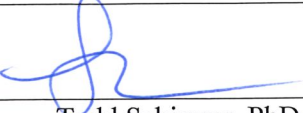


County of Marin Behavioral Health and Recovery Services (BHRS)	POLICY NO. BHRS-59
POLICY:	Next Review Date: February 2027
<u>INTERIM SERVICES</u>	Date Approved: February 16, 2024
SUPERCEDES: BHRS-ADP-07	By:  Todd Schirmer, PhD, CCHP Behavioral Health and Recovery Services Director

POLICY: INTERIM SERVICES

I. PURPOSE:

The purpose of this policy is to ensure that interim services are provided to clients served by Behavioral Health and Recovery Services (BHRS) and its contractors, as appropriate.

II. REFERENCES:

Title 45 CFR, Section 96.121
 Substance Use Prevention and Treatment (SUBG) Block Grant Performance Contract

III. POLICY:

It is the policy of County BHRS to ensure that interim services are provided to individuals requesting treatment who are injection drug users (IVDU) and/or pregnant women and who cannot be admitted to a program due to capacity limitations.

Program admission must be provided in the following order:

1. Pregnant Injecting drug users (People who are pregnant and inject drugs)
2. Pregnant substance abusers (People who are pregnant and use substances)
3. Injecting drug users (People who inject drugs)
4. All others

Interim services are required by all treatment service providers for any individual who is unable to be provided an intake appointment for routine care within 14 days of the request. For people who inject drugs (IVDU) and/or pregnant women the following services will be provided within 48 hours of a request for intake:

1. Counseling and education on HIV, TB, and the risks of intravenous drug use;
2. The risks of needle sharing;
3. The risks of transmission to sexual partners and infants;
4. The steps to prevention of HIV transmission; and, if necessary,
5. Referral for HIV and TB treatment services.
6. Referrals based on individual assessments that may include, but are not limited to: self-help recovery groups; pre-recovery and treatment support groups,

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sources for housing, food and legal aid, case management, children’s services medical services and Temporary Assistance to Needy Families (TANF)/Medical services.

For pregnant women, Interim services also include:

1. Referrals for prenatal care;
2. Counseling on the effects of alcohol and drug use on the fetus;

High risk clients must be afforded admission preference at all County-operated and contracted provider locations funded under the State-County Contract. Regardless of program capacity, the contractor must screen all potential clients and admit them on a priority basis. If a program is at capacity, the provider must provide interim services within 48 hours.

IV. AUTHORITY/RESPONSIBILITY:

BHRS Contract Managers
County Alcohol and Drug Administrator
BHRS Director

V. PROCEDURE:

The County ensures that County-operated services and contractors receiving funding under the State-County Contract comply with requirements of funding sources and applicable laws and regulations through the below methods.

When individuals who are in the above priority populations seek admission for services, and there is not an immediate opening, the program must enter in SmartCare the client enrollment for the program in “requested” status, which will generate a unique patient identified and program-specific waitlist. The list will include the number of clients waiting and the order of clients entered into requested status. All capacity and waitlist data shall also be entered into DATAR by the 10th of each month for the previous month.

If a prospective client is awaiting admission due to lack of capacity, in addition to providing interim services within the mandated timeframe, the program must provide client with referrals to other programs that may have capacity.

Contractor compliance with this policy shall be achieved through:

1. Distribution of the SABG Block Grant Requirements in the Contractor Manual annually at contract renewal.
2. Approval of contract as to form and legal affect by county counsel.

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3. Signature of Contractor on contract agreeing to all conditions set forth in the contract.
4. Approval and execution of contract by the County Board of Supervisors, County Administrative Officer or HHS Director.
5. Annual completion of Self Audit by Contractor (Interim Services), and subsequent review by BHRS Contract Manager, including Contractor's signed attestation of adherence to all laws and regulations.
6. Notification by contractor within 48 hours to BHRS Contract Manager when a priority population is awaiting admission to treatment.
7. On a monthly basis, BHRS staff will review DATAR and SmartCare Interim Services data to ensure accurate reporting and priority populations are being served first.
8. At annual Site Visit, Contract Manager shall review contractor policy and procedures regarding Interim Services. Client files of priority populations will be reviewed in order to ensure interim services are being provided within 48 hours, and policies and procedures are being followed in accordance with regulations

County-operated service compliance shall be achieved through:

1. Approval of State-County Contract by Board of Supervisors or authorized designee agreeing to all conditions set forth in the contract.
2. Attestation to compliance with Interim Services Requirements at the annual DHCS Monitoring review.
3. Designated BHRS staff will review DATAR and SmartCare Interim Services data on a monthly basis to ensure accurate reporting and priority populations are being served first.
4. Annual completion of Self Audit, including County Alcohol & Drug Administrator's signed attestation of adherence to all laws and regulations.
5. At annual Site Visit, Quality Management shall review policy and procedures regarding Interim Services. Client files of priority populations will be reviewed in order to ensure interim services are being provided within 48 hours, and policies and procedures are being followed in accordance with regulations.