

Strong Families - South Dakota's Foundation and Our Future

Office of Licensing and Accreditation

Accreditation Survey Report for Substance Use Disorder Treatment Providers ARSD 67:61 November 14, 2024

Aliive – Roberts County

2 5th Ave E Sisseton, SD 57262 Levels of Care: Prevention

1. Govern	1. Governance			<u>N/A</u>
k Ii	Governmental agency, federally recognized tribe, business corporation, non-profit corporation or imited liability company (0.5 and 1.0 only) 67:61:03:01)			
	Policy for not denying clients equal access to services 67:61:03:04)	<u> </u>		
	Annual, entity-wide, independent inancial audit completed (67:61:04:05)	<u>√</u>		
	Business hours posted in prominent place on premises (67:61:04:09)	<u>√</u>		
	Board of directors meets at least quarterly and keeps minutes of all meetings (67:61:03:03)	<u>√</u>		
	Jp-to-date policy and procedure manual 67:61:04:01)	<u>√</u>		
g. l	Jp-to-date organizational chart (67:61:05:09)	<u> </u>		
h. S	Sentinel event policy (67:61:02:21)			
i. F	Policy for notifying DSS of changes (67:61:02:20)			
Comments:				
2. Progra	m Services	<u>Yes</u>	<u>No</u>	N/A
	Schedule of fees based on client ability to pay 67:61:04:06)			
	Policy prohibiting client abuse, neglect, and exploitation (67:61:06:03)			
c. (Client rights policy (67:61:06:01; 67:61:06:02)			
d. (Client grievance policy (67:61:06:04)	<u>√</u> _		

e.	Submits accurate statistical data (67:61:04:02)	<u> </u>	
f.	Discharge policy (67:61:06:07)		 <u> </u>
g.	Client orientation policy and procedure (67:61:04:07)		
h.	Policy for responding to medical emergencies (67:61:04:09)		 <u>√</u>
i.	Electronic or written directory with name address, and phone number of support services (67:61:04:10)	<u> </u>	
j.	In level 3.1, 3.2D, and 3.7 facilities, staff is on duty at all times who is trained to respond to fires and natural disasters (67:61:04:09)		

Comments:

3.	3. <u>Personnel</u>		<u>Yes</u>	<u>No</u>	N/A
	a.	Orientation completed within 10 days of hire with all required components (64:61:05:05)			
	b.	Office of Inspector General Medicaid exclusion list check (67:61:05:12)			
	C.	In 3.2D facility, all counseling and supervisory staff are trained in emergency first aid, CPR and responding to natural disasters; Documentation in file (67:61:17:06)			✓_
	d.	Policy and procedure for supervising employees, volunteers, and interns (67:61:05:06)			
	e.	Two-step TB test or blood assay test within 2 weeks of hire or 12 months before hire (67:61:05:01)	<u>√</u>		

	f.	Employee TB policies and procedures (67:61:05:01)			
	g.	Complete employee records; policies to maintain those records (67:61:05:08)			
Comme	ents:				
4.	Case	Record Management	<u>Yes</u>	<u>No</u>	N/A
	a.	Procedures for closing inactive client records for inpatient programs within 3 days and outpatient programs for 30 days [67:61:07:04(1-2)]			<u> </u>
	b.	Policy for case records to be retained for at least 6 years [67:61:07:04(3)]			
	c.	Established ongoing compliance review process (67:61:04:03)			
Comments:					
5.	Envir	onmental/Sanitation/Safety/Fire Prevention	<u>Yes</u>	No	N/A
	a.	Health, safety, sanitation, and disaster plan (67:61:10:01)			
Comme	ents:				
6.	Prev	<u>ention</u>	<u>Yes</u>	<u>No</u>	<u>N/A</u>
		Encompass current research, theory, and practice-based strategies and activities implemented through structured prevention strategies. Delineate a work plan to outline scope of services. Found on evidence-based programming list. Made available to the public and staff (67:61:11:01). Will offer one or more of the following, with written	<u>√</u>		
		description available to staff members, the public and DSS. Includes target population, program goals,			

	•	nd outcomes (67:61:11:03)			
	i.	Information dissemination services	<u>✓</u>		
	ii.	Education services			
	iii.	Alternative services			
	iv.	Problem identification and referral services			
	v.	Community-based services			
	vi.	Environmental services			
c.	Evidence base	ed interventions (67:61:11:05)			
d.		nformation and referral sources that licly (67:61:11:05)			
e.	Maintains a r (67:61:11:07)	ecord of all prevention activities including:			
	i.	Record of presenters and participants	<u> </u>		
	ii.	Demographics of participants including age, race, gender			
	iii.	Record of all program activities	<u>_</u>		
	iv.	Copies of all programmatic materials			
f.	Conducts ann	ual satisfaction surveys (67:61:11:08)			
g.	. Conducts participant evaluations after each				
h.	Conducts pre (67:61:11:08)	- and post-tests for all presentations			
i.	programming	quality assurance review of its with an annual summary report made ne board of directors, agency staff, and DSS			

j.	Staff have completed Substance Abuse Prevention	 	
	Skills Training or Foundations of Prevention within		
	one year of hire (67:61:05:04)		

Comments: Alive – Roberts County completes annual satisfaction surveys, participant evaluations, and pre- and post- tests. However, Alive – Roberts County does not complete a summary of their quality assurance review to be made available to the board, staff, Department of Social Services, or public.

7. Signatures

Х	Three Year Accreditation (100%-90%)
	Two Year Accreditation (89.9% - 70%)
	Probation (69.9% and below)
	One Year Provisional Accreditation (70% and above)

Chris Kenyon	December 3, 2024	
Program Specialist	Date	
November 14, 2024		
Date of Site Visit		
Muriel Nelson	December 3, 2024	
Program Manager	Date	