

2024 SUD Program Specific Review Tool

| # | Standard | Source | Evidence of Compliance May Include | REVIEWER GUIDELINES | Provider to complete: List evidence provided and where to locate such as page number or highlighted text in document |
|---------------------------------------|--|----------------------------------|--|--|---|
| Residential | | | | | |
| 1.1 | With respect to clients who exhibit symptoms of active TB, policies and procedures are in place to avoid a potential spread of the disease. Policy/procedure includes TB testing within 24 hours of admission. | Prevention Policy #02 | Policy/procedure | Verify the policy/procedure must include the plan to avoid potential spread of disease | |
| Peer Recovery Support Services | | | | | |
| 2.1 | The provider can demonstrate policy/procedures are in place regarding self-efficacy, community connection, quality of life, and sustained recovery. | Treatment Technical Advisory #07 | Policy/procedures | | |
| Women's Specialty Services | | | | | |
| 3.1 | Designated Provider has established eligibility requirements that include: <ul style="list-style-type: none"> • Parenting/Expecting Women • Men identified as primary caregiver | BSAAS Treatment Policy #12 | Policy/procedures | | |
| 3.2 | Provider ensures that gender specific program materials show evidence that provider offers the following: <ol style="list-style-type: none"> 1. Accessibility 2. Assessment 3. Psychological Development 4. Abuse/Violence/Trauma 5. Family Orientation 6. Mental Health Issues 7. Physical Health Issues | BSAAS Treatment Policy #12 | List of Didactic Topics Gender-Specific Evidence-Based Practices & Programming Policy and procedures | | |

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| | 8. Legal Issues 9. Sexuality/Intimacy/Exploitation 10. Survival Skills 11. Continuing Care/Recovery Support | | | | |
| Medication-Assisted Programs | | | | | |
| 4.1 | (METHADONE) There are written plans and procedures, which include how dosing clients on-site, as well as dispensing doses for off-site use, will be accomplished in emergency situations. | Treatment Policy #04 | Policy/procedure | | |
| 4.2 | Evidence the OTP appropriately addresses administrative discharges. | Treatment Policy #05, Medicaid Provider Manual 12.2.A.4; MSHN SUD Provider Manual | Policy/Procedure | | |
| 4.3 | Program has protocols for pregnant consumers. | Treatment Policy #05 | Policy/Procedure | | |
| 4.4 | There are policies and procedures in place to address medication errors and plan to prevent recurrence. | PIHP Contract | Policy/Procedures | | |
| Recovery Residence | | | | | |
| 5.1 | Explicit written admission criteria include: <ul style="list-style-type: none"> Abstinence criteria prior to admission. Procedures for tenant inclusion in the decision-making processes involving new resident Screening requirements Application requirements | MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines | Provider policy & practice guidelines | <ul style="list-style-type: none"> Screenings- what form is used to screen potential residents for housing programs. Should include current mental health screening (self-harm/harm-to-others, applicable criminal history, etc.) | |

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| | | | | <ul style="list-style-type: none"> • Application – what the potential tenant completes for acceptance into provider’s housing program. • Procedures – how the current tenants participate in applicant reviews to determine applicant decisions. <p>The above bullets should be easily found in provider manual (for employees).</p> | |
| 5.2 | Explicit and posted house operational rules | MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines | Policy/Procedure (ensure this is posted for all sites) On-site evidence of posted rules | Rules should be included in written guidelines along w/ posting info. Reviewer to verify during onsite reviews OR provider to upload picture as evidence, etc. Include requirement – all tenants receive and initial (for consumer chart) receipt and acknowledgement of rules. | |
| 5.3 | House operations manual on site and available to residents upon request | MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines | Written manual on-site | Policy on manual upkeep/maintenance Notes/policy/procedure on how manual is available to consumers | |
| 5.4 | NARR membership is current and documented and each residence is certified at a level III or higher. | MSHN SUD Recovery Housing | Documentation of membership | Upload Proof of Membership | |

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| | | Technical Requirement 2016, Treatment TA #11, NARR guidelines | | | |
| 5.5 | Evidence of weekly house meetings | MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines | Program Policy/Procedure Meeting logs w/ attendance Meeting topics | Meeting minutes should be kept (electronically) Include facilitator, date/time, sign-in sheet | |
| 5.6 | Evidence of recovery activities & community-engagement efforts | MSHN SUD Recovery Housing Technical Requirement 2016, Treatment TA #11, NARR guidelines | Program Materials List of Community Engagement Efforts (event, how disseminated to consumers, etc.) Referrals Coordination of Care Evidence | The provider should keep a list of offered community engagement efforts & additional details (# of participants from housing program, etc.) List/location of volunteer opportunities, etc. Referrals/Coordination of Care/etc. | |
| 5.7 | Protocols for coordination of care with SUD Treatment Providers | MSHN SUD Recovery Housing Technical Requirement Treatment TA #11, NARR guidelines | Policy/procedure Meeting Minutes (include discussion topics, attendance, etc.) Progress Notes | Specific to SUD Treatment providers (should include regardless of housing program being internal or external) | |

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| 5.8 | Evidence of staff availability 24/7/365 in case a need arises or an emergent situation. | NARR MSHN SUD Provider Manual | Agency on-call schedule or list of available staff to contact. Policies/procedures relevant to staffing coverage. | Staffing schedule Coverage procedure/policy – who is on call, how do clients know who to contact for emergency if no staff onsite This should include written policy//procedure(s) | |