



Co-occurring disorders Integrated Dual Disorders Treatment (IDDT)

Introducing.....IDDT in the News! A brief history of IDDT in Missouri

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In an effort to support integrated treatment for those with mental illness and substance use disorders, criteria and billing codes were established to enable Community Psychiatric Rehabilitation programs to better serve this population. The required model for this service was Integrated Dual Diagnosis Treatment (IDDT), now referenced by SAMHSA as Integrated Treatment for Co-occurring Disorders, but still commonly called IDDT. Although this model is an implementation model using fidelity ratings and a continuous quality improvement process, CPR programs were asked to meet certain requirements to be eligible for contract amendments that would allow access to newly established co-occurring services and billing codes. In 2007, Dr. Joseph Parks, issued a letter calling for agencies to submit a letter of intent along with supporting documentation to demonstrate that their program met the minimal requirements. A number of agencies submitted proposals

for approval to provide IDDT services. Beginning in 2008 these programs were initially evaluated for fidelity to the original Co-occurring model taken from the SAMHSA Center for Mental Health Services IDDT Toolkit. Shortly thereafter, the Missouri Institute for Mental Health began conducting fidelity reviews as part of a larger systems project lead by Missouri Foundation for Health. The Department of Mental Health accepted these fidelity reviews in place of reviews conducted by the department. In 2012, at the conclusion of the Missouri Foundation for Health project, the DMH evaluation team was reinstated with a mission not only to continue evaluation of fidelity to the IDDT model but to provide technical assistance and education to IDDT providers.

Co-occurring disorders treatment continues to be a significant part of providing mental health and substance use treatment within CMHCs.

A number of treatment approaches related to IDDT have emerged and been adopted as viable treatment for co-occurring clients. These include Motivational Interviewing, Stage-Wise Treatment, Cognitive Behavioral Counseling, Group Interventions, Social Skills training, promotion of community self-help groups, Supported Employment, Psychopharmacology, Supported Housing and Family Psycho-education. Each of these approaches are the framework making up the full IDDT program. As research has shown, the more closely the model is followed, the better outcomes are for clients. High fidelity programs have larger numbers of clients in true recovery and achieving their goals. They are gaining independence; improving their lives through work, social connection, education and a feeling of purpose and control.

The hope of this newsletter is to educate, inform, aid and even entertain those with a passion for IDDT treatment.



Fidelity Facet

Research shows that psychotropic medications are effective in treating serious mental illnesses including consumers who have active substance use problems. Access to such medications, including antipsychotics, mood stabilizers and antidepressants, is critical

to effectively treat serious mental illnesses. Does your IDDT prescriber use psychiatric medications despite active substance use? Does he/she work closely with consumers and the IDDT team members? Does the prescriber focus on increasing adher-

ence? Are addictive medications, such as benzodiazepines, avoided? Are medications that reduce addictive behaviors offered, such as Clozapine, Naltrexone, or Disulfiram? If you answered yes to all of these, you may rate a perfect fidelity score in this area.

IDDT Resources



SAMHSA Toolkit for integrated treatment for co-occurring disorders

<http://store.samhsa.gov/product/Integrated-Treatment-for-Co-Occurring-Disorders-Evidence-Based-Practices-EBP-KIT/SMA08-4367>

DMH Web link for information on the original rollout of IDDT in Missouri

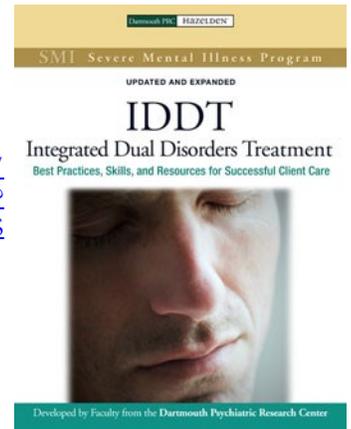
<http://dmh.mo.gov/mentalillness/provider/integratedtrmt.htm>

Missouri Substance Abuse Professional Credentialing Board

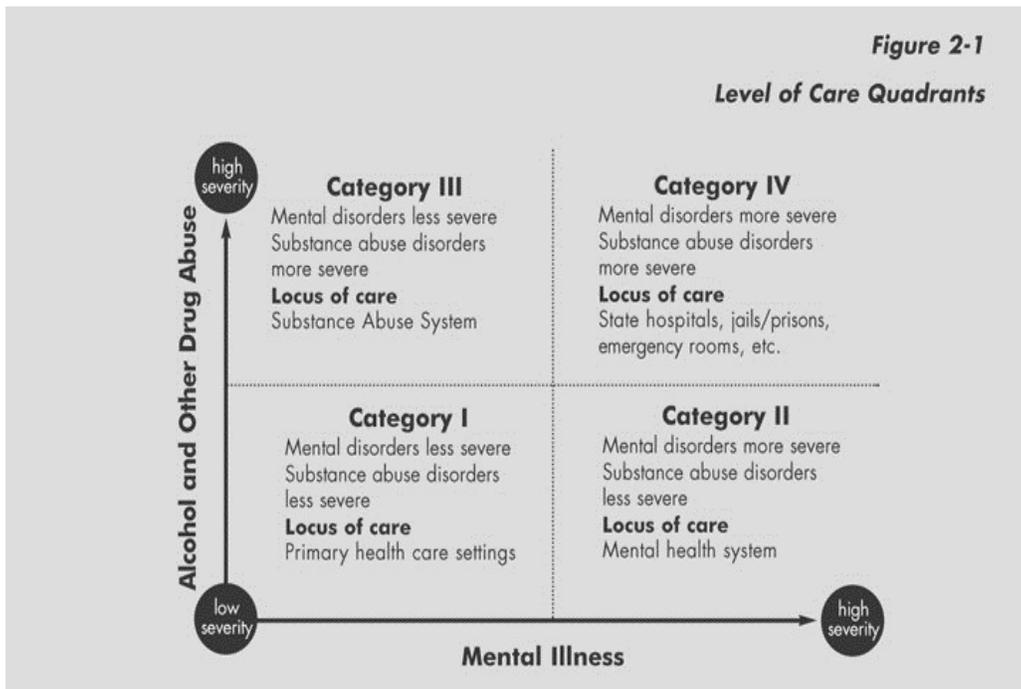
www.msapcb.com

Hazelden Integrated Dual Disorders Treatment Curriculum

http://www.hazelden.org/OA_HTML/ibeCCtpItnDspRte.jsp?item=120103&sitex=10020:22372:US



Level of Care Quadrants for co-occurring treatment management



From: 2 Definitions, Terms, and Classification Systems for Co-Occurring Disorders; Substance Abuse Treatment for Persons With Co-Occurring Disorders.—Treatment Improvement Protocol (TIP) Series, No. 42.. Center for Substance Abuse Treatment. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2005. Copyright Notice: <http://www.ncbi.nlm.nih.gov/books/about/copyright/>. NCBI Bookshelf. A service of the National Library of Medicine, National Institutes of Health.

IDDT Specialist Qualifications

9 CSR 30-4.0431(5)(A)5.

A qualified substance abuse professional defined as a person who demonstrates substantial knowledge and skill regarding substance abuse by being one (1) of the following:

A. A physician or qualified mental health professional who is licensed in Missouri

with at least one (1) year of full-time experience in the treatment of persons with substance use disorders; or

B. A person who is certified or registered as a substance abuse professional by the Missouri Substance Abuse Counselor's Certification Board, Incorporated.



A **QSAP** is one of the following:

A licensed (or provisionally licensed) QMHP with one year of full time experience in substance use treatment. If an individual has less than one year of experience in Integrated Treatment (IT), they must be actively acquiring 24 hours of training in IT specific content and receive supervision (could be via phone under contract) from experienced IT staff. The 24 hours of training in IDDT specific content can include, but not limited to:

- Co-occurring mental health and substance use disorders
- Motivational interviewing
- Stage-wise treatment interventions
- Addictions treatment
- Relapse prevention
- Cognitive behavioral treatment

OR

A person who is certified or registered (not recognized) as a substance abuse professional by the Missouri Substance Abuse Counselor's Certification Board. Further clarification of credentials includes:

Qualified Substance Abuse Professional Credentials:

CCDP - Co-Occurring Disorders Professional

CCDP-D - Co-Occurring Disorders Professional - Diplomate

CCJP - Certified Criminal Justice Addictions Professional

CADC - Certified Alcohol Drug Counselor

CRADC - Certified Reciprocal Alcohol Drug Counselor

CRAADC - Certified Reciprocal Advanced Alcohol Drug Counselor

RSAP-P - Registered Substance Abuse Professional – Provisional

The below credentials are NOT Qualified to provide the Co-Occurring Counseling or Supplemental Assessment (Not a QSAP):

RASAC I - Recognized Associate Substance Abuse Counselor I

RASAC II - Recognized Associate Substance Abuse Counselor II

There is no application to be a QSAP, just as there is no application to be a QMHP. The person in the position just needs to meet the above criteria as evidenced by documentation in their personnel file. The original language - "co-occurring counselor competency requirements established by the Department of Mental Health"- was used as a placeholder for the co-occurring credential that did not yet exist.

“FIDELITY”

1. strict observance of promises, duties, etc.: *a servant’s fidelity*. 2. loyalty: *fidelity to one’s country*. 3. conjugal faithfulness. 4. adherence to fact or detail. 5. accuracy; exactness: *The speech was transcribed with great fidelity*.



IDDT TEAM FEATURE

SUBMITTED BY LORI BYL, Director of Adult CPRP & Employment Services

Tri-County Mental Health Services

Missouri Integrated Treatment Team for Co-Occurring Disorders: Tri-County Mental Health Services

Tri-County Mental Health Services first implemented IDDT in 2007. The agency participated in Missouri’s COSIG (SAMHSA’s Co-Occurring State Incentive Grant) Phase II Project. Tri-County was 1 of 5 treatment sites in Missouri to participate. The initial process began with an on-site fidelity review by COSIG evaluators to gather information on current practices and services provided for consumers with co-occurring disorders. A baseline fidelity was established and Tri-County began receiving technical assistance for implementing and sustaining IDDT practices. Since that time, Tri-County has worked hard to sustain high levels of fidelity and continue to view IDDT as “best practice” for those consumers with a co-occurring disorder. Tri-County’s team truly provides integrated services and is comprised of: CSS’s who have received staged-based intervention training and motivational interviewing training, a housing specialist, two employment services specialists, a co-occurring individual therapist, Certified Peer Specialist, Healthcare Home staff, staff psychiatrist as well as the team’s Manager and Director. The team members of Tri-County’s integrated co-occurring team contribute their success to having a therapist with a specialty in co-occurring disorders who is available to problem solve complex situations and provide guidance, as well as learning the skills of “meeting a consumer where they are at.” Tri-County developed a curriculum for their team members which includes education on staged based treatment and interventions, motivational interviewing, and regularly review these consumers in treatment team with the staff psychiatrist. Lori Byl, Director of Adult CPRP and Employment Services states, “we have kept our integrated team relatively small as well as stayed true to the fidelity model. We have also learned that we must think creatively and “outside of the box” when working with our co-occurring consumers; we celebrate even the smallest of successes and have open discussions about the challenges/frustrations or barriers that may be interfering with our ability to provide interventions to our consumers who are dually diagnosed.”

Individuals with mental illness and active substance or alcohol use are less likely to achieve lasting sobriety. They may be more likely to experience severe complications of their substance use, to end up in legal trouble from their substance use and to become physically dependent on their substance of choice.



IDDT GROUP FEATURE SUBMITTED BY JODI GUSMAN, Director/Recovery Health Services

Truman MC IDDT Group

At Recovery Health Services (RHS), we have worked very diligently to provide a robust IDDT group program that allows our clients the ability to focus in on the areas of their life in which they hope to grow. At present, we offer 27 unique Groups that cover a wide variety of topics, from Motivational Interviewing focused groups for pre-contemplative and contemplative clients, to long-term therapy groups targeted at clients in the action and maintenance stages of change. We are constantly working to improve our group processes, which this year includes the addition of a clinician/facilitator rating system based on Motivational Interviewing assessment tools.

Two groups that capture the heart of our group program are “Forming Healthy Habits” and “Post Incarceration and Criminal Thinking.” Forming Healthy Habits targets clients that are in the preparation and action stages of change. It is taught by one of our Licensed Professional Counselors. He has created a curriculum that is largely based on the book “The Power of Habit” by Charles Duhigg, combined with CBT principles that together aim to assist clients with understanding how to use our thinking and behaviors to work for us in recovery and mental health. “Post Incarceration and Criminal Thinking” is geared at clients of all stages of change who are struggling with the adjustment to life outside of prison. This group looks at the specific challenges of Post Incarceration Syndrome as it impacts both mental health and substance abuse. This group is taught by a Recovery Coach, who does a great job of building a sense of rapport and community into this difficult subject matter.

Family Guidance—St. Joseph, MO

Team Leader—Melissa Gasper

IDDT Specialists—Ron Rankin, Alex Libby, Lori Eck

Serving 91 clients in the area! Welcome team!

Community Counseling Center—Cape Girardeau, MO

Team Leader—Rick Strait

IDDT Specialist—Sharon McGhee

Serving 36 clients in the area! Welcome team!





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Follow us on Twitter: [@MentalHealthMO](https://twitter.com/MentalHealthMO)

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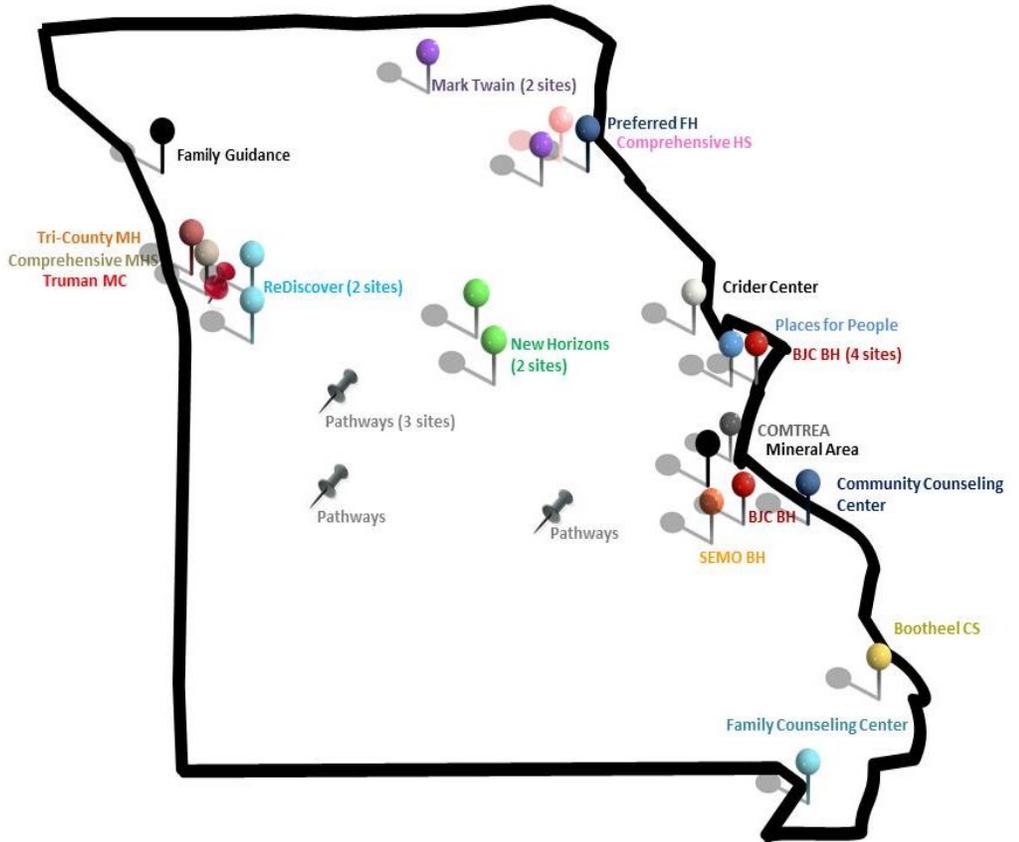
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Mineral Area Community Psychiatric Rehabilitation Center (MACPRC)

Missouri IDDT teams

COMPREHENSIVE Health Systems, Inc.
"for quality mental health care"

placesforpeople
Community Alternatives for Hope, Health and Recovery

BJC Behavioral Health

COMPREHENSIVE MENTAL HEALTH SERVICES, INC.

New Horizons
Community Support Services

Family Counseling Center, Inc.

BCS
Bootheel Counseling Services

Mark Twain Behavioral Health

BH

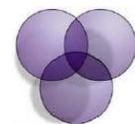
Crider HEALTH CENTER
Full, Productive, Healthy Lives for Everyone

Pathways
COMMUNITY HEALTH

ReDiscover
Help, Hope, and Healing

Southeast Missouri Behavioral Health

FAMILY GUIDANCE CENTER
for behavioral healthcare



COMTREA
Founded 1973

Preferred Family Healthcare

COMMUNITY COUNSELING CENTER

TRI-COUNTY MENTAL HEALTH SERVICES, INC.

TMC
TRUMAN MEDICAL CENTER
Behavioral Health