

**DIVISION OF ADDICTION AND RECOVERY SERVICES  
PAROLEE SERVICES NETWORK (PSN)  
PROGRAM GUIDELINES AND TREATMENT STANDARDS**

(Apply to PSN provider contracts negotiated pursuant to competitive bid process conducted after 1/1/97)

**OBJECTIVE**

The objective of the Substance Abuse Treatment Program is that treatment shall be made available to persons addicted to alcohol and other drugs for their condition and its underlying causes. Treatment may be required as a condition of parole or civil addict outpatient status.

**GENERAL PROGRAM REQUIREMENTS**

Contracts and subcontracts for comprehensive substance abuse treatment services shall incorporate the following requirements:

Community based residential programs for parolees shall be licensed by the Department of Alcohol and Drug Programs (ADP). These programs may also be certified. Community based nonresidential programs for parolees shall be certified by ADP and/or ADP Drug Medi-Cal (DMC).

A county must maintain a Case Management system to assess and refer parolees to an appropriate treatment placement.

The treatment provider will reserve space for up to 72-hours past the estimated time of arrival of the client.

Treatment providers will not admit a parolee into PSN program without a referral from the Case Manager.

Parolees shall be awarded services regardless of the length of parole time remaining. It is the expectation of California Department of Corrections and Rehabilitation (CDCR) that County services will be provided once the PSN funding is no longer available.

Substance abuse detection is an activity in which participants shall agree to be subject to as a condition of program participation. Substance abuse detection activities (for example body specimen screens) are to be conducted by CDCR. If the contract treatment provider conducts the substance abuse detection activities in addition to those conducted by CDCR, these activities are not reimbursable. Programs shall coordinate with CDCR staff in these activities.

In an effort to maximize PSN funds, DMC eligible parolees should be referred to DMC certified programs. If DMC services are not available, program participants will be referred to the PSN, and/or other services available.

Must be an inmate in a CDCR facility or parolee in one of the participating PSN counties.

Must have a history of substance abuse.

If a parolee is a registered sex offender, the parolee is eligible for PSN services on an outpatient basis only.

Must be absent of arson arrests/convictions for the past five years.

Must have no serious psychosis that would prevent the individual from participation in a substance abuse program.

Must not pose a threat to the physical safety of others.

## TREATMENT MODALITIES

### NONRESIDENTIAL TREATMENT

Nonresidential Treatment (includes Pre-Treatment, which are services for those parolees who are in need of residential treatment and none is readily available) involves the provision of services to parolees (who shall hereafter be referred to as participants) through face-to-face interaction with program staff outside of the participant's residence. Within the Nonresidential Treatment Modality, there are submodalities of Nonresidential Relapse Prevention, Nonresidential Treatment, and Intensive Nonresidential Treatment. The treatment modality includes the following scope of activities:

- Habilitative and Rehabilitative Services
- Counseling – Individual/Family/Group
- Collateral Services
- Case Management
- Treatment Planning

### Minimum Duration & Intensity

Participants determined to need only nonresidential relapse prevention shall receive a minimum of 1½ -3 hours of face-to-face activities scheduled over one to three visits per week. Nonresidential relapse prevention should only be utilized after a period of treatment services at a higher level of intensity.

Participants determined to need more than relapse prevention shall receive a minimum of 5 hours of face-to-face activities over at least three visits per week.

Participants determined to need intensive services in a nonresidential setting shall receive a minimum of 9 hours of face-to-face activities over at least three visits per week.

The participants shall be retained within program and/or modality for the minimum and/or maximum time period or number of visits specified in the treatment coordination plan.

### Staffing Ratio

For group activities, the ratio of clients to Substance Abuse Treatment Program Counselors shall not be greater than 15:1 as evidenced on group activity rosters.

### Other Services Modalities and Activities Precluded and Required

Nonresidential Day Treatment, Residential Treatment, and In-Prison Substance Abuse Treatment are precluded. Participants shall not be admitted to programs offering these modalities until the participant is discharged from Nonresidential Treatment

Treatment coordination is required.

### NONRESIDENTIAL DAY TREATMENT

Nonresidential Day Treatment services are intensive and structured nonresidential activities involving face-to-face interaction with designated program staff in which participants attend according to a planned and specified schedule. The scope of activities included in this modality are:

- . Habilitative and Rehabilitative Services
- . Counseling – Individual/Family/Group
- . Collateral Services
- . Case Management
- . Treatment Planning
- . Recreation

**Minimum Duration and Intensity**

There shall be a minimum of four hours of continuous face-to-face individual and group activity scheduled for each participant.

Each participant shall be scheduled to participate at least five days per week, at least one of which shall be a Saturday or Sunday.

The participant shall be retained within the program for the minimum and/or maximum time period or number of visits specified in the treatment coordination plan.

For group activities, the ratio of clients to Substance Abuse Program Counselor shall not be greater than 12:1 as evidenced on group activity rosters.

**Other Services Modalities and Activities Precluded and Required**

Residential, Nonresidential Treatment, and In-Prison Substance Abuse Treatment are precluded. Participants shall not be admitted to programs offering these modalities until the participant is discharged from this service modality.

Treatment Coordination is required.

**RESIDENTIAL TREATMENT**

Residential Treatment is the provision of food and shelter in a community based facility in conjunction with intensive and structured activities. The activities involved face-to-face interaction with designated program staff and participant attendance according to a planned and specified schedule. The scope of activities included in Residential Treatment are:

- . Habilitative and Rehabilitative Services
- . Counseling – Individual/Family/Group
- . Collateral Services
- . Case Management
- . Treatment Planning
- . Recreation
- . Food and Shelter

**Minimum Duration and Intensity**

There shall be a minimum of twenty hours of face-to-face individual and group activity for each participant scheduled from Mondays through Fridays.

There shall be a minimum of six hours of face-to-face individual and group activity scheduled on Saturdays and/or Sundays.

The participant shall be retained within the program for the minimum and/or maximum time period or number of residential days specified in the treatment coordination plan.

**Staffing Ratio**

For group activities, the ratio of clients to Substance Abuse Program counselors shall not be greater than 12:1 as evidenced on group activity rosters.

**Other Services Modalities and Activities Precluded and Required**

Nonresidential, Nonresidential Day Treatment, and Alcohol and Drug Free Housing are precluded. Participants shall not be admitted to these modalities until the participant is discharged from Residential Services.

Treatment Coordination is required.

**ALCOHOL AND DRUG-FREE HOUSING/ SOBER LIVING ENVIRONMENT**

The Alcohol and Drug-Free Housing/Sober Living Environment modality consists of food and shelter in a residence which is self-governed by the participants and where no services or activities are lead by program staff on-site. Participants pledge total abstinence from alcohol and illicit drugs as a non-negotiable condition of their continued residence. The scope of activities for this modality are:

Food and Shelter

**Minimum Duration & Intensity**

The program shall be the participant’s primary residence while enrolled in this modality.

The participant shall be retained in the program for the minimum and/or maximum number of residential days specified in the Treatment Coordination Plan.

**Staffing Ratio**

None

**Other Service Modalities & Activities Precluded and Required**

Participation in Residential Treatment is precluded while the participant is in Alcohol and Drug-Free Housing.

In addition to Alcohol and Drug-Free Housing, participants must also be admitted to and participate in Nonresidential Treatment or Nonresidential Day Treatment (Off grounds Group and/or Individual Counseling).

Treatment Coordination is required.

**DEFINITIONS**

**COLLATERAL SERVICES**

Collateral Services are services provided to persons who are significant in the emotional life of the participant by virtue of their relation to the participant through family affiliation, as a significant other, or as a member of an extended therapeutic community. Services are reimbursable if they are oriented to the treatment and personal recovery needs of the participant and included in the treatment plan. Contacts with individuals who are related to



the participant by virtue of their office or profession, such as teachers, social workers, clergy, sponsors, correctional officers, and parole agents are not collateral services. Such contacts would instead be categorized as Treatment Coordination or Case Management.

## **CASE MANAGEMENT**

Case Management Services include the activities of program staff in contacting outside agencies and making formal referrals for services outside the scope of comprehensive substance abuse services but identified in the participant's treatment plan as necessary to the participant's attainment of treatment goals. Such concomitant services include academic education, vocational training, medical and dental treatment, pre- and post counseling and testing for infectious diseases, legal assistance, job search assistance, financial assistance, childcare, and 12 step self-help programs.

## **COUNSELING – INDIVIDUAL/GROUP/FAMILY**

Counseling is face-to-face interaction involving one or more substance abuse treatment counselors and one or more participants and/or significant others focusing on the personal recovery of the participant(s). Individual counseling is a private meeting of a participant with one or more staff, while group counseling involves a meeting involving more than one participant and one or more staff. Family counseling is a private meeting of a participant, one or more program staff, and one or more persons related to the participant through family affiliation or as a significant other. Interaction in individual, group, and family counseling shall involve processing of individual or common group issues and themes which may include anger management, criminal thinking and thinking errors, sexual abuse, domestic violence, death and grief, relapse prevention, or co-dependence.

## **FOOD AND SHELTER**

Food and shelter is the provision of meals and sleeping arrangements in a 24 hour residential facility.

## **HABILITATIVE AND REHABILITATIVE SERVICES**

Habilitative and Rehabilitative Services are structured and planned activities involving program staff and participants in traditional classroom or experiential learning of practical life and social skills. Subjects shall include, but are not limited to, the following: job preparation, application, interview and retention skills; managing finances; maintaining health and personal hygiene and appearance; obtaining educational and vocational training; building and maintaining socially supportive relationships; security housing; obtaining social services; recognizing and preventing substance abuse relapse; avoiding violence and criminal activities; recognizing and changing self-defeating thinking and behavior patterns; nutrition, meal planning and food preparation; parenting skills, and obtaining child care.

## **RECREATION**

Activities provided on-site at the program and organized and led by program staff or program participants with assistance from program staff, and intended to teach social interaction skills, as well as, organizing and participating in the productive use of leisure time without engaging in substance abuse or criminal behaviors.

## **TREATMENT PLAN**

A written document consisting of the following elements: participant first name and surname; participant CDCR numbers; program name and California Outcome Measures fiscal program identification number; participant treatment goals; specific services and activities to be accessed and for each services and/or activity the beginning and ending dates and frequency; progress notes, and the following signatures/dates of signature: participant, substance abuse treatment program counselor, parole agent or correctional counselor, and case management services coordinator.

