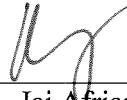


County of Marin <b>Behavioral Health and Recovery Services (BHRS)</b>	POLICY NO. BHRS-59
	Next Review Date: October 2023
<b>POLICY:</b>	Date Approved: October 9, 2020
<b><u>INTERIM SERVICES</u></b>	
<b>SUPERSEDES – BHRS-ADP-07</b>	By:  Jei Africa, PsyD Director of Behavioral Health and Recovery Services

**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 Abuse Prevention and Treatment Block Grant (SABG) State/County Performance Contract

**III. POLICY:**

It is the policy of BHRS to ensure that interim services are provided to individuals requesting treatment who are injection drug users (IVDU) and/or pregnant women.

Program admission must be provided in the following order:

1. Pregnant Injecting drug users
2. Pregnant substance abusers
3. Injecting drug users
4. All others

Interim services are required by all treatment service providers for any individual who is unable to be provided an intake appointment within 14 days of the request. For 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.

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For pregnant women, Interim Services include:

1. Referrals for prenatal care;
2. Counseling on the effects of alcohol and drug use on the fetus;
3. Referrals based on individual assessments such as self-help recovery groups;
4. Pre-recovery and treatment support groups;
5. Sources for housing, food and legal aid

Interim services will also include provision of or referral to case management, children's services, medical services, and Temporary Assistance to Needy Families (TANF)/Medical services.

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:**

Contract Managers  
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 the client on the Interim Services list in Marin WITS, which will automatically generate a Unique Patient Identifier. All capacity and waitlist data shall also be entered into DATAR by the 10<sup>th</sup> 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.

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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.
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 Marin WITS 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:

9. Approval of State-County Contract by Board of Supervisors or authorized designee agreeing to all conditions set forth in the contract.
10. Attestation to compliance with Interim Services Requirements at the annual DHCS Monitoring review.
11. Designated BHRS staff will review DATAR and Marin WITS Interim Services data on a monthly basis to ensure accurate reporting and priority populations are being served first.
12. Annual completion of Self Audit, including County Alcohol & Drug Administrator or designees signed attestation of adherence to all laws and regulations.
13. 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.



**BHRS**  
**Checklist for New or Revised Policies and Procedures**

**Please submit this checklist to the BHRS Policy and Procedure Working Group Lead along with the first draft copy of your policy and accompanying documents.**

Date of initial submission: 10/6/2020

Type of Update:

- New – Justification:
- Revision to Existing Policy or Procedure, Policy Number:

Complete Title of Policy:

Lead Staff Name / Subject Matter Expert: Cat Condon

Other Staff Involved in Drafting of Policy: N/A on Update

System(s) of Care Affected:  ALL BHRS  Mental Health Only  SUDS only

1. For **new** policies, summarize what the policy covers and explain the need for a new policy.  
OR

For **revised** policies, summarize the changes that need to be made to the existing policy:

No substantive changes - only changed contract names and minor edits

2. List any existing governmental regulations that relate to policy or state “None”:

SABG Performance Contract re: Interim Services

3. Describe how policy will impact consumer access to care or state “N/A”:

Ensure priority populations receive prompt access to care and interim services, if indicated

4. Have you compared this policy to similar policies in other counties?  Yes  No  
If so, list counties whose policies were reviewed:

5. Will this policy require staff training?  Yes  No

If so, indicate what staff will need to be trained and what training will be needed.

6. Will forms need to be developed or revised for this policy or policy update?  Yes  No  
If so, list forms that will need to be developed or revised (please list form number if available):

7. Describe any other changes that will need to be made in Behavioral Health (financial, consumer care, etc.) as a result of this policy:

None

**BHRS**  
**Checklist for New or Revised Policies and Procedures**

8. Who needs to review this policy?

BHRS staff: Dr. Jei Africa for review/sign

Other County Staff:

Community partners: