

# [Case management ant treatment plan](https://assignbuster.com/case-management-ant-treatment-plan/)

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The local community addictions clinic has forwarded for counseling treatment a client who has been placed under criminal probation because of possession of crack cocaine. To facilitate treatment and counseling, a preliminary investigation has been conducted. This will also be utilized to facilitate treatment plan for the client involving individual intervention as well as interventions that will be conducted via the community addictions clinic.

Preliminary Investigation

The client is 28 years old of African-American descent. She was placed under probation for possession of crack cocaine and counseling and intervention was part of the conditions of her probation. According to thecase studyconducted by Weiner and associates (1991), addiction to crack cocaine can be used as an indication of other substance abuse problems so it can be assumed that the client may have a history of addiction with other drugs or alcohol. Therefore, the intervention and treatment plan to be developed for the client will recognize these possibilities as well (Daley et al, 2002). This preliminary investigation focused on assessing the client, developing the treatment plan and establishing long term case management systems.

An assessment of the provided symptoms of her addiction, history of substance abuse, her mental status as well as capacity for intervention participation and resources in terms of social support. Based on the guideline provided by the American Psychiatric Association (APA) regarding substance dependency, the client’s addiction and dependency is confirmed by excessive, inappropriate and uncontrollable cocaine use, deterioration of relationships and development of social conflicts including legal or judicial conflicts, increased tolerance for cocaine and early signs of substance withdrawal (Weiner et al, 1991). Theinterviewwith the client that her cocaine use, by her estimation pning at least ten years, began recreationally and escalated. She believes that she was able to manage her cocaine use but her level of control deteriorated together with an increase in tolerance for the substance. Parallel to the escalation of her dependence was an escalation of conflicts with herfamily, friends and at work particularly if the issue involved her cocaine use. The probation order has made her realize the need to do something definitive about her addiction motivated by her reservations against further legal problems and also by not wanting to be a cliché or statistic.

Considering these factors, the treatment plan of the client will use personal and social motivations (Daley et al, 2002). The client’s level of awareness of the implications of her probation and long term and social value of her addiction indicates an awareness of the potential of treatment to address her issue (National Institute onDrug Abuse, 2005). In defining the type of treatment for the client, the intervention that will be taken should be intensive but the locale of treatment will depend significantly on her mobility particularly if there are restrictions to her movement in consideration of the orders of her probation. Considering that her stated motivations for participation in intervention are both personal and social in nature, the mode of therapy will accommodate both: the client will be asked to participate in group and individual therapy and if possible, family therapy as well (Weiner et al, 1991). Individual intervention will be conducted with a counselor to identify motivations or drivers of the client’s addiction and the group and family therapy will be conducted with the community addictions center. The treatments will be overseen by the case manager and consultations will be conducted with the client’s therapist and the community addictions center if intervention or changes in program are needed.

One of the most critical for the intervention is the establishment of support groups for the client to facilitate monitoring and reinforce the idea of her substance abuse as not just a personal issue (National Institute on Drug Abuse, 2005). The long term case management system to be designed for the client will be encouraged through future participation in programs initiated by the community addictions center. Communicationchannels that will be utilized will involve not only the client but also interviews with co-group participants, friends or family members.

Treatment Plan

This treatment plan is designed for a 28 year old of African-American descent placed under probation for possession of crack cocaine and counseling and intervention was part of the conditions of her probation. The treatment plan is as follows:

Type of Treatment - The client will be undergoing an intensive outpatient program. This will include detoxification, therapy participation and regular blood monitoring.

Mode of treatment – Participation in individual therapy with the case manager or with the appointed counselor and regular participation with a group treatment programs and if possible, monthly intervention and counseling with family. No pharmacotherapy unless there will be determination that the client’shealthhas been compromised by the prolonged used of cocaine.

Treatment providers – The community addictions center will provide the detoxification and group therapy for the client. Individual intervention will be provided through the case manager or an assigned state or local counselor. If there family therapy is to be conducted, it will be managed collaboratively by the case manager and the community additions center.   
Supervision and monitoring during probation – The case manager will be handle overall monitoring of the client’s participation and progress. If concerns will be raised regarding participation, they will be addressed personally by the case manager with the client. In the event that the client will violate condition of the treatment or of the parole, the case manager will forward the concern for judicial action

Support groups - During the course of probation, monthly meetings with the counselor will be prescribed even if the group or family therapy has been completed.

Other concerns – Social support for employment or further counseling for mental and psychological issues will also be investigated. The client’s statement of not wanting to be a cliché or statistic indicates a sentiment of social exclusion is also an area for assessment since literature suggests the direct correlation with substance abuse (Weiner et al, 1991, Daley et al, 2002). The client’s future participation to support other cases forwarded to the local addiction center will also be evaluated.

References

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