Accreditation Report – Avera Addiction Care Center - Aberdeen

Date of Review: August 30-31, 2021

Substance Use Disorder Score: 100%

REVIEW PROCESS:
Avera Addiction Care Center (AACC) was reviewed by The Department of Social Services, Office of Licensing and Accreditation for adherence to the Administrative Rules of South Dakota (ARSD) on August 30-31, 2021. This report contains the following:

- Agency Summary
- Interview Results
- Stakeholder Results
- Administrative and Client Case Record Findings
- Areas of Compliance
- Areas of Recommendations
- Areas Requiring a Plan of Correction
- Prior Areas Addressed in Previous Review
- Accreditation Results

The accreditation results are derived from an administrative score which includes the scoring of policies and procedures, personnel files, the client case record scores, and an overall cumulative score.

AGENCY SUMMARY:
Avera Addiction Care Center is a Substance Use Disorder agency located in Aberdeen, S.D. The agency is seeking their second provisional accreditation for clinically-managed residential detoxification program and medically-monitored intensive inpatient treatment program. Due to Avera seeing no clients for clinically-managed residential detoxification program, the Office if Licensing and Accreditation did not review that level of care and thus that level of care will not be reflected in this report.

Kelli Fischer is the current director of Avera Addiction Care Center. According to Avera’s website, Avera Addiction Care Center “treats individuals with respect and dignity, and welcomes family members as an integral part of therapy. Avera Addiction Care Center – Aberdeen treats addiction related to alcohol, drugs or gambling, as well as the broad scope of problems associated with these illnesses. Our philosophy is based on the 12 steps of Alcoholics, Gamblers, and Narcotics Anonymous.” Avera Addiction Care Center – Aberdeen covers a large area including the entire Northeastern part of South Dakota.
INTERVIEW RESULTS:
Description: The Department of Social Services, Office of Licensing and Accreditation completes confidential interviews with consenting clients and staff of the agency as part of the accreditation process. The interviews are not a scored component of the accreditation review. However, the information obtained in the interviews is used for quality improvement of the agency.

Office of Licensing and Accreditation interviewed one client. No concerns were noted. The client spoke highly of AACC. The client stated that if not for AACC, and specifically his counselor, he may be dead.

Four employees were interviewed. All employees interviewed indicated AACC provides excellent training to new employees, open door policies between clinicians and supervisors, and high attention to detail.

STAKEHOLDER SURVEY:
Description: Stakeholder Survey data is collected once a year for all accredited mental health and substance use disorder agencies. As part of the survey process, accredited agencies are asked to share the survey with at least three stakeholders in their community. In addition, feedback is gathered from the Department of Corrections (DOC), Unified Judicial System (UJS), and Child Protection Services (CPS) regarding the accredited agencies. The surveys are not a scored component of the accreditation review. However, the information obtained in the survey results is used for quality improvement of the agency.

Stakeholder results were sent out and collected over the past three years. Avera Addiction Care Center had a total of 16 responses. There were no concerns.

It should be noted that the stakeholder results were not in response to medically-managed intensive inpatient treatment, as it is a new level of care.

AREAS OF COMPLIANCE FOR SUBSTANCE USE DISORDER SERVICES:
Description: The following areas were identified as areas the agency demonstrated compliance to administrative rules regarding SUD services.

1. According to ARSD 67:61:07:05 an addiction counselor or addiction counselor trainee shall meet with the client and the client’s family if appropriate, to complete an integrated assessment, within 30 days of
intake. The integrated assessment includes both functional and diagnostic components. The assessment shall establish the historical development and dysfunctional nature of the client’s alcohol and drug abuse or dependence and shall assess the client’s treatment needs. The assessment shall be recorded in the client’s case record and include the following:

- Strengths of the client and the client’s family if appropriate, as well as previous periods of success and the strengths that contributed to that success. Identification of potential resources within the family, if applicable
- Presenting problems or issues that indicate a need for services
- Identification of readiness for change for problem areas, including motivation and supports for making such changes
- Current substance use and relevant treatment history, including attention to previous mental health and substance use disorder or gambling treatment and periods of success, psychiatric hospital admissions, psychotropic and other medications, relapse history or potential for relapse, physical illness, and hospitalization
- Relevant family history, including family relationship dynamics and family psychiatric and substance abuse history
- Family and relationship issues along with social needs
- Educational history and needs
- Legal issues
- Living environment or housing
- Safety needs and risks with regards to physical acting out, health conditions, acute intoxication, or risk of withdrawal
- Past or current indications of trauma, domestic violence, or both if applicable
- Vocational and financial history and needs
- Behavioral observations or mental status, for example, a description of whether affect and mood are congruent or whether any hallucinations or delusions are present
- Formulation of a diagnosis, including documentation of co-occurring medical, developmental disability, mental health, substance use disorder, or gambling issues or a combination of these based on integrated screening
- Eligibility determination, including level of care determination for substance use services, or SMI or SED for mental health services, or both if applicable
- Clinician’s signature, credentials, and date; and
- Clinical supervisor’s signature, credentials, and date verifying review of the assessment and agreement with the initial diagnosis or
formulation of the initial diagnosis in cases where the staff does not have the education or training to make a diagnosis.

All files reviewed had integrated assessments completed in full and on time. The assessments had a template to ensure all necessary ARSD requirements were met, but also had comment sections throughout, allowing the clinician to expand on information, provide and accurate diagnosis and refer the client to the most appropriate level of care.

2. According to ARSD 67:61:07:08, all programs, except prevention programs, shall record and maintain a minimum of one progress note weekly, when services are provided.

All files reviewed had a minimum of one progress note documented per week.

AREAS OF RECOMMENDATION FOR SUBSTANCE USE DISORDER SERVICES:
Description: The following areas is identified as areas that the agency is recommended to review and ensure are corrected. The areas identified met minimum standards which do not require a plan of correction at this time; however, if they continue to be found out of compliance on the next accreditation review, could become future areas of non-compliance requiring a plan of correction.

Avera Addiction Care Center will need to work closely with the Division of Behavioral Health to ensure they are meeting the needs of clients requiring detoxification, and referring clients to the appropriate level of care.

AREAS REQUIRED FOR PLANS OF CORRECTION FOR SUBSTANCE USE DISORDER SERVICES:
Description: The following areas will require a plan of correction to address the rule of non-compliance which shall include an updated policy and/or procedure, a time frame for implementation of this procedure, the staff position or title responsible for implementation and the staff position or title responsible for ensuring continued compliance of the rule.

There were no areas requiring plans of correction.
PRIOR AREAS REQUIRING A PLAN OF CORRECTION FOR SUBSTANCE USE DISORDER SERVICES:

Description: This review was for provisional accreditation for medically-managed intensive residential treatment, and thus Avera Addiction Care Center has not been reviewed for that level of care before.

SUBSTANCE USE DISORDER ACCREDITATION RESULTS:

Administrative Review Score: **100%**
Combined Client Chart Review Score: **100%**
Cumulative Score: **100%**

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<tr>
<th>Accreditation Level</th>
<th>Score Range</th>
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<td>X One Year Provisional Accreditation</td>
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