

SOUTHWEST PAIN AND ADDICTION CENTER
POLICIES AND PROCEDURES

Table of Contents

1. Standard Assessment	1
A. Client history.....	1
B. Medical records and health history.....	1
C. Medical examination.....	2
D. Support strategies assessment for abnormal behavior.....	3
2. Intake	5
A. Intake criteria.....	5
B. Agreement for service.....	5
3. Treatment Planning	7
4. Discharge Planning	9
5. Consumer Progress	9

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1. Standard Assessment

- a) Southwest Pain and Addiction Center will conduct a confidential and free assessment process on all potential clients with a representative so as to determine an individual's eligibility for pain and addiction treatment or the type of care they will require.

A. Client history

- a) The nurse practitioner at Southwest Pain and Addiction Center will collect a history of the potential client's medications and disease history to fully comprehend each individual's needs so as to identify whether our treatment makes sense for the potential client. The following information will be collected, then reviewed by the physician:
 - i. The individual's treatment history, including the recent and current treatment notes and recommendations, psychological reports, and psychiatric reports;
 - ii. The impact of addiction or pain in the individual's life;
 - iii. Patterns of behavior and symptoms of the individual.
 - iv. Provider(s)' names currently providing treatment to the individual;
 - v. Provider(s)' names who have provided treatment to the individual in the past for the purpose of continuity of care;
 - vi. The client's background from diverse aspects, such as linguistic, racial, emotional, educational, and medical needs.

B. Medical records and health history

- a) Southwest Pain and Addiction Center will require a medical history from the potential client. The nurse practitioner shall include the potential client's medical history in their file. In addition, any results of medical treatment carried out at Southwest Pain and Addiction Center shall also be included in the potential client's

- b) file.
- c) The needed information shall be any medication prescribed by a qualified medical practitioner to make sure that the prescribed medical treatments are adhered to. Southwest Pain and Addiction Center shall also require any other information that may be necessary for efficient assessment and care of the potential client.
- d) Potential clients shall be required to produce all medical information within 3 hours after they have sought help at Southwest Pain and Addiction Center, including:
 - i. Medical history;
 - ii. Health card number, weight, height, and date of birth;
 - iii. Instructions for ongoing medications;
 - iv. Contact information for previous healthcare providers;
 - v. Current medication, including duration, frequency, purpose, and dosages;
 - vi. Medication history, including physical, emotional, or behavioral reactions to previous medications
 - vii. Psychological assessments;
 - viii. Allergies.
- e) The above information will be documented on the potential client's Fact Sheet, and if the information will not be available, a file notification will be generated.

C. Medical examination

- a) Southwest Pain and Addiction Center will make sure that each supported individual at Southwest Pain and Addiction Center will be given medical examinations.
- b) An immediate medical examination of a supported individual will be required if:
 - i. There is evidence of injury (significant injuries, severe bruises that depict the supported individual is in severe pain);

- ii. The supported individual is categorized as a high-risk and requires urgent attention by our physician;
- iii. There are certain indications showing that the supported individual urgently requires medical treatment or examination;
- iv. Southwest Pain and Addiction Center shall communicate if there is a need for the supported individual to seek inpatient services and recommend where best they can seek help based on their medical examination findings.

D. Support strategies assessment for abnormal behavior

- a) If a supported individual presents with abnormal behavior and it seems the approved interventions from previous medical providers are not effective, it becomes important to conduct a support strategies assessment to identify how best to help the supported individual.
- b) Southwest Pain and Addiction Center recognize that abnormal behavior is a way of communication from the supported individual. It's challenging to understand an individual's problems, and it requires the involvement of many factors. If there are several possibilities as to the root of the observed problem, it is the responsibility of the physician, nurse practitioner, and counselor to understand what the supported individual is trying to communicate. Could it be a personality disorder as a result of addiction, which in many cases is categorized by lack of conscience, lying, stealing, etc.? It is the responsibility of the physician, nurse practitioner, and counselor to find out the solution to the portrayed abnormal behavior. They should be supportive and remain calm as they figure out what the problem is.
- c) The key measure of a support strategy's success is the improvement the support strategy will have on the supported individual's quality of life.

- d) The aims of a support strategy assessment shall be:
- i. Identify challenges or behaviors of supported individuals;
 - ii. Find out the reason for the supported individual's reaction or abnormal behavior;
 - iii. Determine any external or internal causes of the challenges of abnormal behaviors;
 - iv. Identify circumstances surrounding the challenges of abnormal behaviors;
 - v. Identify existing patterns;
 - vi. Identify what makes the abnormal behavior a challenge, including intensity, frequency, and duration;
- e) The support strategy assessment shall entail getting information from the following:
- i. The supported individuals;
 - ii. Family members;
 - iii. Medical providers who were/are providing treatment to the supported individual before/when seeking help at Southwest Pain and Addiction Center.
- f) The above-mentioned individuals shall provide the following information:
- i. The perceptions of the supported individuals or/and family members;
 - ii. The supported individual's history, emotional and physical health, lifestyles, relationships, and communication ways.
- g) The physician, nurse practitioner, and counselor shall review the collected information so as to identify the problem, the medication required, and the level of care and help needed in ensuring that the supported individual requires from the addiction or pain they are experiencing.

2. Intake

a) Southwest Pain and Addiction Center shall employ two techniques to ascertain the most effective placement for incoming potential clients:

- i. The first technique is referral by Southwest Pain and Addiction Center's physician, who requests and reviews reports on the potential incoming individual's social history, psychological and psychiatric reports, etc. As per the provided information, if the potential client is eligible, the physician, with the help of the nurse practitioner and counselor, offers medications and counseling sessions to the supported individuals to ensure they recover from the illness they are experiencing;
- ii. The second technique is a quick intake to allow an assessment. This occurs when an immediate intake is deemed necessary, and Southwest Pain and Addiction Center will be at the frontline to align the intake of the individual's needs closely. Southwest Pain and Addiction Center will put into consideration the new client's background information and special needs to make this quick intake.

A. Intake criteria

a) The criteria used to inform the intake process is collected when a potential client seeks help at Southwest Pain and Addiction Center and includes information on the supported individual's:

- i. Emotional, educational, social, medical, and developmental needs;
- ii. Socioeconomic, linguistic, racial, and cultural background.

B. Agreement for service

a) Southwest Pain and Addiction Center shall require a service agreement for each supported individual during the intake, and the agreement shall be made with either the

supported individual's parent(s) or legal guardian(s) or the agency with the individual's legal custody. The agreement outlines the treatment and care to be provided by Southwest Pain and Addiction Center, including medications and follow-up if need be.

- b) The agreement for service shall include the following:
- i. The authorization and consent for Southwest Pain and Addiction Center:
 - I. To provide medications for the individual;
 - II. To obtain reports, records, and information from relevant sources that is critical for the treatment of the individual;
 - III. To obtain emergency medical treatment for the supported individual;
 - ii. Provisions to review the agreement as requested by:
 - I. The parent or legal guardian of the supported individual;
 - II. The supported individual;
 - III. Legal agency with the individual's legal custody;
 - iii. Financial arrangements with respect to medications and other forms of treatment that will be offered.
 - iv. During intake, in situations where individuals have the full intellectual capacity, Southwest Pain and Addiction Center shall make sure the agreement for service is fully explained to the supported individual by use of a language that the individual finds easy to understand before signing the agreement. Southwest Pain and Addiction Center shall obtain the individual's signed knowledge showing that the individual has been given explanations for the program. In situations where the supported individual wants to read the agreement, information concerning

financial planning can be redacted in case any of the other signing authorities requests that the information is kept confidential.

- v. The agreement for service shall be signed by:
 - I. Southwest Pain and Addiction Center's physician;
 - II. The parent, guardian, or any other individual with the supported individual's lawful custody;
 - III. The supported individual if they are 18 years or older; and
 - IV. Any other individual as identified by the law.
- vi. In cases where the provisions for the agreement of service shall not be met, the reasons will be noted in the supported individual's case record.
- vii. In cases where an agreement for service is not entered at the time of intake, Southwest Pain and Addiction Center shall ensure, prior to intake, consent for intake and authorization to secure emergency treatment for the supported individual is obtained.
- viii. When a supported individual is presented under these situations, Southwest Pain and Addiction Center shall require all necessary intake information concerning the individual to be available within 3 hours of intake.

3. Treatment Planning

- a) After the intake of a supported individual in Southwest Pain and Addiction Center, treatment planning shall take place in collaboration with all key parties, including:
 - i. The supported individual;
 - ii. The supported individual's parent(s) or close family member(s);

- iii. Any other professional who offers services to the supported individual;
- b) The treatment planning shall include the following:
- i. A list of parties that will take part in the treatment;
 - ii. A list of parties not to be involved for particular reasons;
 - iii. A description of the supported individual's needs, formulated with previous or current assessments;
 - iv. A statement of goals to be achieved as the supported individual takes medication from Southwest Pain and Addiction Center;
 - v. A statement of the approaches to be used to achieve the goals as the supported individual is under medication;
 - vi. A statement of indicators to make sure that the supported individual's needs will be met;
 - vii. A statement of the roles of the supported individual's parent(s) or close family member(s) during the supported individual's treatment;
 - viii. Particulars of any follow-up that will be arranged by Southwest Pain and Addiction Center;
 - ix. A listing of the dates on which the treatment planning shall be reviewed;
 - x. A statement on the supported individual's discharge planning;
 - xi. All parties involved in the treatment planning shall be given a chance to review the treatment planning documentation and give suggestions for any adjustments.
- c) All parties will be required to sign the treatment planning documentation after an agreement has been arrived at on the contents of the treatment.

4. Discharge Planning

- a) Southwest Pain and Addiction Center shall make sure that supported individuals leave the facility smoothly and safely and get appropriate care after that. To achieve this:
- i. The nurse practitioner shall identify pain and addiction patients who require help with planning for discharge after their intake and treatment;
 - ii. The nurse practitioner shall collaborate with the supported individual and the supported individual's family to ensure the process is smooth;
 - iii. The nurse practitioner shall give recommendations for the continuing care of the supported individual and services or programs that shall help in the recovery of the supported individual's situation;
 - iv. The nurse practitioner shall coordinate with responsible personnel or affiliated agency of the supported individual in addressing gaps in the supported individual's recovery situation.
- b) In cases of frequent visits by supported individuals with no improvement, Southwest Pain and Addiction Center shall discharge the supported individuals and recommend or transfer them to an agency and provide a copy of all medical information written in the supported individual's file. The transfer will be documented using a medication transfer form.

5. Consumer Progress

- a) A review of the treatment planning shall be done after every 21 days for the first three months and then every four months thereafter.
- b) A review of the supported individual's progress shall be done through routine and regular discussions in relation to the established goals, ways discussed to achieve the set goals,

impacts of medications, and appropriate adjustments to the treatment planning or the goals required to adapt to the supported individual's changing needs.

- c) Supported individuals will be given a chance for expressing their treatment plan during follow-up sessions with the physician. The physician will complete a report and file it in the supported individual's file.
- d) The counselor shall conduct counseling sessions with the supported individuals who may backslide into addiction habits if not given both medical and counseling support.
- e) The physician, in support of the nurse practitioner, shall conduct a formal review after 42 days after intake of the supported individual to Southwest Pain and Addiction Center. At the request of the involved parties request, more formal reviews shall be conducted every two months thereafter.

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