need of inpatient treatment. May include pregnancy. <input type="checkbox"/>	Severe enough to warrant inpatient medical care <input type="checkbox"/>
Dimension 3: Emotional, Behavioral or Cognitive Conditions and Complications	None or very stable (cognitively able to participate and no risk of harm) <input type="checkbox"/>	If present, mild severity responds to outpatient monitoring to minimize distractions from recovery; can receive concurrent COD services. <input type="checkbox"/>	If present, stable, or if distracting, can respond to the level of 24-hour structure in this program; can receive concurrent COD services. <input type="checkbox"/>	If present, mild to moderate severity: needs structure to focus on recovery. Could be referred out to MH services. If stable a DDC** program is appropriate. If not a DDE*** program is required. <input type="checkbox"/>	If present, mild to moderate severity needing a 24-hour structured setting; repeated inability to control impulses; personality disorder requires high structure to shape behavior. Needs counseling/therapy. If stable a DDC** program is appropriate. If not a DDE*** program is required. <input type="checkbox"/>	Severity of mental disorder requires medical monitoring, such as for danger to self or others <input type="checkbox"/>

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	Level of Care I	Level of Care II.1	Level of Care III.1	Level of Care III.3	Level of Care III.5	Level of Care IV
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Dimension 4: Readiness to Change	Willing to cooperate or is ambivalent and needs motivation, recovery support, and monitoring strategies <input type="checkbox"/>	Resistance is high enough to require structured program, but not so high as to render outpatient treatment ineffective. <input type="checkbox"/>	Ready to change and cooperate at this level, or externalizes problems and needs this level of structure, motivation and support. <input type="checkbox"/>	Has little awareness & needs interventions available only at this level to engage & stay in recovery. May have external leverage to support participation. <input type="checkbox"/>	Has marked difficulty with or opposition to treatment, with dangerous consequences; or there is high severity in this dimension but not others. The client therefore needs a motivational enhancement program with 24 hour structure. <input type="checkbox"/>	
Dimension 5: Relapse, Continued Use or Continued Problem Potential	Able to maintain abstinence and recovery goals or achieve awareness of a substance use problem with minimal support <input type="checkbox"/>	Intensification of symptoms despite active participation in Outpatient, or high likelihood of relapse without close monitoring and support <input type="checkbox"/>	Client is at high risk for imminent relapse with dangerous consequences. Client needs 24-hour structure and support or needs this support to transition into community. <input type="checkbox"/>	Has little awareness & needs intervention available only at this level to prevent continued use, with dangerous consequences to self or others. Does not recognize triggers, unable to control use, in danger of relapse without close 24-hour monitoring and structure. <input type="checkbox"/>	Has little awareness & needs intervention available only at this level to prevent continued use, with dangerous consequences to self or others. Does not recognize triggers, unable to control use, in danger of relapse without close 24-hour monitoring and structure. <input type="checkbox"/>	
Dimension 6: Recovery Environment	Supportive recovery environment or willingness to obtain such or supports need professional interventions. <input type="checkbox"/>	Lacks social contacts or social contacts aren't conducive to recovery, but with structure or support, the patient can cope <input type="checkbox"/>	Has a using, unsupportive, dangerous, or victimizing social network, or lacks a social network, requiring this level of 24-hour support. <input type="checkbox"/>	Homelessness or lack of safe, supportive recovery environment and client needs 24-hour structure to learn to cope. <input type="checkbox"/>	Environment is dangerous or unsupportive of recovery and client lacks skills to cope outside of highly structured 24-hour setting. <input type="checkbox"/>	

* Medication Assisted Treatments (MAT) can occur at any level of care and includes methadone, buprenorphine, and medications to control cravings and withdrawal when other criteria are met for level of care. Methadone and Suboxone clinics are generally outpatient, but clients on MAT may sometimes need a higher level of care.

**DDC: Dual Diagnosis Capable Program - has a primary target population of individuals with substance related disorders but also has an expectation and willingness to treat individuals with co-occurring mental health conditions, in-house or by referral to concurrent mental health services.

***DDE: Dual Diagnosis Enhanced Program – the program has the combined capacity to treat both mental health and substance related disorders equally.

Rater's Signature: _____