

Plan of Correction

Program Name: ROADS Outpatient Treatment Program, Inc.	Date Submitted: 11/21/2019	Date Due: 12/21/2019
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Administrative POC-1

<p>Rule #: Contract Attachment 1</p>	<p>Contract Attachment: Populations to be Served It is the intent of the Division of Behavioral Health to fund services in South Dakota for residents living in South Dakota. It is the Division's expectation that state funds be targeted to those citizens of South Dakota in need of substance use disorder and gambling treatment services.</p> <p>Priority Populations: Target populations to be served under the contract, in order of priority for State and Federal funds paid to the agency, and in accordance with 45 CFR 96.124 and 45 CFR 96.131, are as follows:</p> <ol style="list-style-type: none"> 1) Pregnant Women <ol style="list-style-type: none"> a) Agencies must ensure that each pregnant woman in the state who seeks or is referred for and would benefit from treatment is given preference in admissions to treatment facilities receiving block grant funds. b) The agency shall publicize by public service announcement or street outreach programs the availability to such women of these treatment services designed for pregnant women and women with dependent children. c) Services for pregnant women/women with dependent children must comply with the provisions set forth in 45 CFR Sec. 96.124. d) Pregnant Women who are also Intravenous Drug Users are the highest priority for services. 2) Intravenous Drug Users <ol style="list-style-type: none"> a) The agency shall develop and implement a program of outreach services to identify individuals in need of treatment for their intravenous drug use and to encourage the individual to undergo treatment for such use. b) The agency shall maintain a record of outreach services provided to intravenous drug users. c) Services for intravenous drug users must comply with the provisions set forth in 45 CFR 96.124 and 45 CFR 96.131. d) The agency shall develop and implement a policy to ensure that they will not distribute sterile needles or distribute bleach for the purpose of cleaning needles and shall develop and implement a policy to ensure they will not carry out any testing for the acquired immune deficiency syndrome without appropriate pre- and post-test counseling. 3) Adolescents
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Limited English Proficiency Policy	
<ol style="list-style-type: none"> 1) The agency shall develop and implement a Limited English Proficiency Policy (LEP), as a condition for funding under this contract agreement to ensure that LEP individuals are provided with an opportunity to participate in and understand all provided services. 2) The means of effective communication may be through interpreters or the translation of written material as deemed necessary by the Agency. 	
Area of Noncompliance: These policies were missing in review of the policy and procedure manual.	
Corrective Action (policy/procedure, training, environmental changes, etc): Historically ROADS has included "Populations to be Served" in our policy and procedures. It was inadvertently omitted from our most recent manual update. This was corrected.	Anticipated Date Achieved/Implemented: Date December 12, 2019
Supporting Evidence: See attached	Person Responsible: Miranda Sales
How Maintained: Initial screening includes all above mentioned issues	Board Notified: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>

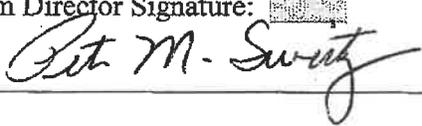
Administrative POC-2	
Rule #: ARSD 67:61:05:01	Rule Statement: Tuberculin screening requirements. Tuberculin screening requirements for employees are as follows: <ol style="list-style-type: none"> 1) Each new staff member, intern, and volunteer shall receive the two-step method of tuberculin skin test or a TB blood assay test to establish a baseline within 14 days of employment. Any two documented tuberculin skin tests completed within a 12 month period before the date of employment can be considered a two-step or one TB blood assay test completed within a 12 month period before employment can be considered an adequate baseline test. Skin testing or TB blood assay tests are not required if a new staff, intern or volunteer provides documentation of the last skin testing completed within the prior 12 months. Skin testing or TB blood assay tests are not required if documentation is provided of a previous position reaction to either test; 2) A new staff member, intern, or volunteer who provides documentation of a positive reaction to the tuberculin skin test or TB blood assay test shall have a medical evaluation and chest X-ray to determine the presence or absence of the active disease; 3) Each staff member, intern and volunteer with a positive reaction to the tuberculin skin test or TB blood assay test shall be evaluated annually by a licensed physician, physician assistant, nurse practitioner, clinical nurse specialist, or a nurse and a record maintained of the presence or absence of symptoms of <i>Mycobacterium tuberculosis</i>. If this evaluation results in suspicion of active tuberculosis, the licensed physician shall refer the staff member, intern, or volunteer for further medical evaluation to confirm the presence or absence of tuberculosis; and 4) Any employee confirmed or suspected to have infectious tuberculosis shall be restricted from employment until a physician determines that the employee is no longer infectious.

Area of Noncompliance: Two personnel files were reviewed, and one was missing documentation of the first required TB skin test completed within the 14 days of hire. The second personnel file contained no documentation of the second TB skin test occurring within the first twelve months of hire.	
Corrective Action (policy/procedure, training, environmental changes, etc): Individual who did not have second test within the first 12 months will complete this procedure and provide documentation to the State within the next 30 days.	Anticipated Date Achieved/Implemented: Date January 12, 2020
Supporting Evidence: The test results will be forwarded within the next 30 days.	Person Responsible: Miranda Sales
How Maintained: ROADS will make sure that all new employees complete TB testing as required.	Board Notified: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>

Client Chart POC-1	
Rule #: ARSD 67:61:07:10	Rule Statement: Transfer or discharge summary. An addiction counselor or counselor trainee shall complete a transfer or discharge summary for any client within five working days after the client is discharged regardless of the reason for discharge. A transfer or discharge summary of the client's problems, course of treatment, and progress toward planned goals and objectives identified in the treatment plan is maintained in the client case record. A process shall be in place to ensure that the transfer or discharge is completed in the MIS. When a client prematurely discontinues services, reasonable attempts shall be made and documented by the agency to re-engage the client into services if appropriate.
Area of Noncompliance: The transfer or discharge summaries were missing one or more of the required elements.	
Corrective Action (policy/procedure, training, environmental changes, etc): Each ROADS counselor was provided with a copy of our policy and procedure regarding clients who prematurely discontinued services.	Anticipated Date Achieved/Implemented: Date December 12, 2019
Supporting Evidence: A copy of policy was distributed to each counselor, initialed, and placed in procedure book.	Person Responsible: All ROADS Counselors
How Maintained: ROADS will continue to contact clients who discharge prematurely and make a more concerted effort to document in discharge or transfer summaries.	Board Notified: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/>

Client Chart POC-2	
Rule #: ARSD 67:61:07:12	Rule Statement: Tuberculin screening requirements. A designated staff member shall conduct tuberculin screening for the absence or presence of symptoms with each client newly admitted to outpatient treatment, intensive outpatient, day treatment, clinically-managed low intensity residential treatment, clinically managed detoxification, and intensive inpatient treatment within 24 hours of admission to determine if the client has had any of the following

<p>symptoms within the previous three months:</p> <ul style="list-style-type: none"> (1) Productive cough for a two to three week duration; (2) Unexplained night sweats; (3) Unexplained fevers; or (4) Unexplained weight loss. <p>Any client determined to have one or more of the above symptoms within the last three months shall be immediately referred to a licensed physician for a medical evaluation to determine the absence or presence of active disease. A Mantoux skin test may or may not be done during this evaluation based on the opinion of the evaluating physician. Any client confirmed or suspected to have infectious tuberculosis shall be excluded from services until the client is determined to no longer be infectious by the physician. Any client in which infectious tuberculosis is ruled out shall provide a written statement from the evaluating physician before being allowed entry for services.</p>	
<p>Area of Noncompliance: TB screen was not completed within 24 hours of time of admission for several charts.</p>	
<p>Corrective Action (policy/procedure, training, environmental changes, etc): ROADS will change the procedure for completing TB screens within 24 hours of beginning services.</p>	<p>Anticipated Date Achieved/Implemented:</p> <p>Date December 12, 2019</p>
<p>Supporting Evidence: N/A</p>	<p>Person Responsible: Counselors</p>
<p>How Maintained: TB forms will be completed on the day admission or within 24 hours.</p>	<p>Board Notified: Y <input checked="" type="checkbox"/> N <input type="checkbox"/> n/a <input type="checkbox"/></p>

<p>Program Director Signature: </p>	<p>Date: <u>December 12, 2019</u></p>
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Please email or send Plan of Correction to:

Accreditation Program
 Department of Social Services
 Division of Behavioral Health
 3900 West Technology Circle, Suite 1
 Sioux Falls, SD 57106

Email Address: DSSBHAcred@state.sd.us

SECTION: Populations to be Served

REVIEWED BY: ROADS Outpatient Treatment Program, Inc. Board of Directors

REVIEW DATE: December 12, 2019

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Priority Populations:

ROADS will ensure that pregnant women and IV drug users will be given priority in regard to admission into services, waiting lists, and appropriate referrals. If there is a waiting list for recommended level of care, ROADS will place them in individual counseling and other appropriate support services until they can begin treatment. ROADS will comply with 45 CFR 96.135 in regard to IV drug users.

Pregnant women who are injecting drugs will be given the highest priority. Appropriate referrals will be made for prenatal care with 48 hours of initial clinical assessment.

ROADS will make every effort to maintain contact with the high risk individual waiting for admission.

Capacity Reporting:

ROADS will complete the providers capacity information sheet after the facility reaches 90% total capacity.

Limited English Proficiency Policy:

ROADS will make every effort to ensure that persons with limited English proficiency are provided with an opportunity to participate in and understand all services.