**SUD Prevention Program Tool 2024**

**Program and Employee Operations**

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| **1.** There is a chart outlining the organizational structure. |  |
| **Reference**DWIHN Quality Assurance Performance Improvement Plan (QAPIP) Policy |  |

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| **2.** There is a staff development/training policy/program that includes:(a) Staff Orientation: All new personnel are trained with regard to their responsibilities, program policy and operating procedures.(b) Staff Training: Identification of staff training needs, provide in-service training, continuing education and staff development activities |
| **Reference**DWIHN Quality Assurance Performance Improvement Plan (QAPIP) Policy |

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| **3.** There are specific policies/procedures regarding the Americans with Disabilities Act (ADA) requirements for employees requiring reasonable accommodation and how the requests are processed. |
| **Reference**DWIHN Americans with Disabilities Act (ADA)/Americans with Disabilities Act Amendments Act (ADAAA) Policy |

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| **4.** There is evidence of the Prevention Program Supervisor's:(a) Job description or contract agreement.(b) Michigan Certification Board of Addiction Professionals certification.(c) Highest level of education completed.**Sub Title**mcbap.certemy.com Diploma or transcript |
| **Reference**DWIHN Credentialing/Re-Credentialing Policy |

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| **5.** If applicable, there is a policy/procedure for ensuring subcontractors comply with DWIHN standards/expectations. |
| **Reference**Substance Use Disorder Service Provider Agreement Section 2.3 & 11.4 |

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| **6.** There is evidence that the make-up of the Governing Board is publicly posted (including via website notification) and updated at least annually. |
| **Reference**Substance Use Disorder Service Provider Agreement Section 4.3 |

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| **7.** The organizational certification/licensure is up to date for the services the agency provides.**Sub Title**LARA license  |
| **Reference**Special Provisions Substance Use Disorder Prevention Services |

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**Prevention Plan**

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| **1.** There is a current Prevention Plan. |
| **Sub Title**ie: strategic plan, service plan, work plan, etc. |
| **Reference**DWIHN IPOS Individual Plan of Service/Person Centered Plan PolicyDWIHN Three-Year Substance Use Disorder Strategic Plan |

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| **2.** The Prevention Plan documents specific services and supports to be provided including the amount (how much), scope (to whom/where), and duration (date(s)/for how long) of services. |
| **Reference**DWIHN IPOS Individual Plan of Service/Person Centered Plan Policy DWIHN Three-Year Substance Use Disorder Strategic Plan |

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| 3. The Prevention Plan includes measurable (specific numbers/dates/locations) and realistic steps for the goals and objectives. |
| **Reference**DWIHN IPOS Individual Plan of Service/Person Centered Plan PolicyDWIHN Three-Year Substance Use Disorder Strategic Plan |

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| 4. There is evidence the Prevention Plan is reviewed at least annually to evaluate the effectiveness of the program and the services offered. |
| **Sub Title**Quality review meetings, Annual reports, Narrative reports, etc. |
| **Reference**DWIHN IPOS Individual Plan of Service/Person Centered Plan Policy DWIHN Three-Year Substance Use Disorder Strategic PlanSpecial Provisions Substance Use Disorder Prevention Services |

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**Quality Improvement**

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| 1. There is a Quality Improvement/Quality Assurance policy/plan. |
| **Reference**DWIHN Quality Assurance Performance Improvement Plan (QAPIP) PolicySubstance Use Disorder Service Provider Agreement Section 11.1 |

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| 2. The Quality Improvement/Quality Assurance policy/plan is reviewed/updated annually. |
| **Reference**DWIHN Quality Assurance Performance Improvement Plan (QAPIP) PolicySubstance Use Disorder Service Provider Agreement Section 11.1Not scored for FY2024 |

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| 3. There is evidence the Quality Improvement meetings are held according to the agency’s policy. |
| **Sub Title**Can either be stand-alone meetings or incorporated into other meetings if the minutes include a quality section. |
| **Reference**DWIHN Quality Assurance Performance Improvement Plan (QAPIP) Policy |

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| **4.** There is evidence that the program evaluates the degree to which it is meeting its goals and objectives. |
| **Sub Title**Recommended quarterly and evidenced through meeting minutes, reports, etc. |
| **Reference**DWIHN Quality Assurance Performance Improvement Plan (QAPIP) PolicyDWIHN Three-Year Substance Use Disorder Strategic Plan |

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| **5.** There is evidence of Pre and Post tests/surveys. |
| **Reference**EBP curriculumSpecial Provisions Substance Use Disorder Prevention Services |

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| **6.** If services are offered virtually, there is a teleservices policy to assure that the use of telecommunication/virtual modalities are in accordance with applicable laws. |
| **Reference**DWIHN TELEMEDICINE PolicyDWIHN SUD Prevention Services Data Users Virtual Guidance Document |

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| **7.** If staff are working remotely, there is a policy to ensure that staff are aware if their job responsibilities and expectations while not in the office. |
| **Reference**DWIHN Telecommuting Policy |

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**Outreach Services/Care Coordination**

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| **1.** There is evidence of collaborative relationships that are documented by formal agreements (ie: Memorandums of Agreement or Understanding). |
| **Sub Title**Must be signed and dated by all parties. |
| **Reference**Michigan Prevention Data System User Guide for Provider AgenciesDWIHN Three-Year Substance Use Disorder Strategic Plan |

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| **2.** There is evidence of coordination and collaboration with other coalitions. |
| **Sub Title**Meeting agendas/minutes, flyers of joint activities/events, MOA/U, etc. |
| **Reference**Michigan Prevention Data System User Guide for Provider Agencies |

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| **3.** There is evidence of coordination of resources and activities with other primary prevention providers, such as local health departments, community collaboratives, and MDHHS's prevention programs for women, children and families, and older adults. |
| **Sub Title**ie. Department of Human Services, Housing, Michigan Rehabilitative Service, Work First, etc.Flyers of joint activities/events, resource guides, referral forms, MOA/Us, etc. |
| **Reference**DWIHN Care Coordination Policy |

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| **4.** There is evidence the services provided are based on a formal local needs assessment. |
| **Reference**Substance Use Disorder Service Provider Agreement Section 1.16Special Provisions Substance Use Disorder Prevention ServicesNot scored for FY2024 |

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| **5.** If applicable, there is evidence of SYNAR Tobacco Prevention Activities. |
| **Sub Title**Updated MRL list, vendor education, compliance checks, etc. |
| **Reference**Substance Use Disorder Service Provider Agreement Section 1.19PREVENTION POLICY # 01 - SynarSpecial Provisions Substance Use Disorder Prevention Services |

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**Record Keeping**

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| **1.** There is evidence of sign-in/sign-out sheets for each activity provided.**Sub Title**Include activity name, date, time, and staff facilitators. |
| **Reference**Michigan Prevention Data System User Guide for Provider AgenciesSubstance Use Disorder Service Provider Agreement Section 8.12 |

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| **2.** The Activity Logs identifying the:(a) Group's name(b) Type of service(c) Date of service(d) Time in and out(e) Address or virtual(f) Staff’s name and credentials(g) Contact person to verify the activity (preferably external to the agency)(h) Number of recipients |
| **Sub Title**DWIHN's MPDS Activity Log, spreadsheet, internal activity logs, etc. |
| **Reference**Michigan Prevention Data System User Guide for Provider AgenciesSubstance Use Disorder Service Provider Agreement Section 8.12 |

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| **3.** The following NOMS data is being accurately reported in the MPDS Activity Logs and system entries:(a) Age(b) Gender(c) Race(d) Ethnicity(e) Number of evidence-based programs and strategies |
| **Reference**Special Provisions Substance Use Disorder Prevention ServicesSubstance Use Disorder Service Provider Agreement Section 8.11 |

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| **4.** The MPDS Activity Logs match the MPDS entries. |
| **Reference**Special Provisions Substance Use Disorder Prevention ServicesMichigan Prevention Data System User Guide for Provider Agencies |

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| **5.** The prevention activities are entered into MPDS by the FSR submission date. |
| **Reference**Michigan Prevention Data System User Guide for Provider AgenciesSUD COST REIMBURSEMENT FINANCIAL STATUS REPORT (FSR) FORM PREPARATION INSTRUCTIONSSubstance Use Disorder Service Provider Agreement Section 8.12 |

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| **6.** There is evidence that the staff/program maintains a work calendar showing scheduled activities/meetings/trainings that corroborate with the MPDS entries. **Sub Title**Outlook, Google, desk calendar, planner, etc. |
| **Reference**Michigan Prevention Data System User Guide for Provider Agencies |

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| **7.** The Quarterly Reports are completed and submitted to the Prevention Services Manager (Karra Thomas). |
| **Reference**Substance Use Disorder Prevention Statement of Work |

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**Individual Records**

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| **1.** There is evidence that prevention services are aligned with evidence-based curriculum/models. |
| **Reference**Michigan Prevention Data System User Guide for Provider AgenciesDWIHN Three-Year Substance Use Disorder Strategic PlanSpecial Provisions Substance Use Disorder Prevention Services |

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| **2.** If providing individual services, the annual Consent to Prevention programs is current, dated, and signed by the recipient. |
| **Reference**DWIHN Consent To Treatment And Services PolicySubstance Use Disorder Service Provider Agreement Section 1.6 |

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**Cultural Competency**

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| **1.** There is a Cultural Competency policy/plan. |
| **Reference**DWIHN Cultural Competence Policy  |

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| **2.** There is evidence prevention interventions are consistent with cultural, ethnic, and/or racial beliefs or values.**Sub Title**Evidence Based programs are already compliant but other interventions need to provide evidence.**Reference**DWIHN Cultural Competence Policy |

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| **3.** There evidence of Non-Discrimination against any employee, applicant for employment, Member or other person, or any applicant for receipt of Service Provider's SUD Services, with respect to hiring, tenure, terms, conditions or privileges of employment, programs and Services provided, or any matter directly or indirectly related to employment and/or Services, or Service delivery and access because of race, color, religion, national origin, ancestry, age, sex, height, weight, marital status, or physical or mental disability, or genetic information that is unrelated to the individual’s ability to perform the duties of the particular job or position. |
| **Reference**Substance Use Disorder Service Provider Agreement Section 9.1 |

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**Limited English Proficiency (LEP)**

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| **1.** There is a Limited English Proficiency (LEP) Policy that complies with the Office of Civil Rights Policy Guidance on the Title VI Prohibition against Discrimination, Title VI of the Civil Rights Act of 1964, and the Patient Protection and Affordable Care Act.**Reference**DWIHN Limited English Proficiency (LEP) PolicySubstance Use Disorder Service Provider Agreement Section 9.2 |
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| **2.** The Limited English Proficiency (LEP) Policy offers access to interpreter services of all languages, free of charge to the participant. |
| **Reference**DWIHN Limited English Proficiency (LEP) Policy42 CFR 438.10(d)(1)&(4), 100(a)(1) |

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| **3.** The Limited English Proficiency Poster is clearly displayed for accommodations for the hearing impaired, interpretation services, and visually impaired.**Sub Title**“I Speak” poster |
| **Reference**Substance Use Disorder Service Provider Agreement Section 9.342 CFR 438 |

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| **4.** There is evidence of brochures, booklets, outreach, recruitment information, or other materials routinely disseminated to the public that includes statements about services available and the right to free language assistance services.**Sub Title**Statement on brochures, fryers, website, etc. |
| **Reference**DWIHN Limited English Proficiency (LEP) Policy42 CFR 438 |

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| **5.** Reading Level: Provider has a method to ensure all informational materials, including those describing consumer rights, service requirements and benefits are provided in a manner and format that may be easily understood. Informational materials are written at the 6.9 grade reading level.**Sub Title**MS Word accessibility review[www.wordcalc.com/readability/](http://www.wordcalc.com/readability/)[datayze.com/readability-analyzer](https://datayze.com/readability-analyzer)[readabilityformulas.com/readability-scoring-system.php](https://readabilityformulas.com/readability-scoring-system.php) |
| **Reference**42 CFR. 438.10(c)(1) & (d)(1)(i)PIHP/MDHHS ContractNot scored for FY2024 |

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**Emergency Preparedness Plan**

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| **1.** There is an Emergency Preparedness Plan. |
| **Reference**DWIHN Environmental Safety Policy  |

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| **2.** The Emergency Preparedness Plan has written protocols to respond to the following situations:(a) Medical Emergencies(b) Fire Emergencies(c) Natural Emergencies(d) Severe weather such as tornadoes(e) Chemical Disasters(f) Bomb Threats/Terrorism(g) Active Shooter Incidents |
| **Reference**DWIHN Environmental Safety Policy  |

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| **3.** There is evidence all personnel complete initial training on the organizational emergency plan.  |
| **Reference**DWIHN Environmental Safety Policy  |

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**Confidentiality**

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| **1.** There is a Confidentiality/Privacy policy.**Reference**DWIHN Protected Health Information (PHI) Privacy and Confidentiality PolicyCASE RECORDS MAINTENANCE AND REVIEW PolicySubstance Use Disorder Service Provider Agreement Section 10.142 CFR Part 2 |
| **2.** There is evidence all records are kept in a secure area.**Reference**DWIHN Protected Health Information (PHI) Privacy and Confidentiality policy #13322265CASE RECORDS MAINTENANCE AND REVIEW policy # 8462147Substance Use Disorder Service Provider Agreement Section 10.142 CFR Part 2 |
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| **3.** If applicable, releases of/for Information are completed, signed, and dated as appropriate. |
| **Reference**DWIHN Protected Health Information (PHI) Privacy and Confidentiality policy #13322265CASE RECORDS MAINTENANCE AND REVIEW policy # 8462147Substance Use Disorder Service Provider Agreement Section 10.142 CFR Part 2 |

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**Communicable Diseases**

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| **1.** There is a Communicable Disease/Infection Control policy/plan. |
| **Reference**DWIHN Infection Control Policy  |

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| **2.** There is a procedure for bio waste management/clean-up. |
| **Sub Title**Either a stand along policy or included in the Communicable Disease/Infection Control policy.**Reference**DWIHN MEDICAL WASTE MANAGEMENT PROCEDURES Policy Not scored for FY2024 |

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| **3.** There is evidence that all employees receive training regarding Communicable Disease/Infection Control. |
| **Sub Title**Evident in the employee orientation, provider developed training, or DWC provided training.**Reference**DWIHN Infection Control Policy  |

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| **4.** There is a plan for continuity of care in the event of pandemics, epidemics, and/or COVID-19. |
| **Reference**DWIHN Infection Control Policy  |

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**Recipient Rights**

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| **1.** There is a Recipient Rights policy/plan. |
| **Reference**DWIHN Substance Use Disorder - Recipient Rights Policy Substance Use Disorder Service Provider Agreement Section 3 |

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| **2.** The Recipient Rights policy/plan is reviewed/updated annually. |
| **Reference**DWIHN Substance Use Disorder - Recipient Rights PolicySubstance Use Disorder Service Provider Agreement Section 3 |

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| **3.** There is evidence the Recipient Rights advisor has received training on the on the recipient rights procedures. |
| **Sub Title**Improving MI Practices SUD Recipient Rights Training**Reference**DWIHN Substance Use Disorder - Recipient Rights Policy Substance Use Disorder Service Provider Agreement Section 3Not scored for FY2024 |

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| **4.** There is a policy for client rights and protections, including information about the right to file grievances and appeals, the requirements and time frames for filing a grievance or appeal, the availability of assistance in the filing process, the toll-free numbers that consumers can use to file a grievance or an appeal by phone, the right to a State Fair Hearing, and the fact that benefits can continue if requested by the consumer pending an appeal or hearing decision. |
| **Reference**DWIHN Substance Use Disorder - Recipient Rights Policy Substance Use Disorder Service Provider Agreement Section 342 CFR Subpart F - Grievance and Appeal SystemNot scored for FY2024 |

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| **5.** The Rights Complaint forms are available and accessible. |
| **Reference**DWIHN Substance Use Disorder - Recipient Rights Policy Substance Use Disorder Service Provider Agreement Section 3 |

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| **6.** The Substance Abuse Rights Poster with the appropriate names and numbers of the agency’s Recipient Rights advisor and DWIHN Rights Consultant is visible in public view. |
| **Sub Title**DWIHN SUD: Greg Lindsey (office: 313-344-9004 ext. 3021, cell: 313 694-8520) |
| **Reference**DWIHN Substance Use Disorder - Recipient Rights PolicySubstance Use Disorder Service Provider Agreement Section 3 |

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| **7.** The “Know Your Rights” pamphlets are in common areas and available to recipients. |
| **Reference**DWIHN Substance Use Disorder - Recipient Rights PolicySubstance Use Disorder Service Provider Agreement Section 342 CFR Subpart F - Grievance and Appeal System |

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| **8.** Policies ensure that consumers are free to exercise their rights in a manner that does not adversely affect their services.**Reference**42 CFR 438.100 (3)(c)Not scored for FY2024 |

**Charitable Choice (Not scored for FY2024)**

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| **1.** Does the provider self-identify as a religious (or faith-based) organization? |
| **Reference**Substance Use Disorder Service Provider Agreement Section 9.9Special Provisions Substance Use Disorder Prevention ServicesFactsheet SAMHSA's Charitable Choice Regulations 42 CFR Parts 54 and 54a |

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| **2.** There is evidence the program beneficiary receiving services who objects to the religious character of a program has a right to notice, referral, and alternative services which meet standards of timeliness, capacity, accessibility, and equivalency—and ensuring contact to this alternative provider. |
| **Reference**Substance Use Disorder Service Provider Agreement Section 9.9 |

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| **3.** There is a policy/procedure to address the following areas for services not covered: (a) Inform the PIHP prior to any action. (b) Notify participants of services not covered. |
| **Reference**42 CFR 438.100(b)(2)(iii) |

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