CHAPTER II: SUBSTANCE ABUSE TREATMENT

201 TREATMENT OVERVIEW

Treatment is defined as the continuum of care an individual assessed as an alcoholic or drug abuser receives through the implementation of the Division Criteria for Programs Treating Substance Related Disorders. The Substance Abuse Prevention and Treatment Agency (SAPTA) has identified approved levels of service. Programs are required to develop a comprehensive service network to assist the client in the treatment process, which is outlined within the information found in the approved Division Treatment Criteria levels and description, Appendix C1.

SAPTA periodically issues Requests for Applications (RFAs) to support alcohol and drug abuse treatment/clinical services in all geographic areas of the state. Qualified applicants respond to the RFA by submitting an initial Letter of Intent, followed by a comprehensive application describing the project. Applications are evaluated on a competitive basis and result in subgrant awards. The most recent RFA may be viewed in Appendix H1.

An application review conference is presented to provide organizations with the opportunity to meet with the Agency to ask questions, seek clarification and/or additional information, and receive suggestions for application submission.

In addition to holding a current state certification through the Agency, applicants must be a current non-profit 501(c) (3) or a governmental agency. Applicants not currently certified by the Agency must submit an application for Agency certification prior to submitting the application for funding. Failure to submit the application for certification will disqualify the applicant and the application will not be reviewed. The treatment certification policy may be found in Appendix C10a, Certification/Compliance Monitor Policy and Procedures. The Treatment Certification Application is in Appendix C3 and the Treatment Certification Instrument is in Appendix C4. A suggested format for organizing client files can be found in Appendix C11, Substance Abuse Treatment Overview.

The Agency's core strategies remain constant from year to year and are designed to establish a statewide infrastructure whereby alcohol and drug abuse treatment services are purchased within a system that:

- Insures applicant compliance with federal and state requirements for the receipt of funds.
- Assigns responsibility to organizations to attain service delivery projections that are established as their scope of work.
- Utilizing the Program Operating and Access Standards to increase the quality of services available to clients. The standards are in Appendix C2.

Recipients should be aware that alcohol and drug abuse services must be of adequate quality if they are to be purchased with public funds. SAPTA strives to have quality services available throughout Nevada. Substance abuse treatment program applicants must provide information regarding how many clients are being seen as a result of Agency

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funding and the quantity and type of services provided. NAC 458.274 and NAC 458.359, Appendix B2, require that all Agency funded programs utilize the Division Treatment Criteria. Programs need to identify the service area, scope of work, and their intent to comply with federal guidelines in regard to a level of service(s). Appendix C1 outlines the approved Division Treatment Criteria levels and description. Appendix C11 provides clarification regarding the clinical summary.

These conditions should be reviewed carefully, as noncompliance may result in negative sanctions that may include de-obligation of funding. If there is a change that potentially impacts the scope of work, programmatically or fiscally, an amendment is required to make the change official. Programs will need to work with their program analyst and fiscal staff to determine what type(s) of information will need to be provided. More detailed information on budget amendments may be found in Chapter V, Fiscal Management, Appendix G3, Procedures for Change Request, Change Request Form, Appendix G3a, and Appendix G4, Subgrant Amendment.

Applicants will not expend federal block grant funds for any of the reasons referenced in the federal block grant requirements. Please refer to the most recent treatment RFA in Appendix H1 for restrictions on the expenditure of Substance Abuse Prevention and Treatment (SAPT) block grant funds.

Funded providers are to have policies and procedures to implement evidence-based practices and strategies. The ability to obtain and manage the essential client-related information required for each specific service or organization component should be addressed. The basic structure for evaluating quality should include structural or environmental measures, process measures, and outcome measures. All measures must be reliable and based on complete data. Reporting through the Agency is currently done with the Nevada Health Information Provider Performance System (NHIPPS) and required of all SAPTA funded programs and the federal block grant. More detailed information on NHIPPS reporting may be found in Chapter IV, Data Collection and Reporting.

Tuberculosis and HIV testing and referral services are available at all SAPTA funded treatment program sites through contract agreements between SAPTA and Southern Nevada Health District in Clark County, Northern Nevada HOPES in Washoe County and the Frontier and Rural Health Services in rural Nevada. Services provided must meet the federal block grant requirements. Please refer to the most recent treatment RFA, which is provided as Appendix H1, for federal block grant requirements.

Programs are required to have a system to prevent inappropriate disclosure of client records that is in compliance with all applicable state and federal laws and regulations, including 42 Code of Federal Regulations (CFR), Part 2,; Health Insurance Portability and Accountability Act (HIPAA), Appendix B7. The system shall include, but not be limited to, the following provisions:

- Employee education on the confidentiality requirements.
- Informing employees of the fact that disciplinary action may occur upon inappropriate disclosure.

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SAPTA's sliding fee scale policy indicates no person will be denied services due to ability to pay and a "SAPTA client" is defined as a client who has received treatment from a provider subsidized in whole, or in part, with subgrant monies received through the Agency. Appendix C5 contains the sliding fee scale requirements and Appendix C5a is the Federal Poverty Guidelines.

Subgrant review is a multi-stage process beginning with SAPTA technical staff to determine if an application is complete and meets the requirements contained in the RFA. At this time, Agency staff will identify questions that may arise when the second level of review is conducted.

The second level is the objective reviews conducted by professionals in the community who do not have an apparent conflict of interest or an affiliation with one of the applicants. This process must also include a clinical review.

The third level of review is conducted by the Division of Mental Health and Developmental Services Administrator, who reviews the final funding recommendations with key Agency staff, typically the Agency Director, Treatment Supervisor, and the Administrative Services Officer. For more information, please refer to Chapter V, Fiscal Management.

When funding decisions are finalized, letters of notification are sent to funded and unfunded applicants. Funded programs may receive recommendations in regards to budget or scope of work modifications to be re-submitted for approval and development of subgrant documents. Please refer to Chapter V, Fiscal Management.

202 COMPLIANCE MONITORING POLICIES AND PROCEDURES FOR TREATMENT

- A. The scope and focus of the two compliance monitors, Treatment Compliance Monitor Instrument, Appendix C6, and HIV/TB Treatment Compliance Monitor Instrument, Appendix C7, are a condition of receipt of SAPTA funding, and only those treatment programs funded by SAPTA are monitored. All funded programs must participate and have policy that reflects knowledge of the National Institute on Drug Abuse's (NIDA's) Community Based Outreach Model, Appendix C12. Monitoring determines if a program is meeting the terms and condition of the subgrant funded by SAPTA, and they focus on administrative, programming, and fiscal activities of a program as described in the Certification/Compliance Monitor Policies and Procedures, Appendix C10a. Standard for all programs include the application of NIDA's 13 Principles of Effective Treatment, Appendix C13.
- B. A monitor is regulatory in nature and its purpose is to accomplish the following:
 - verify that alcohol and drug abuse funds are being utilized as identified in subgrant award documents;
 - ensure that SAPTA funds programs in compliance with state and federal block grant requirements and restrictions;
 - identify problems or difficulties at an early point in time;

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- provide structural feedback to program administration and boards of directors
- encourage quality improvement practices; and
- identify the need for technical assistance.
- C. A separate monitor form is completed for each identified subgrant annually. See Appendix C10a to review the Compliance Monitoring Policies and Procedures, and Appendix C6 for the Treatment Compliance Monitor Instrument and the Corrective Action Plan Form.

203 PEER REVIEW

In accordance with 45 CFR, Part 96, Section 136, Appendix B6a, independent peer reviews are required to be conducted with an annual lottery to select five programs for review. Reviews will be conducted for the fiscal year in which grant funding is provided.

Reviews are designed to assess the quality, appropriateness and efficacy of treatment services to individuals by focusing on treatment programs and the substance abuse service delivery system, with the overall goal being to continuously improve the treatment services to alcohol and drug abusers in the state.

Independent peer reviewers are required to have expertise in the field of alcohol and drug abuse treatment, and because treatment services may be provided by multiple disciplines, individual peer reviewers must be representative of the various disciplines utilized, must be knowledgeable of treatment settings and the differences in treatment approaches, and must be sensitive to cultural and environmental issues that may influence the quality of services provided. A representative sample of patient/client records are required to be reviewed to determine the quality and appropriateness of treatment services, as well as admission criteria, assessments, treatment planning, documentation of treatment services, discharge and continuing care planning. See the Peer Review Model in Appendix C9.

204 ACCESS and AVAILABILITY and CRITICAL INCIDENT REPORTING

- Treatment Access and Availability Feedback Forms, Appendix C8, are utilized by SAPTA staff to address barriers to client ability to engage in treatment services.
- SAPTA has the responsibility of ensuring the safety and interests of all its contract clients, participants, employees, volunteers, and visitors as a "high priority" by immediately responding to and addressing any critical incidents described within this policy, and taking appropriate measures to remediate or rectify them. The Critical Incident Reporting Policy may be found in Appendix A7.

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