

The ASAM Criteria
Treatment Criteria for Addictive, Substance-Related
and Co-Occurring Conditions.
Using American Society of Addiction Medicine, Third Edition, 2013

Program Purpose

Clinicians involved in planning and managing care often lack a common language and systematic assessment and treatment approach that allows for effective, individualized service plans. The Patient Placement Criteria of the American Society of Addiction Medicine (ASAM) first published in 1991, provides a common language to help the field develop a broader continuum of care. The second edition (PPC-2) was published in 1996 and a revised second edition (ASAM PPC-2R) was published April, 2001. This one-day workshop is designed to introduce the new 2013 ASAM Criteria to clinicians and administrators. This workshop will explain the underlying principles of the ASAM Criteria; update participants in new developments with the ASAM Criteria and learn how to apply the ASAM Criteria in individualized treatment and care management. This workshop will enable participants to begin to implement the ASAM Criteria and through careful assessment, tailored services planning and broadening services provide a more flexible continuum of care.

Learning Objectives

Upon completion of the workshop, the participant shall be able to:

1. Demonstrate an understanding of the underlying concepts and principles of the ASAM Criteria.
2. Discuss changes made in the ASAM Criteria that include criteria for those with co-occurring mental and substance-related disorders.
3. Apply the ASAM in clinical work to broaden services and better meet the needs of clients, including co-occurring clients.

Facilitator

Ray Caesar has worked in the addictions field for over thirty years, as a clinician, educator, consultant, author, and program director. His efforts have been in both the treatment and the prevention arenas. He has authored numerous pamphlets, manuals and one book. He has extensive background in program development, having created and operated several alcohol and drug treatment programs, ranging from outpatient to residential and inpatient detoxification units. He currently works for the Oklahoma Department of Mental Health and Substance Abuse Services. In this capacity he is responsible for the implementation of the new Comprehensive Community Addiction Recovery Center model (CCARC). He is also in charge of the loan fund and development program for Oxford House as well as other housing initiatives and is the State Opioid Treatment Authority. Mr. Caesar received both his undergraduate in psychology and his graduate degree in counseling psychology from the University of Central Oklahoma in Edmond and is licensed as a professional counselor (LPC) and as an alcohol and drug counselor (LADC-MH).

Agenda

8:00 – 8:30	Registration
8:30 – 10:15	<i>Introduction to the ASAM Criteria</i>
10:15 – 10:30	Break
10:30 – 12:00	<i>How ASAM is Organized</i>
12:00 – 1:00	Lunch on your own
1:00 – 2:30	<i>How ASAM is Organized (continued)</i>
2:30 – 2:45	Break
2:45 – 4:00	<i>Improving Services through ASAM</i>
4:00 – 4:30	<i>Wrap up, Q&A, Implications for Future Directions</i>

Dates and Locations

- July 28, 2014 at Shepherd Mall, 2401 NW 23rd St. Ste. 1F, Oklahoma City, OK 73107
- August 13, 2014 at RoadBack, 102 SW "A" Avenue, Lawton, OK 73501
- August 25, 2014 at Shepherd Mall, 2401 NW 23rd St. Ste. 1F, Oklahoma City, OK 73107
- September 8, 2014 at Muscogee (Creek) Nation Housing Division Building Room #257 2nd Floor, 2951 North Wood Drive, Okmulgee, OK 74447
- September 22, 2014 at Shepherd Mall, 2401 NW 23rd St. Ste. 1F, Oklahoma City, OK 73107
- October 20, 2014 at Shepherd Mall, 2401 NW 23rd St. Ste. 1F, Oklahoma City, OK 73107
- November 17, 2014 at Shepherd Mall, 2401 NW 23rd St. Ste. 1F, Oklahoma City, OK 73107
- December 15, 2014 at Shepherd Mall, 2401 NW 23rd St. Ste. 1F, Oklahoma City, OK 73107

Training Fees

Registration for participants is \$85.00 for the full-day training. A rate of \$135.00 will apply for all registrations received within one week of the workshop. Payment may be made by check, credit card or money order only. Current ODMHSAS employees are admitted at no charge. **NO REFUNDS.**

Continuing Education Credits

The ODMHSAS Institute for Mental Health and Substance Abuse Education and Training has approved 6.5 continuing education hours through the Oklahoma State Board of Licensed Social Workers, the Oklahoma Board of Examiners of Psychologists, the Licensed Marital and Family Therapist committee, Licensed Alcohol and Drug Counselors and Licensed Professional Counselors committee. Continuing education hours are also approved for Certified Behavioral Health Case Managers and credentialed Peer Recovery Support Specialists.

Special Accommodations

Sign interpreters and/or other special accommodations required by disabled participants will be available upon advance request (please allow one week's notice). Please indicate on the registration form the type of special accommodations, if any, you require. For requests, call 405-522-8300.

REGISTRATION FORM

The ASAM Criteria

Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions

By Mail:

ODMHSAS, Human Resources Development
2401 NW 23rd Street, Suite 1F
Oklahoma City, OK 73107

By Fax: Faxed registrations are accepted at 405-522-8320

REGISTRATION INFORMATION:

Name: _____

Home Phone Number: _____

Occupation or Job Title: _____

Place of Employment: _____

Address: _____

City, State, ZIP: _____

Daytime Phone: _____

E-Mail Address: _____

**Note: If an e-mail address is included, a confirmation that your registration has been received will be e-mailed to you one week prior to the training.

I require special accommodations as follows: _____

DATES

- July 28, 2014 – Oklahoma City
- August 13, 2014 – Lawton
- August 25, 2014 – Oklahoma City
- September 8, 2014 - Okmulgee
- September 22, 2014 – Oklahoma City
- October 20, 2014 – Oklahoma City
- November 17, 2014 – Oklahoma City
- December 15, 2014 – Oklahoma City

PAYMENT

Please enclose registration payment. If paying by purchase order (PO), please mail or fax a copy of the purchase order with the name of the attendee(s) included on the PO. If paying by check or money order please make payable to ODMHSAS. Please check all boxes that apply. No Refunds.

FORM OF PAYMENT	EARLY- BIRD RATE	REGULAR RATE	ODMHSAS EMPLOYEE
<input type="checkbox"/> Check or Money Order	<input type="checkbox"/> \$85	<input type="checkbox"/> \$135	<input type="checkbox"/>
<input type="checkbox"/> Purchase Order # _____	<input type="checkbox"/> \$85	<input type="checkbox"/> \$135	
<input type="checkbox"/> Credit Card (circle one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard			

Credit card # _____ Expiration Date: _____ Cardholder signature: _____