Priority Populations Screening, Referral, and Admission Standards for Quality and Compliance

PURPOSE

This training provides expectations for working with priority populations as it relates to timely access to quality care and reporting and compliance

Guided by Purpose and Grounded in Standards of Care

- Embedded into our strategic plan, we are committed to identifying and supporting priority populations to ensure timely access to prevention and treatment across our region
- We are committed to collaborating with our community partners, such as the Child Welfare System, and the Michigan Department of Corrections to strengthen coordination of treatment for priority populations.

Guided by Purpose and Grounded in Standards of Care

- As stated in the Substance Abuse Prevention and Treatment Block Grant (SAPTBG), we must prioritize services for priority populations. These groups must receive admission preference over others, and we must track service needs to ensure effective and timely treatment.

Priority Population-Pregnant

Screening & Referral	Within 24 Hours
Admission Timeframe	• Detox/Methadone/Residential within **24** hours. • All other levels of care-within **48** business hours.
Interim Services	• HIV/TB education • Prenatal referral • Needle sharing • Fetal impact risks • Early intervention clinical services

Compliance and Reporting- Pregnant

>85% of individuals screened and identified as pregnant with a substance use disorder or pregnant and injecting drugs must be given an admission date within the required timeframe.

- 24 hours for detox, methadone, and residential
- 48 business hours for all other levels of care

Priority Population-Injecting Drug User

Screening & Referral	Within 24 Hours
Admission Timeframe	Admission Within 14 Days
Interim Services	• HIV/TB education • Needle sharing risks • Early intervention clinical services

Priority Population-Parent At-Risk of Losing Children

Screening & Referral	Within 24 Hours
Admission Timeframe	Admission Within 14 Days
Interim Services	Early Intervention Clinical Services

Priority Population-Individual Referred by the Michigan Department of Corrections (MDOC)

To qualify as this priority population a MDOC referral must be received. This includes a CFJ-306 form and a MDHHS release between your agency and the referring agent.

Once this has been identified, you would then proceed with the following screening and admission guidelines

Priority Population-Individual Referred by the Michigan Department of Corrections (MDOC)

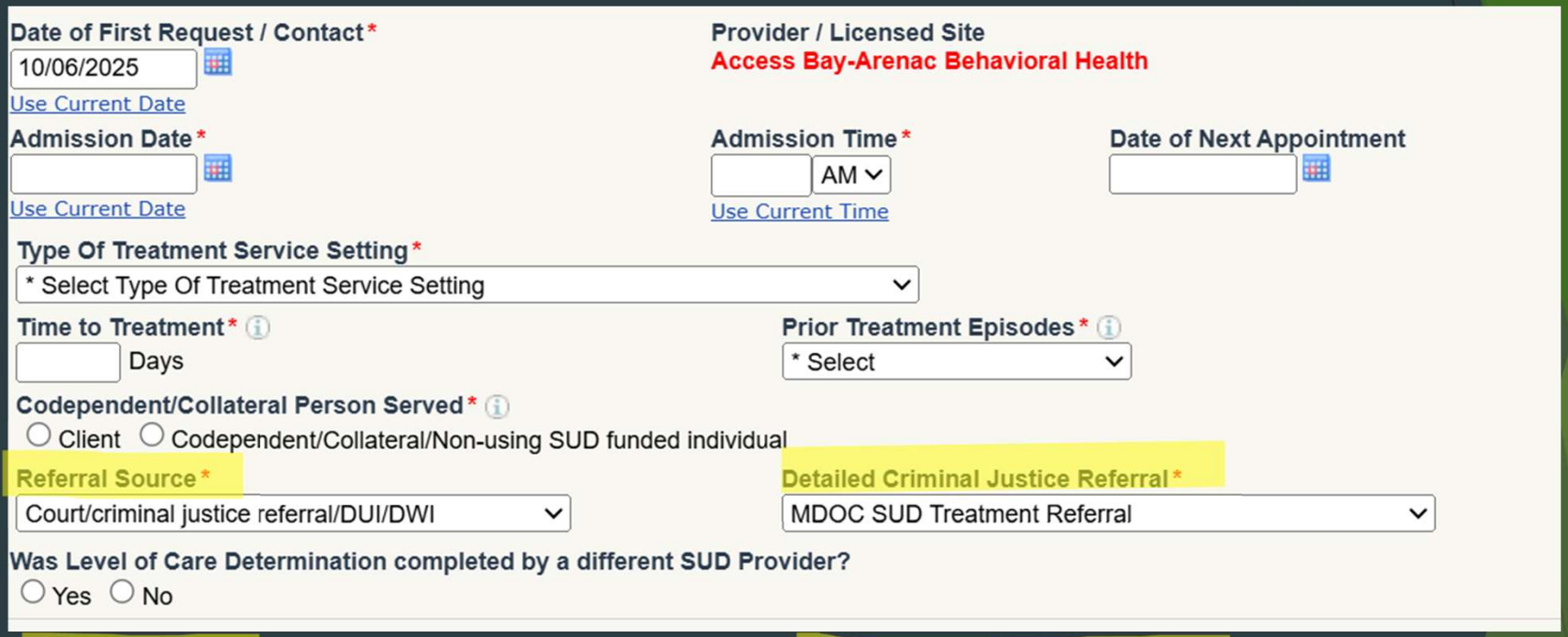
Screening & Referral	Within 24 Hours
Admission Timeframe	Admission Within 14 Days
Interim Services	• Early intervention clinical services • Recovery Coach Services • Contact the agent with the tentative admission date
Monthly Services	Complete **MDOC Monthly Progress Report** and email it to the person's agent by the 5th of each month

Compliance and Reporting- Individual Referred by MDOC

NEW for FY26-Changes to BH-TEDS and the Admission Form

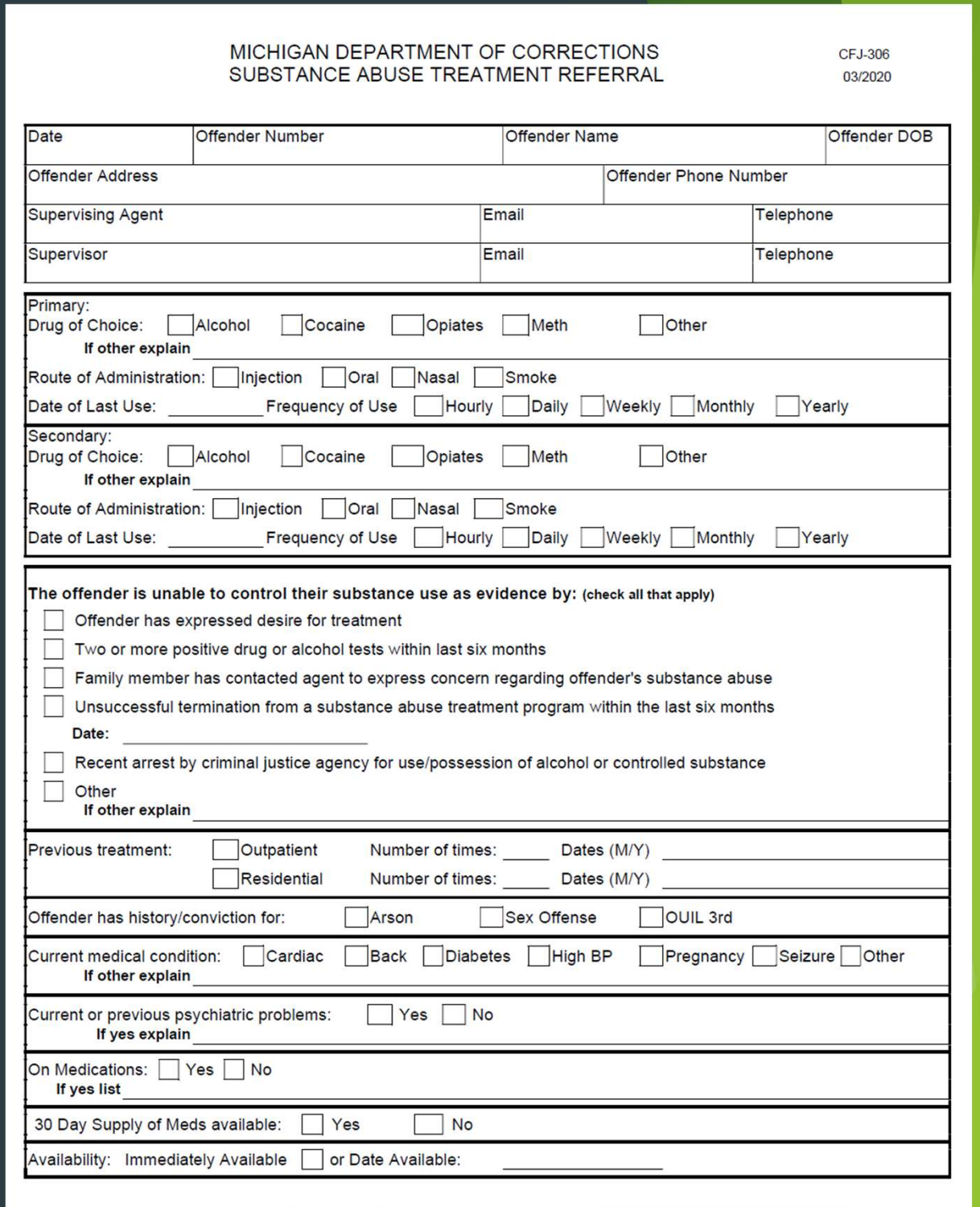
Please review the following slides on how to report a MDOC referral within the admission form as well as how to locate and/or upload a CFJ 306 form

How to report a MDOC referral on the admission form using the FY26 BH-TEDS reporting criteria



The Referral Source MUST be Court/criminal justice referral for the Detailed Criminal Justice Referral to populate the option of MDOC SUD Treatment Referral

CFJ-306, The Michigan Department of Corrections Substance Abuse Treatment Referral Form



MICHIGAN DEPARTMENT OF CORRECTIONS
SUBSTANCE ABUSE TREATMENT REFERRAL

CFJ-306
03/2020

Date	Offender Number	Offender Name	Offender DOB
Offender Address		Offender Phone Number	
Supervising Agent		Email	Telephone
Supervisor		Email	Telephone

Primary:
Drug of Choice: ☐ Alcohol ☐ Cocaine ☐ Opiates ☐ Meth ☐ Other
If other explain _____
Route of Administration: ☐ Injection ☐ Oral ☐ Nasal ☐ Smoke
Date of Last Use: _____ Frequency of Use ☐ Hourly ☐ Daily ☐ Weekly ☐ Monthly ☐ Yearly

Secondary:
Drug of Choice: ☐ Alcohol ☐ Cocaine ☐ Opiates ☐ Meth ☐ Other
If other explain _____
Route of Administration: ☐ Injection ☐ Oral ☐ Nasal ☐ Smoke
Date of Last Use: _____ Frequency of Use ☐ Hourly ☐ Daily ☐ Weekly ☐ Monthly ☐ Yearly

The offender is unable to control their substance use as evidence by: **(check all that apply)**

- ☐ Offender has expressed desire for treatment
- ☐ Two or more positive drug or alcohol tests within last six months
- ☐ Family member has contacted agent to express concern regarding offender's substance abuse
- ☐ Unsuccessful termination from a substance abuse treatment program within the last six months
  Date: _____
- ☐ Recent arrest by criminal justice agency for use/possession of alcohol or controlled substance
- ☐ Other
  If other explain _____

Previous treatment: ☐ Outpatient Number of times: ____ Dates (M/Y) _____
☐ Residential Number of times: ____ Dates (M/Y) _____

Offender has history/conviction for: ☐ Arson ☐ Sex Offense ☐ OUIL 3rd

Current medical condition: ☐ Cardiac ☐ Back ☐ Diabetes ☐ High BP ☐ Pregnancy ☐ Seizure ☐ Other
If other explain _____

Current or previous psychiatric problems: ☐ Yes ☐ No
If yes explain _____

On Medications: ☐ Yes ☐ No
If yes list _____

30 Day Supply of Meds available: ☐ Yes ☐ No

Availability: Immediately Available ☐ or Date Available: _____

MSHN
Mid-State Health Network

- The CFJ-306 form will come directly from the agent to your agency, and it should be uploaded in SUD Episodes, Admissions and Discharges in the section related documentation
- If screened by MSHN, the CFJ-306 referral form is in the LOC determination in attachments.

The Golden Thread-MDOC-From Screening to Referral to Discharge

Screening

- For agencies completing your own screenings ensure the priority status of "Individual Under Supervision of MDOC and Referred by MDOC" is marked on the Request for Services and Level of Care determinations

Admission

- Review the consumer's screening history to look for a person's priority status like "MDOC" or any other priority statuses
- Again, ensure the admission form reflects the referral source as court/criminal justice referral with the detailed criminal justice referral as MDOC SUD Treatment Referral.
- If the referral source is MDOC SUD Treatment Referral, it is assumed the CFJ 306 form has been uploaded to the consumer's chart under SUD Admission, Tx Episodes, Discharges-Related Documentation.

The Golden Thread-MDOC-From Screening and Referral to Discharge

Treatment and Coordination of Care

- Discuss with the consumer the MDOC referral, with the person's consent, expect to complete and email the Monthly Progress Report to the person's MDOC agent (template to be included with this recording)
- Consider asking the consumer if they are interested in adding a treatment goal that includes fulfilling their legal obligations and successful completion of parole/probation.

Discharge

- Verify and update, if needed, the person's priority status (REMI may auto-pull, but review for accuracy).

Challenges vs. Solutions-How to Achieve Consistent and Accurate Reporting

- Challenge: missing details through consumer self-report
- Solution: Use clarifying, guiding questions to accurately capture their priority status and referral source (refer to guiding questions handout)
- Challenge: Administrative Level of Care Reviews do not fully account for a person's priority status
- Solution: Review all recent screening and LOC history; Mid-State is in the process of making REMI changes to resolve this challenge

Challenges vs. Solutions-How to Achieve Consistent and Accurate Reporting

- Challenge: staffing changes
- Solution: fully utilizing the training materials available on the MSHN website for new hires, especially those completing screenings and admissions
- Challenge: state and system changes i.e., BH-TEDS
- Solution: utilizing the training materials available; Mid-State is in the process of adding information to REMI to prompt and support reporting of priority populations

Compliance and Reporting- Treatment

Priority Populations Waiting List Deficiencies Report

Injecting Drug Users 90% Capacity Treatment Report (Due at the end of the month following the last month of the quarter)

For questions related to these reports, please contact your agency's designated Treatment Specialist

References

- Mid-State Health Network-Substance Use Disorder Services Provider Manual
- FY 2024-2026 MSHN SUD Strategic Plan
- Priority Population Informational Handout
- Locate the resource guide for individuals involved with the justice system
- Locate the MDOC Monthly Progress Report on the website under Stakeholders-MDOC Referral

For Questions and Concerns, Contact the SUD Care Navigator

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