
Accreditation Report – ROADS Outpatient Treatment Program

Date of Review: August 19, 2021

Accreditation Outcome: Three Year Accreditation

REVIEW PROCESS:

ROADS Outpatient Treatment Program 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 19, 2021. This report contains the following:

- Agency Summary
- Interview Results
- Stakeholder Results
- Administrative and Client Case Record Findings
- Areas of Strengths
- 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 accumulative score. The level of accreditation status is based on the overall accumulative score.

AGENCY SUMMARY:

ROADS Outpatient Treatment Program is a non-profit Substance Use Disorder agency located in Rapid City S.D. The agency is seeking to renew accreditation for outpatient substance use disorder services (SUD).

The current director, Peter Swietzer, started ROADS Outpatient Treatment Program in 1986. ROADS Outpatient Treatment Program has a good relationship with the court system and other agencies within the community.

ROADS Outpatient Treatment Program is a small agency, and administration reports there is no wait time to start services.

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.

An interview was completed with a current client. No concerns were noted. The client stated that ROADS Outpatient Treatment Program has a great group of counselors and staff. They make clients feel comfortable but hold the client accountable.

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. ROADS Outpatient Treatment Program had a total of 14 responses. No concerns were indicated.

AREAS OF STRENGTHS:

Description: The following areas were identified as areas the agency demonstrated substantial competency to administrative rules.

1. According to 67:61:07:08 Progress Notes. All programs, except prevention programs, shall record and maintain a minimum of one progress note weekly, when services are provided. Progress notes are included in the client's file and substantiate all services provided. Individual progress notes must document counseling sessions with the client, summarize significant events occurring, and reflect goals and problems relevant during the session and any progress in achieving those goals and addressing the problems. Progress notes must include attention to any co-occurring disorder as they relate to the client's substance use disorder.

A progress note must be included in the file for each billable service provided. Progress notes must include the following for the services to be billed:

- Information identifying the client receiving the services including the client's name and unique identification number.
- The date, location, time met, units of service of the counseling session, and the duration of the session
- The service activity code or title describing the service code or both
- A brief assessment of the client's functioning
- A description of what occurred during the session, including the specific action taken or plan developed to address unresolved issues for the purpose of achieving identified treatment goals or objectives
- A brief description of what the client and provider plan to work on during the next session, including work that may occur between sessions, if applicable
- The signature and credentials of the staff providing the service.

All progress notes had the required information to substantiate that treatment services were provided.

2. According to 67:61:07:12 Tuberculin (TB) Screening Requirements. A designated staff member shall conduct tuberculin screening for the absence or presence of symptoms with each client newly admitted to outpatient treatment, intensive outpatient, day treatment, clinically managed low intensity residential treatment, clinically managed detoxification, and intensive inpatient treatment within 24 hours of admission to determine if the client has had any of the following symptoms within the previous three months:

- Productive cough for a two to three-week duration
- Unexplained night sweats
- Unexplained fevers
- Unexplained weight loss.

All client TB screenings were completed within the 24 hours of admission.

AREAS OF RECOMENDATION:

Description: The following area was identified as an area that the agency is recommended to review and ensure that the area is corrected. The area identified met minimum standards which would not require a plan of correction at this time however if it continues to be found on the next accreditation review could become future areas of non-compliance requiring a plan of correction.

1. 67:61:07:06 Treatment plan. 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 treatment plan shall be recorded in the client's case record and includes:
 - A statement identifying the staff member responsible for facilitating the methods or treatment procedures.

Four out of eight treatment plans reviewed were missing the name of the staff member responsible for facilitating the treatment plan.

AREAS REQUIRED FOR PLANS OF CORRECTION:

Description: The following area 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.

1. 67:61:07:07 Continued service criteria. The program shall document for each client the progress and reasons for retaining the client at the present level of care; and an individualized plan of action to address the reasons for retaining the individual in the present level of care. This document is maintained in the client case record. It is appropriate to retain the client at the present level of care if:
 - The client is making progress but, has not yet achieved the goals articulated in the individualized treatment plan. Continued treatment

at the present level of care is assessed as necessary to permit the client to continue to work toward his or her treatment goals; or

- The client is not yet making progress but, has the capacity to resolve his or her problems. He or she is actively working toward the goals articulated in the individualized treatment plan. Continued treatment at the present level of care is assessed as necessary to permit the client to continue to work toward his or her treatment goals; or
- New problems have been identified that are appropriately treated at the present level of care. The new problem or priority requires services, the frequency and intensity of which can only safely be delivered by continued stay in the current level of care. The level of care in which the client is receiving treatment is therefore, the least intensive level at which the client's new problems can be addressed effectively.
- The individualized plan of action to address the reasons for retaining the individual in the present level of care.

Eight out of eight charts reviewed were missing an individual plan of action to address the need for continued service in the present level of care.

2. 67:61:05:01 Tuberculin (TB) screening requirements. Tuberculin screening requirements for employees are as follows:

- Each new staff member, intern, and volunteer shall receive the two-step method of tuberculin skin test or a TB blood assay test to establish a baseline within 14 days of employment. Any two documented tuberculin skin tests completed within a 12-month period before the date of employment can be considered a two-step or one TB blood assay test completed within a 12-month period before employment can be considered an adequate baseline test. Skin testing or TB blood assay tests are not required if a new staff, intern, or volunteer provides documentation of the last skin testing completed within the prior 12 months. Skin testing or TB blood assay tests are not required if documentation is provided of a previous position reaction to either test:

There was only one employee that has been hired since the 2019 review. Regarding the one employee that was hired, the second TB

test was two weeks late. Both TB tests were complete within the first month from hire date.

PRIOR AREAS REQUIRING A PLAN OF CORRECTION:

Description: ROADS Outpatient Treatment Program Counseling Services was last reviewed by the Department of Social Services, Office of Licensing and Accreditation in November 2019. The 2019 review identified one area of recommendations and four areas requiring a plan of correction. ROADS Outpatient Treatment Program resolved the one prior area of recommendation and three out of the four prior areas requiring a plan of correction.

ACCREDITATION RESULTS:

X	Three Year Accreditation (90%-100%)
	Two Year Accreditation (70%-89%)
	Probation (69% and below)