

## Women's Center Frequently Asked Questions

### What population is served?

- Females age 18 and older with SUD diagnosis, both in and out of catchment area
- Women with children (can bring up to 2 upon approval) age birth to school age
- Co-occurring disorders, legally involved individuals
- Thought disorders are reviewed and often decided upon case-by-case
- Ability to take transgender individuals on a case-by-case basis

### What is required for referral?

- Referrals often come from local CSB or hospitals
  - CSB referrals require the following:
    - ASAM with 3.5 LOC recommendation
    - Recent (within 6 months) Comprehensive Needs Assessment or approved alternative based on other CSB SUD assessment protocols
    - HPR-1 which can be provided in a Word Document that asks for residential treatment if not completed normally by referring CSB
    - Current medication list
    - Signed release for UVA to allow for medical review
  - Hospital or higher level of care referrals require the following:
    - Most recent social worker/provider note or assessment
    - ASAM recommending step down services of 3.5 LOC
    - Medication list
    - HPR-1 which can be provided in a Word Document that asks for residential treatment if not completed normally by referring CSB
  - Signed release for UVA to allow for medical review

### What populations are unable to be served?

- Those with unmanaged severe mental illness (SMI) or that have mental health symptoms that do not allow for access to SUD curriculum provided
- Those with significant medical issues or inability to complete daily hygiene or other ADLs
- Mobility issues are discussed on a case-by-case basis due to the location being single level, however consumers are often transported and need to be able to move in and out of a vehicle

### What can an individual expect daily life to be like?

- Daily schedules are provided at morning meeting each day to assist with development of routine.
- Individuals are expected to be up, have their meds, and be ready for the day by 830 AM
- At least 1 group (usually 2 or more on site), an outing to Blue Ridge Center for group, and daily AA/NA meetings offered in the community, virtually, or in-house
- Individual counseling offered once per week, with ability to add additional individual when needed

### **What substances require detox?**

- Alcohol, Opiates, Benzodiazepines
  - If an individual arrives for admission and tests positive on a UDS for opiates or benzodiazepines, they are sent to the hospital for medical clearance before admission. They will need to provide a clean UDS (unless given medication for detox that is documented) and attempt readmission after 72 hours.
  - If an individual arrives for admission and provides anything but a .000 on the breathalyzer, they are sent to the hospital for medical clearance or have to provide a .000 breath sample 3-5 days after first attempt if detox is not needed. A positive alcohol UDS is provided, but .000 is blown, this is discussed case-by-case and involves the referring worker/agency.

### **What is required for individuals who are pregnant to be able to complete treatment?**

- Pregnant women wanting to enter treatment must be established with an OBGYN
- OBGYN appointment (if not local) must be identified at admission and referring agency may need to assist with transport depending on location
  - OBGYN must be willing to do the following:
    - Provide signed documentation that the individual is medically stable for SUD treatment
    - Provide notification that use of UVA if an emergency arises is appropriate
    - Be willing to provide a list of medications that are approved (PRN meds) and consult as needed for any additional medications needed (Psych referral, etc.)

### **What is required for women wanting to bring children?**

- Children must have a current PCP and be current on immunizations, with documentation provided.
- Individual must identify an emergency contact for the children in case of need for medical attention or a need to have the child return home for mother to complete treatment
- Children must also be medically cleared for facility
- Mothers are responsible for the following while children are with them in treatment:
  - Providing all medication, formula, diapers, etc. for the duration of stay (community options are available for assistance)
  - Daily oversight, positive discipline, and overall care for their own children.
  - Not allowing other residents to provide care for the children
  - Engage in all required portions of treatment to improve their recovery.

### **What medications are not allowed?**

- Medications are discussed based upon medication list provided at referral and most are accepted on a case-by-case basis. Any medications prescribed that are related to previous substances of choice may need to be changed prior to admission.

**What MAT options are offered?**

- The most common currently seen are Suboxone, Methadone, Naltrexone, and Acamprosate.
- Any other MAT options will be discussed at time of referral, depending on established care and medication list.
- Access to clinics that offer Suboxone or Methadone while in services, or collaboration with current providers to ensure that they continue to progress in their recovery

**What insurances are accepted? Other funding sources?**

- Insurances accepted:
  - All Medicaid MCOs
  - Anthem Commercial
- Other funding sources accepted:
  - SOR/SARPOS
  - Other options can be discussed prior to referral when needed

**What discharge planning is completed?**

- Discharge planning/care coordination begins at time of referral
- Women's Center staff collaborate with current providers and referring worker to identify required needs upon completion of 3.5 LOC.
- A discharge planning meeting occurs virtually with all current providers by the 3<sup>rd</sup> week of treatment to plan for discharge, required services, and referrals needed.