Office of Licensing and Accreditation

Accreditation Survey Report
for Substance Use Disorder Treatment Providers
ARSD 67:61
May 9, 2024

Northern State University Community Coalition
1200 S Jay Street
Student Center 230
Aberdeen, SD 57401
Levels of Care: Prevention

1. **Governance**	Yes	No	N/A
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)	✓	___	___
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)	✓	___	___

Comments:

2. **Program Services**	Yes	No	N/A
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)	✓	___	___

e. Submits accurate statistical data (67:61:04:02) ✓ ____ ____

f. Discharge policy (67:61:06:07) ____ ____ ✓

g. Client orientation policy and procedure (67:61:04:07) ____ ____ ✓

h. Policy for responding to medical emergencies (67:61:04:09) ____ ____ ✓

i. Electronic or written directory with name address, and phone number of support services (67:61:04:10) ✓ ____ ____

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

	Yes	No	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)	✓		

f. Employee TB policies and procedures (67:61:05:01) ✓ ___ ___

g. Complete employee records; policies to maintain those records (67:61:05:08) ✓ ___ ___

Comments:

4. Case Record Management	Yes	No	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)]			✓
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. Prevention	Yes	No	N/A
a. 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).	✓		
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. Information dissemination services	✓		
ii. Education services	✓		
iii. Alternative services	✓		

      iv.   Problem identification and referral   ✓   ____ ____
              services

      v.   Community-based services   ✓   ____ ____

      vi.   Environmental services   ✓   ____ ____

c. Evidence based interventions (67:61:11:05)   ✓   ____ ____

d. Database of information and referral sources that   ✓   ____ ____
    is posted publicly (67:61:11:05)

e. Maintains a record of all prevention activities including:
    (67:61:11:07)

      i.   Record of presenters and participants   ✓   ____ ____

      ii.   Demographics of participants including   ✓   ____ ____
              age, race, gender

      iii.   Record of all program activities   ✓   ____ ____

      iv.   Copies of all programmatic materials   ✓   ____ ____

f. Conducts annual 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. Staff have completed Substance Abuse Prevention   ✓   ____ ____
    Skills Training or Foundations of Prevention within
    one year of hire (67:61:05:04)

Comments:

6. Signatures

	Three Year Accreditation (100%-90%)
	Two Year Accreditation (89.9% - 70%)
	Probation (69.9% and below)
X	**One Year Accreditation after Probation**

_____*Chris Kenyon*_____   ___May 14, 2024_____
Chris Kenyon, Program Specialist   Date

_____May 9, 2024_____
Date of Site Visit

_____*Muriel Nelson*_____   ___May 17, 2024_____
Muriel Nelson, Program Manager   Date