

APPENDIX C10a

CERTIFICATION/COMPLIANCE MONITOR POLICIES AND PROCEDURES

State of Nevada
DEPARTMENT OF HEALTH AND HUMAN SERVICES
MENTAL HEALTH & DEVELOPMENTAL SERVICES DIVISION
SUBSTANCE ABUSE PREVENTION & TREATMENT AGENCY

OVERVIEW: Nevada Revised Statutes (NRS) 458.025, Appendix B1 requires that any alcohol and drug abuse program that receives state and/or federal funds through the Substance Abuse Prevention and Treatment Agency (SAPTA or Agency) must be certified by SAPTA. Nevada Administrative Code (NAC) 458.260-620, Appendix B2, outlines the requirements necessary to obtain program certification, and NAC 458.260 (8), Appendix B2 allows SAPTA to inspect each program that is certified to determine if state certification should be continued. In addition to NAC 458, programs funded by SAPTA sign grant award documents which specify the type of services to be provided and place specific requirements upon those programs receiving funding. The following briefly identifies the relationship between certification, funding, and monitoring:

- State Certification is available to any alcohol and drug abuse program, which meets the requirements for certification identified in NAC 458. Certification can be for a period of up to two years. State Certification determines if a program has met minimum requirements related to service delivery. Certification is mandatory for all programs receiving SAPTA grant funding. Other than for Driving Under the Influence (DUI) Evaluation Centers, certification is optional for programs that do not receive SAPTA funding. Certification determines if a program has the necessary organizational structure to provide a specified service.
- Compliance Monitors are a condition of receipt of SAPTA funding. Only those programs funded by SAPTA are monitored. Monitor activities determine if a program is meeting the terms and conditions of the grant funded by SAPTA. In general, compliance monitors focus on administrative, programming, and fiscal activities of a program to determine if a program is meeting grant requirements.
- Programs receiving SAPTA funding are required to participate in both the certification and the monitor processes.

A monitor is regulatory in nature and the purpose of a SAPTA monitor is to accomplish the following:

- Verify that alcohol and drug abuse funds are being utilized as identified in Notice of Grant Award documents.
- Ensure that SAPTA funds programs in compliance with state and federal requirements and restrictions.
- Identify problems or difficulties at an early point in time.
- Coordinate the efficient delivery of services to Nevada's population.
- Verify that those most in need of services are receiving the services.
- Provide structured feedback to program administration and boards of directors.

- Encourage quality improvement practices.
- Identify the need for technical assistance.

A separate monitor instrument will be completed for each identified subgrant.

All references to time frames and due dates mean “business days” rather than “calendar days.”

The following outlines the steps SAPTA staff will follow when conducting monitoring activities:

A. DEVELOP PROJECTED CALENDAR: SAPTA supervisors will develop a projected calendar that indicates the month each of the following site visits are planned, depending upon the type of funding awarded:

- Treatment certification visit.
- Prevention certification visit.
- Administrative certification visit.
- Treatment monitor visit.
- Prevention monitor visit.
- Administrative monitor visit.
- Fiscal monitor visit.

The following reflects the timelines that will be observed during the monitor process:

- A.–Issues in this category addressed at Exit Interview and require a Compliance Action Plan submitted to Agency within 10 Days of monitor visit.
- B.–Requires a Compliance Action Plan submitted following timelines.

Within 15 business days of receipt of monitor report, program must submit formal Compliance Action Plan (CAP).

Within 5 business days of receipt of compliance action plan, SAPTA must approve or reject and return CAP.

If plan is rejected, program has 10 business days from receipt of rejection to submit an acceptable CAP.

- C.–Must be corrected before the next monitor visit – Does not require a Compliance Action Plan

The purpose of the projected calendar will be to properly coordinate site visits. If possible, there will be a six (6) month period of time between a Treatment Certification visit and a monitor visit. If appropriate, a program may request to have both a treatment and prevention compliance monitor or treatment and prevention certification visit conducted concurrently.

B. SCHEDULE CERTIFICATION VISIT: The Certification Specialist will conduct the designated contact of a program approximately 60 days before the program is scheduled for the certification site visit to determine a mutually acceptable date for the site visit. Depending upon the program the designated contact may be the Executive Director, programs administrator, or

other identified clinical or fiscal staff appointed by the program to be responsible for the certification site visit. The following will be addressed:

- Briefly explain the purpose of the certification visit.
- Describe the components of the certification visit.
- Identify titles of program staff that the Certification Specialist will need to talk with and approximate time requirements for meeting with each staff member.
- Inform the Director of total time requirements. The amount of time required will depend on the size of the program, number of levels of service to be reviewed, etc.
- Identify documents that will be reviewed on site. For treatment certification, files can be randomly selected through the Nevada Health Information Provider Performance System (NHIPPS) using the client's admission and discharge *unique client identification number*.
- The Director will be informed of how records will be chosen for review. A minimum of 5 client case records will be selected from six months prior to site visit for each level of care being reviewed. A minimum of 5 discharge client case records will be selected from six months prior to site visit for each level of care being reviewed. Additionally, a minimum of 5 personnel records will be reviewed.

C. SCHEDULE MONITOR VISIT: The Program Specialist will contact the designated contact of a program approximately 30 days before the program is scheduled for a monitor visit to determine a mutually acceptable date for the monitor visit. Depending upon the program the designated contact may be the Executive Director, Program Administrator, or other identified person appointed by the program to be responsible for the compliance monitor site visit. The following will be addressed:

- Briefly explain the purpose of the monitor visit.
- Describe the components of the monitor visit.
- Identify titles of program staff that the Program Specialist will need to talk with and approximate time requirements for meeting with each staff member.
- Inform the Director of total time requirements. The amount of time required will depend on the size of the program, number of grants, number/levels of service funded, etc.
- Identify documents that will be reviewed on site. For treatment monitors, files can be randomly selected through NHIPPS using the client's admission and discharge *unique client identification number*.
- If a site tour or observation of program activities is planned, coordinate the specific time/s and location/s at this time.

Based on the Program Specialist's familiarity with a program, the Program Specialist may request a tour of the facility. It is strongly recommended that the Program Specialist tour the facility the first time he or she visits a program and any time a program has made major changes in the services provided.

Program Specialists monitoring prevention programs will arrange a time to observe the program being conducted if at all possible and appropriate.

Following the contact, the Program Specialist will send by way of electronic mail confirmation to the Agency Director and the Board President. If this is the first monitor conducted at the program, a copy of all documentation related to the monitoring process will be included. If this is not the first visit, only a copy of the compliance monitor instrument will be enclosed with the electronic mail or letter of confirmation. A copy of the electronic mail or letter sent to the program will be maintained in the program's grant file.

The monitor instruments are in the following Appendices:

- Treatment, Appendix C6
- HIV/TB, Appendix C7
- Prevention, Appendix D3
- Prevention Coalition, Appendix E1
- Administrative, Appendix A13
- Fiscal, Appendix G6

D. COMPLETE PRE-SITE CERTIFICATION ACTIVITIES: Prior to the Certification site visit, the Certification Specialist will review the operator's Policy and Procedure Manual and score this section in the instrument. The Specialist will also review the previous report for the operator to identify any issues documented in the report.

E. COMPLETE PRE-SITE MONITOR ACTIVITIES: Compliance Monitor instruments are listed in Section C. above. Prior to the monitor visit, the Program Specialist will complete Section A of this document by reviewing SAPTA grant files.

Section B of the Compliance Monitor instrument requires the Program Specialist to review the grant file and determine the answers to specific items. If the required items are not included as part of the SAPTA grant file, the Program Specialist will identify the appropriate source within SAPTA to obtain the information. If the information is not available at SAPTA, the Program Specialist will call the program's designated contact and obtain such documentation for the SAPTA file prior to the monitor visit. If the Program Specialist responds "No" to any of the items in Section B, they will attempt to obtain the necessary information during the monitor visit. If the program can provide necessary documentation, the Program Specialist will change negative responses to positive responses as appropriate.

Included on the Compliance Monitor instruments is a column that identifies the documents or materials the Program Specialist will review to determine if a program is in compliance with an item. In most instances the documents to be reviewed are clearly defined. However, there will be several instances where it is not possible to clearly describe an item. For example, in the Treatment instrument, Appendix C6, Item B6 requires that the Program Specialist review previous certification reports and monitor reports as well as any compliance action plans developed by the program. Completion for this item will be dependent on different factors for each program.

The Compliance Monitor instruments also include a Compliance Action Plan (CAP) Code for each item on the Program Compliance Monitor Instrument. This rating determines the response time to compliance monitor findings. Two of the Three Codes require that the program submit a CAP. Note that there are different time requirements between responding to a compliance finding and submitting a CAP. The difference in time frames between resolving the problem and submitting the CAP is to allow the program time to have the CAP reviewed and approved by the Board of Directors and/or other program administrative personnel.