

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 September 6, 2024

Michael Glynn Memorial Coalition

416 N. Main St. White River, SD Levels of Care: Prevention

1. Governance			<u>No</u>	<u>N/A</u>
a.	<ul> <li>a. Governmental agency, federally recognized tribe, business corporation, non-profit corporation or limited liability company (0.5 and 1.0 only) (67:61:03:01)</li> </ul>			
b.	Policy for not denying clients equal access to services (67:61:03:04)			
C.	Annual, entity-wide, independent financial audit completed (67:61:04:05)			
d.	Business hours posted in prominent place on premises (67:61:04:09)			
e.	Board of directors meets at least quarterly and keeps minutes of all meetings (67:61:03:03)			
f.	Up-to-date policy and procedure manual (67:61:04:01)			
g.	Up-to-date organizational chart (67:61:05:09)			
h.	Sentinel event policy (67:61:02:21)			
i.	Policy for notifying DSS of changes (67:61:02:20)	<u> </u>		
Comments:				
2. Progr	am Services	<u>Yes</u>	<u>No</u>	<u>N/A</u>
a.	Schedule of fees based on client ability to pay (67:61:04:06)			
b.	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)		 
f.	Discharge policy (67:61:06:07)		 <u>√</u> _
g.	Client orientation policy and procedure (67:61:04:07)		 <u>√</u>
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. Personnel	<u>Yes</u>	<u>No</u>	<u>N/A</u>
<ul> <li>a. Orientation completed within 10 days of hire with all required components (64:61:05:05)</li> </ul>			
b. Office of Inspector General Medicaid exclusion list check (67:61:05:12)			
<ul> <li>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)</li> </ul>			<u> </u>
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 at (67:61:05:01)	nd procedures			
	g.	Complete employee record to maintain those record	•			
Comm	ents:					
4.	Prev	ention_		<u>Yes</u>	<u>No</u>	N/A
	a.	based strategies and ac structured prevention s plan to outline scope of	earch, theory, and practice- ctivities implemented through strategies. Delineate a work f services. Found on evidence- t. Made available to the public	<u> </u>		
	b.	Will offer one or more of the following, with written description available to staff members, the public and DSS. Includes target population, program goals, scope of services, measurable objectives, program evaluations and outcomes (67:61:11:03)		./		
		i. Informat	tion dissemination services	<u>_v_</u> _		
		ii. Educatio	on services	<u> </u>		
		iii. Alternat	ive services			
		iv. Problem services	identification and referral			<u>√</u>
		v. Commur	nity-based services			
		vi. Environr	mental services			<u> </u>
	c.	Evidence based interventions (67:61:11:05)  Database of information and referral sources that is posted publicly (67:61:11:05)				
	d.					
	e.	Maintains a record of a (67:61:11:07)	II prevention activities including:			

	i.	Record of presenters and participants		 
	ii.	Demographics of participants including age, race, gender	<u>√</u>	 
	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 presentation (67:61:11:08)			 
h.	Conducts pre- and post-tests for all presentations (67:61:11:08)			 
i.	Completes a quality assurance review of its programming with an annual summary report made available to the board of directors, agency staff, and DSS			 
j.	Skills Training	npleted Substance Abuse Prevention or Foundations of Prevention within re (67:61:05:04)		 

#### Comments:

Michael Glynn Memorial Coalition completed participant evaluations for most presentations and programs, but does not do so for Life Skills programming.

## 5. Signatures

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

Program Specialist	 Date	
Date of Site Visit		
Program Manager	 	