

**Integrated Dual Diagnosis Treatment  
Stagewise Treatment  
Assessment and Interventions**

Dartmouth Substance Abuse Treatment Scale	Evidence Based Interventions	Stage-Wise Activities for Case Managers	Activities to Avoid based on Stages of Treatment
<p><b>1. Pre-engagement.</b> The person does not have contact with case manager and meets criteria for substance abuse or dependence.</p> <p><b>2. Engagement.</b> The client has only irregular contact with assigned case manager, and meets criteria for substance abuse or dependence.</p> <p><b>GOAL: To establish a working alliance with a professional.</b></p>	<ul style="list-style-type: none"> <li>➤ Assertive outreach</li> <li>➤ Practical assistance</li> <li>➤ Crisis interventions</li> <li>➤ Build alliance</li> <li>➤ Assessment</li> <li>➤ Develop regular contact and a helpful relationship with client</li> <li>➤ Meet client where they are</li> <li>➤ Understand client's world and goal</li> <li>➤ Acceptance and empathy</li> <li>➤ Active and reflective listening</li> <li>➤ Offer honest hope</li> <li>➤ Reinforce honest communication about substance use or mental illness management</li> <li>➤ Create openings to discuss substance abuse</li> <li>➤ Ask permission o discuss substance abuse, respect any "no" or "don't want to talk about it" responses</li> <li>➤ Create recognition that things could be different</li> </ul>	<p><b>TASKS:</b></p> <ul style="list-style-type: none"> <li>➤ Regular meetings with consumer in the community (at least weekly)</li> <li>➤ Help consumer apply for benefits, obtain or improve housing, food, address legal needs</li> <li>➤ Facilitate admission to hospital and/detox if needed</li> <li>➤ Explore family relationships, engage them in treatment process if consumer desires</li> <li>➤ Review chart to understand history</li> </ul> <p><b>TOOLS:</b></p> <ul style="list-style-type: none"> <li>➤ Complete Strengths or Functional Assessment*</li> <li>➤ Complete Longitudinal Assessment</li> </ul>	<p><b>DO NOT:</b></p> <ul style="list-style-type: none"> <li>➤ Require abstinence</li> <li>➤ Start substance abuse treatment or groups</li> <li>➤ Confront substance use</li> <li>➤ Ignore substance use and/or mental illness</li> <li>➤ Punishing substance use</li> <li>➤ Don't start group work at this point</li> </ul>

\*indicates tool in "Integrated Treatment for Dual Disorders" by Kim T Mueser, Douglas L. Noordsy, Robert Drake & Lindy Fox  
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<p><b>3. Early Persuasion.</b> The client has regular contact with case manager, continues to use <u>the same amount of substances or has reduced substance use for less than 2 weeks</u>, and meets criteria for substance abuse or dependence.</p> <p><b>4. Persuasion.</b> The client has regular contact with case manager, <u>shows some evidence of reduction in use for the past 2-4 weeks (fewer substances, smaller quantities, or both)</u>, but still meets criteria for substance abuse or dependence.</p> <p><b>GOAL: To help the client view substance abuse as a problem that should be worked on.</b></p>	<ul style="list-style-type: none"> <li>➤ Ask permission to discuss substance use</li> <li>➤ Education about illness and substances</li> <li>➤ Set goals</li> <li>➤ Build awareness of problem</li> <li>➤ Assist in envisioning life without substances</li> <li>➤ Develop motivation to change using motivational interviewing techniques</li> <li>➤ Family support</li> <li>➤ Peer support</li> <li>➤ Assessment and treatment planning</li> <li>➤ Interventions can be individual and/or group</li> <li>➤ Help establish meaningful activities (work, school ,etc) in client's life</li> <li>➤ Work collaboratively with client in reducing use and setting reduction goals</li> </ul>	<p><b>TASKS:</b></p> <ul style="list-style-type: none"> <li>➤ Increase knowledge of substance use and mental illness*</li> <li>➤ Discuss the role of ambivalence in recovery</li> <li>➤ Encourage consumer to explore self-help groups</li> <li>➤ Offer DD groups (persuasion)</li> </ul> <p><b>TOOLS:</b></p> <ul style="list-style-type: none"> <li>➤ Time-line follow back calendar to assess past 7 months use*</li> <li>➤ Develop a list of supportive friends and family and practice reaching out to them</li> <li>➤ Complete a Contextual Analysis*</li> <li>➤ Complete/Update a Functional Analysis*</li> <li>➤ Complete a Payoff Matrix* &amp; Functional Assessment*</li> <li>➤ Complete a pro/con list regarding use</li> <li>➤ Pleasant Activities Worksheet*</li> </ul>	<p><b>DO NOT:</b></p> <ul style="list-style-type: none"> <li>➤ Require abstinence</li> <li>➤ Offer too much treatment too early (jumping to the action phase at the first mention of changing use)</li> <li>➤ Ignore substance use and/or mental illness</li> <li>➤ Require inpatient substance abuse treatment</li> </ul>
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<p><b>5. Early Active Treatment.</b> The client is engaged in treatment and has <u>reduced substance use for more than the past month</u>, but still meets criteria for substance abuse or dependence.</p> <p><b>6. Late Active Treatment.</b> The client is engaged in treatment and <u>has not met criteria for substance abuse or dependence for the past 1-5 months</u>.</p> <p><b>GOAL: To help the client decrease or stop substance use so that it is no longer a problem.</b></p>	<ul style="list-style-type: none"> <li>➤ Substance abuse counseling (individual and/or group)</li> <li>➤ Skills training</li> <li>➤ Community reinforcement; seek out work, school, church, clubs, volunteer opportunities</li> <li>➤ Self-help groups</li> <li>➤ Cognitive behavioral therapy</li> <li>➤ Motivational interventions</li> <li>➤ Begin relapse prevention work</li> <li>➤ Offer a menu of treatment options</li> <li>➤ Normalize relapse</li> </ul>	<p><b>TASKS:</b></p> <ul style="list-style-type: none"> <li>➤ Join consumer for new “sober” activities</li> <li>➤ Refer for Med evaluation to see if meds can help with reduced or no usage, cravings</li> <li>➤ Explore employment or education options</li> <li>➤ Help family and friends support consumer’s abstinence</li> <li>➤ Have consumer announce plans to stop using</li> <li>➤ Learn/practice relaxation techniques</li> <li>➤ Teach anger management skills</li> <li>➤ Develop list of triggers based on functional analysis, make a plan for each trigger</li> <li>➤ Develop/practice a plan for coping with cravings, high-risk situations, boredom, celebrations, etc...</li> <li>➤ Practice drink refusal skills with consumer</li> </ul> <p><b>TOOLS:</b></p> <ul style="list-style-type: none"> <li>➤ Problem-solving sheet*</li> <li>➤ Recovery Mountain worksheet*</li> <li>➤ Relapse Prevention Worksheets (SA &amp; MI*)</li> </ul>	<p><b>DO NOT:</b></p> <ul style="list-style-type: none"> <li>➤ Punish or ignore a slip or relapse</li> <li>➤ Express disappointment or judgment of a relapse or slip</li> <li>➤ Premature discharge</li> <li>➤ Overload consumer with goals/activities</li> </ul>
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<p><b>7. Relapse Prevention.</b> The client is engaged in treatment and <u>has not met criteria for substance abuse or dependence for the past 6-12 months.</u></p> <p><b>8. Remission or Recovery.</b> The client <u>has not met criteria for substance abuse or dependence for more than the past year.</u></p>	<ul style="list-style-type: none"> <li>➤ Relapse prevention planning for both diagnoses</li> <li>➤ Skills training</li> <li>➤ Self-help groups</li> <li>➤ Expand recovery to other areas of life</li> <li>➤ Interventions can be both individual and group with an emphasis on graduated disengagement</li> <li>➤ Be ready to intensify services as needed</li> <li>➤ Emphasize recovery as journey</li> <li>➤ Respond to slips or relapses proactively by revising relapse prevention plan, completing contextual analysis, etc.</li> </ul>	<p><b>TASKS:</b></p> <ul style="list-style-type: none"> <li>➤ Expand/reinforce sober lifestyle</li> <li>➤ Revise or update relapse prevention plan</li> <li>➤ Expand development of recovery in other areas of life(i.e. nutrient, exercise, work, relationships, living space, spirituality, living environment)</li> <li>➤ Groups</li> <li>➤ Normalize relapse</li> </ul> <p><b>TOOLS:</b></p> <ul style="list-style-type: none"> <li>➤ Recovery mountain worksheet*</li> <li>➤ Relapse Prevention Worksheets for SA and MI*</li> </ul>	<p><b>DO NOT:</b></p> <ul style="list-style-type: none"> <li>➤ View relapse as a treatment or professional failure</li> <li>➤ Shame the individual for having a slip or relapse</li> </ul>
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