Accreditation Report – Choices Recovery Services, Inc.
Date of Review: June 9, 2022
Accreditation Outcome: Three Year Accreditation

REVIEW PROCESS:
Choices Recovery Services, Inc. was reviewed by The Department of Social Services, Office of Licensing and Accreditation for adherence to the Administrative Rules of South Dakota (ARSD) in regard to Substance Use Disorders on June 9, 2022. This report contains the following:

- Agency Summary
- Interview Results
- Stakeholder Results
- Administrative and Client Case Record Findings
- Areas of Recommendation
- 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 and personnel files, the client case record scores, and an overall cumulative score. The level of accreditation status is based on the overall cumulative score.

AGENCY SUMMARY:
Choices Recovery Services, Inc. is an outpatient substance use disorder agency in Sioux Falls, SD. Choices Recovery Services looks to renew accreditation for outpatient SUD services.

Heather Mousel is the executive director and clinical director of Choices Recovery Services. Not only does Choices Recovery Services provide outpatient treatment services at their outpatient location, they also complete treatment needs assessments for individuals at the Minnehaha County Jail. According to their website, Choices Recovery Services views addiction as a health problem rather than a moral or legal problem, and take a pro-active approach to help people in their recovery. Choices Recovery Services wants to help people make positive changes that will bring about positive changes.
Choices Recovery Services works closely with the Minnehaha County Jail, attorneys, probation and parole officers, and other treatment providers throughout 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.

Interviews were completed with two agency staff. There were no concerns noted. Staff discussed how their small caseload (about 45 active clients) allows them to develop close professional relationships with clients and individualize treatment plans to better assist their clients in recovery. Staff also noted excellent communication within the agency.

Interviews were completed with two active clients, one who is currently in intensive outpatient treatment, and one in aftercare. One client shared that he has completed treatment four times in the past, but Choices Recovery Services is the first place he felt he was given the tools and support to succeed in recovery. Another client noted that she had never been in treatment before and was scared when she started, but her counselor made her feel comfortable, and she now feels like she can talk to her counselor about anything.

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. Choices Recovery received a total of 27 stakeholder responses. Stakeholders included court staff, other treatment
agencies, and schools. Positive stakeholder comments mentioned how flexible Choices Recovery Services is for clients and that they communicate well. Stakeholders also noted that Choices Recovery Services is responsive to needs in the community. There were no negative comments from stakeholders.

AREAS OF RECOMMENDATION

Description: The following area is identified as an area that the agency is recommended to review and ensure is corrected. The area does not require a plan of correction at this time, however, if it is not corrected may be found out of compliance and require a plan of correction in the future.

1. During this review, The Office of Licensing and Accreditation noticed incorrect dates on integrated assessments, treatment plans, and discharge summaries. Choices Recovery Services attributed these discrepancies to an error in their Electronic Health Record system and provided a letter from the electronic health record provider to confirm this. This review was able to find correct dates in most files through clinical documentation, however it is recommended Choices Recovery Services remedies the Electronic Health Record error so as not to appear out of compliance regarding dates of documentation.

AREAS REQUIRED FOR PLANS OF CORRECTION:

Description: The following areas will require a plan of correction to address the rules 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 these rules.

1. According to ARSD 67:61:05:12, each agency shall routinely check the Office of Inspector General’s List of Excluded Individuals and Entities to ensure that each new hire as well as any current employee is not on the excluded list. No payment may be received for services furnished by an excluded individual. Documentation that this has been completed shall be placed in the employee’s personnel file.

Both personnel files reviewed contained evidence of the Medicaid Exclusion List check upon hire, but neither file contained further checks of the list. To meet the “routinely” requirement, the Office of Licensing and
Accreditation recommends completing the check at least annually for each employee.

2. According to 67:61:07:05(1), an addiction counselor or counselor trainee shall develop an individualized treatment plan based upon the integrated assessment for each client admitted to an outpatient treatment program, intensive outpatient treatment program, day treatment program, clinically-managed low-intensity residential treatment program, or medically-monitored intensive inpatient treatment program. Evidence of the client’s meaningful involvement in formulating the plan shall be documented in the file.

The individualized treatment plan shall be developed within ten calendar days of the client’s admission for an intensive outpatient treatment program.

The individualized treatment plan shall be developed within 30 calendar days of the client’s admission for a counseling services program.

All ten client files reviewed were missing strengths of the client.

3. According to ARSD 67:61:07:06, an addiction counselor or counselor trainee shall develop an individualized treatment plan based upon the integrated assessment for each client admitted to an outpatient treatment program, intensive outpatient treatment program, day treatment program, clinically-managed low-intensity residential treatment program, or medically-monitored intensive inpatient treatment program. Evidence of the client’s meaningful involvement in formulating the plan shall be documented in the file.

The individualized treatment plan shall be developed within ten calendar days of the client’s admission for an intensive outpatient treatment program.

The individualized treatment plan shall be developed within 30 calendar days of the client’s admission for a counseling services program.

All ten reviewed client files contained completed treatment plans, however:
Four out of six reviewed intensive outpatient treatment files did not have treatment plans completed within ten calendar days of intake. Two out of four reviewed outpatient treatment files did not have treatment plans completed within 30 days of intake.

4. According to ARSD 67:61:07:10, 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.

All seven applicable reviewed client files contained completed discharge summaries, however three out of seven of those discharge summaries were not completed within five working days of discharge.

PRIOR AREAS REQUIRING A PLAN OF CORRECTION:
Description: Choices Recovery Services, Inc. was last reviewed by the Department of Social Services, Office of Licensing and Accreditation in June 2019. The 2019 review identified two areas requiring a plan of correction. One of those areas was found to be resolved during this review, and one area remains an area needing a plan of correction.

ACCREDITATION RESULTS:

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<th>Three Year Accreditation (90%-100%)</th>
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Two Year Accreditation (70%-89%)

Probation (69% and below)