

# What to Do While Awaiting Treatment Beds



## Q.

When inpatient treatment is recommended for a client, but no space will be available for weeks, what do we do? Do we put them in jail to keep them safe, or do we allow them to continue to be in the community using, where they are possibly a danger to others and themselves?

## A.

Programs around the country struggle with this question. The problem is not enough facility bed space to get clients into the level of care they need. Too often programs will house people in jail as they wait for a bed date, for periods ranging anywhere from a couple of weeks to months. When we house clients in jail, they start giving up and sometimes will deteriorate. Jail is also the easy route for many programs as a place where the client is “kept safe” for the community. *Adult Drug Court Best Practice Standards Volume I* discusses the principle of choosing the least restrictive environment that meets the needs or level of care of the client.

There is also a section on the use of jail to achieve sobriety or to safely house the client, indicating that this is not a best practice. There are ways to keep the client in the community while he or she is waiting for an inpatient treatment bed. These are usually highly structured, with daily check-ins, perhaps with an organization that provides day treatment. The goal is to get the client involved in recovery-based activities for which he or she can show up and get into a routine. This approach also provides a structure for the client to be engaged in the community. The following are some recommendations for keeping clients in the community during this waiting period:

- Daily check-ins with probation
- Daily check-ins at treatment
- Weekly treatment court appearances
- Weekly one-on-one treatment counselor appointments (at a minimum)
- Weekly check-ins with a judge in a different court docket (place them on the docket)
- Increased home visits
- Weekly engagement with recovery support groups (this is ideal if there is an alumni group)
- Working with a peer support specialist (check-in)
- Electronic monitoring, if that is an option



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