

**CONCERN: Employee Assistance Program  
Clinical Protocol for Substance Abuse Management**

The following protocol reflects standard clinical procedures and is to be used as a guideline when working with Substance Abuse cases. Nothing in this guideline is intended to negate the need to follow applicable laws and regulations or good clinical practice. **Providers must contact a CONCERN Supervisor for these cases after the initial assessment at 800-344-4222 or 650-940-7100.**

Whenever possible, alcohol or drug cases are to be followed for up to one year, using up to 10 hours of direct client contact and up to 2 hours of additional case management. Case management time can be used in 15-minute increments, either in person or on the phone, with the client, family members, health professionals, (including a CONCERN Clinical Manager or Supervisor), and/or treatment facilities, or for other activity necessary to manage the case. Work with these clients includes assessing the problem, providing education about substance abuse, motivating the client for treatment, making referrals, crisis intervention, monitoring progress, recommending additional resources and reinforcing the client's commitment to using the resources available. **Note:** Working with these clients is an adjunct process and *not* a substitute for primary treatment for substance abuse.

Client Name: \_\_\_\_\_ Client Organization \_\_\_\_\_

**Thorough assessment regarding substance abuse:**

- Confirm quantity and frequency of use.
- Administer CAGE, AUDIT or other substance use screening tools.
- Take thorough history of use.
- Contact family or significant others, if possible. **Obtain a Release of Information for this.**
- Provide education about substance use and abuse.
- Provide educational and resource materials - pamphlets, books, web sites

**After assessment, when client requires treatment and is cooperative:**

- Refer to inpatient or structured outpatient program with a release of information.
- Contact treatment program and request:
  - Name of case manager (date contacted) \_\_\_\_\_
  - Copy of treatment and discharge plans (date received) \_\_\_\_\_
  - Notification of progress and termination (date received) \_\_\_\_\_
  - Discharge Summary (date received) \_\_\_\_\_

**OR**

**Refer to substance aware therapist and/or 12-step program with Release of Information:**

- Contact provider and discuss treatment plan. Name of provider: \_\_\_\_\_ Date: \_\_\_\_\_
- Request notification of progress and termination (date received) \_\_\_\_\_

**OR**

**If 12 Step and/or Self-help programs are the only treatment:**

- "90 meetings in 90 days" plan.
- Verify attendance with signature from meeting secretary (optional).
- Obtain a sponsor.
- Begin step work.

**After assessment, when client requires treatment and is not cooperative or is still in denial:**

- With release of information, contact family or significant others to set up possible family intervention.
- Refer to substance aware physician for evaluation, with a release of information.
- Refer to substance aware therapist, with a release of information.
- Provide brief interventions to enhance motivation, establish a controlled use contract, or other assignments appropriate to client.

**Follow up:**

- Contact client, and family if possible.
- Provide education and information on relapse prevention.
- Monitor \_\_\_ attendance in after-care, \_\_\_ 12 Step and/or self-help program, \_\_\_ compliance with treatment program, and/or \_\_\_ last-chance agreement or return-to-work agreement plans when applicable. (Check those that apply.)

Please refer to CONCERN educational materials regarding substance use assessment and treatment planning.