Facility

POLICY and PROCEDURE

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| ***Title:******Residents with Substance Use Disorders*** | | | |
| ***Issued By:*** | | | |
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The facility Interdisciplinary Team will assess residents on admission to identify residents that may have a history of, or active diagnosis of substance use disorder. Residents that have a substance use disorder will be provided with the necessary services including education and assistance with resources to provide support and treatment. The Interdisciplinary Team in conjunction with the resident’s goals will develop a plan of care to promote wellness and to safeguard the resident. The IDT team will be qualified and demonstrate the competencies and skills necessary to provide appropriate services to the resident with a Substance Abuse Disorder.

**“Substance use disorder”**(“SUD”) is defined as recurrent use of alcohol and/or drugs that causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.

Policy:

1. On admission the IDT will review medical records to identify any history of substance use disorder.
2. The resident/representative will be interviewed by Social Service to identify any past/present history of substance use disorder to include but not limited to;

* Alcohol Abuse
* Marijuana/Cannabis
* Opioid Abuse
* Cocaine, Heroin, Amphetamine, and/or other illicit drug usage

1. The IDT will attempt to identify the resident’s current understanding of substance use disorder, whether the substance use disorder is a past history or active, and his/her willingness/desire to accept treatment.
2. The IDT will identify the resident’s goals with respect to his/her substance abuse disorder and provide necessary education and support to maintain wellness.
3. The IDT will develop a comprehensive care plan to address the resident’s history of substance use disorder to include:

* Elopement risk assessment
* Medical management of any signs of active withdrawal
* The potential need for increased monitoring
* The need for regular room inspections
* The need for package delivery inspection
* The need for supervised visitation
* Individual Psychological counseling services
* Access to group counseling if indicated including community Support services available such as Medication Assisted Treatment programs, Narcotic Anonymous and Alcoholic Anonymous
* The need for voluntary drug testing if indicated
* Psychiatry Consult if indicated

1. Staff members will be provided with education on orientation and annually on the signs, symptoms of a drug overdose including:

* Changes in behavior
* Drowsiness
* Lack of coordination
* Slurred speech
* Mood changes
* Unsteady gait
* Loss of consciousness

1. Nursing staff will be trained in responding to residents that display signs/symptoms of opioid overdose to include: *(Refer to Policy Recognition and treatment of Opioid Overdose)*
2. Nursing staff will be trained on orientation, annually and as needed about behaviors that residents with substance use disorders may display, and the therapeutic responses to these behaviors.
3. Residents that display symptoms of active substance use after receiving visitors will be reviewed by the IDT to determine visitor restriction, inspection of visitor’s packages/belongings, and/or Supervised Visitation.
4. Residents that display symptoms of active substance use after returning from OOP will be reviewed with the resident/resident representative and IDT Team to determine if going OOP is in the best interest of the resident.
5. When a resident is suspected of substance use, the PMD will review and revise the resident’s current medication regimen in-order to mitigate the potential for adverse event(s) related to the substance abuse and medications being administered.
6. Visitors that display symptoms of active substance abuse will be prohibited from visiting residents in the facility.
7. In an effort to safeguard residents from hazards, the facility will obtain consent from resident/representative for staff searches of a resident’s body and/or personal belongings related to the use of illicit drugs or alcohol as indicated.
8. In instances when the facility suspects or determines illegal substances have been brought into the facility by a visitor, or resident, the facility will contact the local law the enforcement for assistance.
9. Discharge Planning for residents with a history of substance use disorder will include specific information regarding resources and contacts in the community that will provide them with assistance and support.
10. The facility will review any issues related to residents with substance use disorders during Quarterly Quality Improvement Meetings and as needed, to determine the need for additional training and/or resources to safeguard all residents.

Substance Abuse and Mental Health Services Administration (SAMHSA). “Mental Health and Substance Use Disorders.” Accessed March 2, 2021. <https://www.samhsa.gov/find-help/disorders>.

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**GUIDANCE §483.40**