

SUDSP Program Specific Review Tool- 2021

#	Standard	Source	Evidence of Compliance May Include	REVIEWER GUIDELINES	Provider to complete: List evidence provided and where to locate such as page number or highlighted text in document
ASAM					
1.1	Provider has policies/procedures in place to ensure: <ul style="list-style-type: none"> ASAM Criteria is used to determine level of care All 6 Dimensions are completed with narrative based assessment(s) or progress note(s) Individualized Treatment/Service plans align with the individual's ASAM LOC Determination ASAM is used to fidelity in all situations 	MSHN Contract	Policy/procedure, treatment plan templates, QI reviews, etc.	Ensure all four items are included in policy/procedure. If some, but not all of the elements are present, the standard is partially compliant. If there is not a policy/procedure or none of the elements are present, the standard is not complaint.	
Residential					
2.1	There are policies or procedures in place to ensure TB testing is completed upon admission. With respect to clients who exhibit symptoms of active TB, policies and procedures are in place to avoid a potential spread of the disease.	Prevention Policy #02	Policy/procedure	Verify the policy/procedure addresses both TB testing and the plan to avoid potential spread of disease If one but not both of the elements are present, the standard is partially compliant. If there is not a policy/procedure or none of the elements are present, the standard is not complaint.	

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2.2	There are policies and procedures in place to ensure medical exams occur, as required.	Treatment Policy #10 LARA SUD Administrative Rules R 325.1361 (2)(a)(b) R 325.1361 (3)(a)(b)(c) R 325.1387 (8)	Policy/procedure	Ensure policies/procedures identify medical exams occur in accordance with LARA. Current language identified below: Residential and Withdrawal Management- Medical history and physical exam are included in the record. Withdrawal Management: At the time of admission and prior to any medications being prescribed or services offered, the medical director, a physician, physician's assistant, or advanced practice registered nurse shall complete and document the medical and drug history, as well as a physical examination, of the recipient.	
Peer Recovery Support Services					
3.1	Provider can demonstrate policy/procedures are in place regarding self-efficacy, community connection, quality of life, and sustained recovery.	Treatment Technical Advisory #07	Policy/procedures		
Women's Specialty Services					
4.1	Designated Provider has established eligibility requirements that include: <ul style="list-style-type: none"> Parenting/Expecting Women 	Treatment Policy #12	Policy/procedures		

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	<ul style="list-style-type: none"> Men identified as primary caregiver 				
4.2	Gender-specific programming is implemented into treatment regimen.	Treatment Policy #12	List of Didactic Topics Gender-Specific Evidence-Based Practices & Programming		
4.3	Designated women's program shall include: <ol style="list-style-type: none"> 1. Accessibility 2. Assessment 3. Psychological Development 4. Abuse/Violence/Trauma 5. Family Orientation 6. Mental Health Issues 7. Physical Health Issues 8. Legal Issues 9. Sexuality/Intimacy/Exploitation 10. Survival Skills 11. Continuing Care/Recovery Support 	Treatment Policy #12, pages 9-12 of 12	Policy/Procedure Assessment Tool Children's Needs Assessment WSS Consumer Needs Assessment Intake Documents		
Medication-Assisted Programs					
5.1	(METHADONE) There are policies & procedures in place to effectively address the following: <ul style="list-style-type: none"> off-site dosing Sunday & Holiday requirements for both 	Treatment Policy #04	Policy/procedure		

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	persons eligible and those deemed ineligible				
5.2	(METHADONE) There are written plans and procedures, which include how dosing clients on-site, as well as dispensing doses for off-site use, will be accomplished in emergency situations.	Treatment Policy #04	Policy/procedure		
5.3	Evidence the OTP can provide case management services, treatment for co-occurring disorders, peer recovery services, recovery support services internally or through referral(s).	Treatment Policy #05	Referral Agreements Program Service Descriptions		
5.4	Evidence the OTP appropriately addresses administrative discharges.	Treatment Policy #05	Policy/Procedure		
5.5	Program has medical and MAPS protocols for new & existing clients.	Admin. Rule R325.14404/2(b) Treatment Policy #05	Policy/Procedure		
5.6	Program has protocols for pregnant consumers.	Treatment Policy #05	Policy/Procedure		
5.7	Program has protocols for routine, random toxicology screens that includes program responses to screening outcomes	R325.14406 Treatment Policy #05 42CFR8.12	Policy/Procedures		

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	in accordance with State & Federal policy.				
5.8	<p>There are policies & procedures in place to effectively address the following:</p> <ul style="list-style-type: none"> physician coordination of care requirements: Prescriptions for Controlled Substances Medical Marijuana 	Treatment Policy #04, MSHN SUD Provider Manual	Policy/Procedures		
5.9	There is a policy in place to determine the necessity or advisability of a medical examination for each client as applicable	Treatment Policy #5	Policy/Procedures		
5.10	OTP has a policy/procedure in place to articulate how administrative discharges are supported.	Medicaid Provider Manual/MSHN SUD Provider Manual	Policy/procedures		
Recovery Residence					
6.1	<p>Explicit written admission criteria include:</p> <ul style="list-style-type: none"> Procedures for tenant inclusion in the decision-making processes involving new resident 	MSHN SUD Recovery Housing Technical Requirement 2016, Treatment	Provider policy & practice guidelines	<ul style="list-style-type: none"> Screenings- what form is used to screen potential residents for housing program. Should include current mental health 	

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	<ul style="list-style-type: none"> Screening requirements Application requirements 	TA #11, NARR guidelines		<p>screening (self-harm/harm-to-others, applicable criminal history, etc.)</p> <ul style="list-style-type: none"> Application – what the potential tenant completes for acceptance into provider’s housing program. Procedures – how the current tenants participate in applicant reviews to determine if applicant decisions. <p>The above bullets should be easily found in provider manual (for employees).</p>	
6.2	Explicit and posted house operational rules	MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines	<p>Policy/Procedure (ensure this is posted for all sites)</p> <p>On-site evidence of posted rules</p>	<ul style="list-style-type: none"> Rules should be included in written guidelines along w/ posting info. Reviewer to verify during onsite reviews OR provider to upload picture as evidence, etc. Include requirement – all tenants receive and initial (for consumer chart) receipt and 	

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				acknowledgement of rules.	
6.3	House operations manual on site and available to residents upon request	MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines	Written manual on-site	<ul style="list-style-type: none"> • Policy on manual upkeep/maintenance • Notes/policy/procedure on how manual is available to consumers 	
6.4	A professional code of ethics agreement is signed by all management and staff, volunteers and peer support.	MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines	Policy and signed agreements on site	<ul style="list-style-type: none"> • Move to personnel file check (Discuss w/ Amy) • Provider to include signed ethics for each staff person requested for review • Info should be included in employee manual 	
6.5	NARR membership is current and documented.	MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines	Documentation of membership	<ul style="list-style-type: none"> • Upload Proof of Membership 	
6.6	Evidence of weekly house meetings	MSHN SUD Recovery Housing	Program Policy/Procedure	<ul style="list-style-type: none"> • Meeting minutes should be kept (electronically) 	

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		Technical Requirement 2016, Treatment TA #11, NARR guidelines	Meeting logs w/ attendance Meeting topics	<ul style="list-style-type: none"> • Include facilitator, date/time, sign-in sheet 	
6.7	Evidence of recovery activities & community-engagement efforts	MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines	Program Materials List of Community Engagement Efforts (event, how disseminated to consumers, etc.) Referrals Coordination of Care Evidence	<ul style="list-style-type: none"> • Provider should keep list of offered community engagement efforts & additional details (# of participants from housing program, etc.) • List/location of volunteer opportunities, etc. • Recommendation – review this standard w/ team members and develop appropriate processes for tracking... include name of event, how info disseminated to tenants, participation, etc.) • Referrals/Coordination of Care/etc. 	
6.8	Protocols for coordination of care with SUD Treatment Providers	MSHN SUD Recovery Housing Technical Requirement 2016, Treatment	Policy/procedure Meeting Minutes (include discussion topics, attendance, etc.) Progress Notes TECC Form	<ul style="list-style-type: none"> • Specific to SUD Treatment providers (should include regardless of housing program being internal or external) 	

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		TA #11, NARR guidelines		<ul style="list-style-type: none"> Use the TECC forms via MSHN Handbook 	
6.9	Evidence of staff availability 24/7/365 in case a need arises or emergent situation.	NARR MSHN SUD Provider Manual	<p>Agency on-call schedule or list of available staff to contact.</p> <p>Policies/procedures relevant to staffing coverage.</p>	<ul style="list-style-type: none"> Staffing schedule Coverage procedure/policy – who is on call, how do clients know who to contact for emergency if no staff onsite This should include written policy//procedure(s) 	
6.10	Evidence of provider notification with person seeking services of requirement to be engaged with an outpatient provider paneled with MSHN. Person needs to be engaged with outpatient provider for at least one service in a 30-day period of time.	MSHN SUD Recovery Housing Contract	Policies/procedure		