

Core Function #2 INTAKE

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(This begins the Content handout- each class participant takes a turn reading the material. Students may pass their turn if they prefer.)

IC & RC defines INTAKE as:

**The administrative and initial assessment procedures
for admission to a program.**

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SCREENING IS INCLUDED IN TAP 21
DOMAIN VII – DOCUMENTATION

Documentation: The recording of the screening and intake process, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client-related data.

DOCUMENTATION includes the tasks of 5 core functions: SCREENING, INTAKE, ASSESSMENT, TREATMENT PLANNING, AND REPORTS AND RECORD KEEPING.

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The intake process is sometimes explained as a continuation of screening or an in-depth assessment of a client. Intake is simpler than that. Intake is merely: “the administrative and initial assessment procedures for admission to a program.” It is all about the paperwork to get the client into treatment.

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The *INTAKE* process follows the initial *SCREENING*. Whereas the the initial *SCREENING* tries to rule out potential clients as ineligible or inappropriate for a treatment program, initial assessment procedures during the *INTAKE* process tries to “rule in” clients for treatment. The *INTAKE* documentation “proves that the client is both eligible and appropriate for admission.

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INTAKE does become an extension of *SCREENING* that results in either the decision to admit an individual as a client (and the assessment and treatment process continues) or the individual is determined to be ineligible or inappropriate for the treatment program (in which case a referral to anther program or professional resource may be made, if appropriate).

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During *INTAKE* various record forms are completed. Typically, the client and counselor fill out an admission or intake form, sign the HIPPA form, collect financial data, and sign a consent for treatment and any authorizations to release information that are identified as appropriate at this point in the process. Signing a Client Rights and Responsibilities Form is a document appropriate for *INTAKE*. Explaining the information on the form is part of the next Core Function, *ORIENTATION*.

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The *INTAKE* counselor also will document the initial assessment in accordance with agency policy in enough detail to assist a subsequent and more comprehensive assessment. This documentation becomes part of the client record.

In many substance abuse treatment facilities, the next core function – *ORIENTATION* – also is completed during the *INTAKE* session. If not then, an additional appointment is made to orient the client and continue the *ASSESSMENT* process.

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From the Client's Point of View

There are many psychological factors affecting clients immediately prior to entering the *INTAKE* process.

Anxiety is common and expected. Withdrawal symptoms may be present. Anger at the 3rd party for making them go is not uncommon.

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From the Counselor's Point of View

The *INTAKE* counselor needs to develop skills at assessing the client's initial feelings by evaluating their body language, verbal interaction, and communication. When you recognize the emotions of the client you are better able to manage your relationship and interaction with them.

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Your role is to determine that this particular individual is indeed eligible and appropriate for your program. It typically involves much paperwork depending on the type of program, its focus, its needs, and its philosophy.

The counselor must balance the need to complete paperwork with establishing the initial therapeutic relationship. Failure to adequately complete required paperwork may leave the counselor and agency open to litigation should a client believe they were wronged in some way.

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In many treatment programs, the functions of *INTAKE*, *ORIENTATION*, and *ASSESSMENT* are often part of the first appointment. Creating a balance of paperwork, listening to the client, and doing an assessment should contribute to reducing the anxiety of the client, establishing initial rapport, and facilitating the assessment and future treatment process.

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The definition of *INTAKE* refers to that process of “initial assessment for admission to a program.” This refers to the intake counselor being skillful at evaluating and determining that the potential client is, indeed, eligible and appropriate for the treatment program. As said previously, the purpose of *SCREENING* is to rule out... and the purpose of *INTAKE* is to rule in... with sufficient documentation to justify a decision about admission.

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Global Criteria:

6. Complete required documents for admission to the program.

To be competent in this criterion, a counselor would need to:

- *Be aware of what forms are required within the agency in order to admit an individual as a client;*
- *know the “what” and “how” of the admission activity; and,*
- *know that the information is to be written down and the documents are adequately completed and signed for admission to the program. If electronic health records (EHR) are used, then these documents are usually scanned and entered in the electronic record.*

In 2003, the US government enacted the Health Information Protection and Portability Act, known as HIPPA. This is now a required document and completing this form in this global criterion is appropriate.

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Global Criteria:

7. Complete required documents for program eligibility and appropriateness.

To be competent in this criterion, a counselor would need to:

- *Know what forms are required within the agency in order to document a client's eligibility and appropriateness for admission to the program; and,*
- *know that information is written down and completed, documenting the client's eligibility and appropriateness for the program.*

*A counselor should remember that this criterion relates to **documenting** eligibility and appropriateness.*

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Global Criteria:

8. Obtain appropriately signed consents when soliciting from or providing information to outside sources to protect client confidentiality and rights.

To be competent in this criterion, a counselor would need to:

- *Have knowledge and understanding of the need for a client signing a form that allows the counselor to obtain confidential information from another source or to be able to release confidential information from the counselor to a third-party; and,*
- *Facilitate the client signing authorization to release information documenting to whom, and why. If no releases are signed during the intake process, the counselor would need to understand why there was no need to obtain information from outside sources or to release information to a third party.*

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Take the following pieces of information and determine which form would be possibly used during INTAKE:

INFORMATION:

- A. AMOUNT OF SUBSTANCES USED
- B. BLACKOUTS
- C. GENDER
- D. AGE
- E. COLLATERAL CONTACT INFORMATION
- F. COEXISTING CONDITIONS
- G. PRIOR TREATMENT EPISODES
- H. VETERAN STATUS
- I. ABILITY TO PAY
- J. DEPRESSION
- K. CIRRHOSIS
- L. DWI
- M. CLIENT CONSENT FOR TREATMENT
- N. CLIENT UNDERSTANDING OF CONFIDENTIALITY
- O. CLIENT CONTACT INFORMATION

POSSIBLE FORMS:

- 1. DEMOGRAPHIC FORMS
- 2. HIPPA NOTICE
- 3. AUTHORIZATION TO RELEASE INFORMATION
- 4. PRE-TREATMENT QUESTIONNAIRE
- 5. INSURANCE CARD
- 6. PAYMENT ARRANGEMENT