South Dakota Department of Social Services

Accreditation Report – First Step Counseling Services
Date of Review: July 13, 2023
SUD Accreditation Outcome: Two Year Accreditation

REVIEW PROCESS:
First Step Counseling Services was reviewed by The Department of Social Services, Office of Licensing and Accreditation for adherence to the Administrative Rules of South Dakota (ARSD) on July 13, 2023. This report contains the following:

- Agency Summary
- Interview Results
- 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 cumulative score.

AGENCY SUMMARY:
First Step Counseling Services is a Substance Use Disorder agency in Sioux Falls, South Dakota. First Step was founded in 1983 and provides outpatient SUD services, as well as services such as DUI classes. First Step works closely with the court systems in South Dakota, as well as a number of attorneys and probation and parole offices. First Step is seeking to renew their accreditation for outpatient substance use disorder 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.

The Office of Licensing and Accreditation interviewed the director, clinical supervisor, and an addiction counselor trainee. The staff shared that being a small provider allows them to spend more time with each client, individualize treatment plans, and complete paperwork in a timely manner. The staff also shared that staff have great respect for each other, and communication is excellent.

The Office of Licensing and Accreditation interviewed one client. The client stated that starting outpatient treatment at First Step was exactly what he needed. He shared there were times when he was frustrated with them because they held him accountable, but in hindsight, he acknowledges he would not have been able to gain or maintain sobriety had they not done so. He stated that he was always able to call or come to the office to talk to his counselor and he always felt as if he was being listened to.

AREAS REQUIRED FOR PLANS OF CORRECTION FOR SUBSTANCE USE DISORDER SERVICES:

Description: The following areas 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. According to ARSD 67:61:02:21, each accredited agency shall make a report to the division within 24 hours of any sentinel event including death not primarily related to the natural course of the client's illness or underlying condition, permanent harm, or severe temporary harm, and intervention required to sustain life.

   The agency shall submit a follow-up report to the division within 72 hours of any sentinel event and the report shall include:
   1. A written description of the event;
   2. The client's name and date of birth; and
   3. Immediate actions taken by the agency.

   Each agency shall develop a root cause analysis policy and procedures to utilize in response to sentinel events.

   Each agency shall also report to the division as soon as possible: any fire with structural damage or where injury or death occurs, any partial or complete evacuation of the facility resulting from natural disaster, or any loss of utilities, such as electricity, natural gas, telephone, emergency generator, fire alarm, sprinklers, and other critical equipment necessary for operation of the facility for more than 24 hours.

   First Step Counseling Services does not have a sentinel event notification policy or root cause analysis policy.

2. According to ARSD 67:61:05:01, tuberculin screening requirements are as follows:

    1. Each new staff member, intern, or volunteer shall receive the two-step method of tuberculin skin test or 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 positive reaction to either test;
    2. A new staff member, intern, or volunteer who provides documentation of a positive reaction to the tuberculin skin test or TB blood assay test shall have a medical evaluation and chest X-ray to determine the presence or absence of the active disease;
    3. Each staff member, intern, or volunteer with a positive reaction to the tuberculin skin test or TB blood assay test shall be evaluated annually by a licensed physician, physician assistant, nurse practitioner, clinical nurse specialist, or a nurse and a record maintained of the presence or absence of symptoms of Mycobacterium tuberculosis. If this evaluation results in suspicion of active tuberculosis, the licensed physician shall refer the staff member, intern, or volunteer for further medical evaluation to confirm the presence or absence of tuberculosis; and
    4. Any employee confirmed or suspected to have infectious tuberculosis shall be restricted from employment until a physician determines that the employee is no longer infectious.

    First Step Counseling had the correct policy for tuberculosis screening, but the two most recently hired employees only had documentation of the first step of tuberculosis testing completed. All new employees must complete both steps of testing within 14 days of hire.

3. According to ARSD 67:61:06:04, each agency shall have written grievance policies and procedures for hearing, considering, and responding to client grievances.

   The agency shall inform the client, and the client's parent or guardian if applicable, in writing or in an accessible format, of the grievance procedures during intake services. The grievance procedure shall be posted in a place accessible to a client and a copy shall be made available in locations where a client can access the grievance without making a request to agency staff. The grievance procedure shall be available to a former client upon request.

   The procedure shall include the ability to appeal the agency's decision regarding ineligibility or termination of services to the division as provided in ARSD 67:61:06:05 and shall include the telephone number and address of the division.

   First Step Counseling Services has a grievance policy and procedure, but it does not include the contact information of the Department of Social Services.

4. According to ARSD 67:61:07:06, an addiction counselor or counselor trainee shall develop an individualized treatment plan based on 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:

   1. A statement of specific client problems, such as co-occurring disorders, to be addressed during treatment with supporting evidence;
   2. A diagnostic statement and a statement of short and long-term treatment goals that relate to the problems identified;
   3. Measurable objectives or methods leading to the completion of short-term goals including:

a. Time frames for the anticipated dates of achievement or completion of each objective, or reviewing progress toward objectives;

b. Specification and description of the indicators to be used to assess progress;
c. Referrals for needed services that are not provided directly by the agency; and
d. Include interventions that match the client's readiness for change for identified issues;

and

4. A statement identifying the staff member responsible for facilitating the methods or treatment procedures.

The individualized treatment plan shall be developed within ten calendar days of the client's admission for an intensive outpatient program, day treatment program, clinically-managed low-intensity residential treatment program, or medically monitored intensive inpatient treatment program.

The individualized treatment plan shall be developed within 30 calendar days of the clients' admission for a counseling services program.

All treatment plans shall be reviewed, signed, and dated by the addiction counselor or counselor trainee. The signature must be followed by the counselor's credentials.

All six of the reviewed outpatient treatment files were missing treatment plans.

5. According to ARSD 67:61:12:02, the early intervention program may provide each individual with a variety of services, but it must provide the following services, at a minimum:
    1. Initial screening and planning within 48 hours of initial contact. The initial screening shall be recorded in the client's case record and includes:
        a. The client's current problems and needs;
        b. The client's emotional and physical state including screening for the presence of cognitive disability, mental illness, medical disorders, collateral information, and prescribed medications;

c. The client's drug and alcohol use including types of substances used, including prescribed or over the counter medications, age of first use, the amount used, the frequency of use, the date of last use, and the duration of use; and
d. A statement of intended course of action;

2. Crisis intervention;

3. Individual or family counseling which may include:
   a. Education regarding alcohol and drug abuse and dependence, including biomedical effects of drug and alcohol use and abuse and the importance of medical care and treatment in the recovery process; and
   b. Education regarding tuberculosis and the human immunodeficiency virus, how each is transmitted, and how to safeguard against transmission;

4. Discharge planning which may include:
   a. Continued care planning;
   b. Referral to and liaison with other resources that offer education, vocational, medical, legal, social, psychological, employment, and other related alcohol and drug services; and
   c. Referral to and coordination with medical services shall include the availability of tuberculosis and human immunodeficiency virus services pursuant to 42 U.S.C. 300x-24.

All eight early intervention files reviewed were missing initial screening and planning.

6. According to ARSD 67:61:13:03, the outpatient program may provide to each client any combination of individual, group, or family counseling services of any intensity and frequency as required by the continued service criteria pursuant to ARSD 67:61:07:07. If counseling is provided, these services shall be less than nine hours in a one-week period for adults. Services for adolescents shall be less than six hours in a one-week period.

All six reviewed outpatient treatment files contained notes for nine hours of treatment per week. Outpatient treatment requires less than nine hours of treatment per week.

PRIOR AREAS REQUIRING A PLAN OF CORRECTION FOR SUBSTANCE USE DISORDER SERVICES:

Description: First Step Counseling Services was last reviewed by the Office of Licensing and Accreditation on August 5, 2020. There were three areas requiring plans of correction based on that review. All three of those areas were corrected for this review.

SUBSTANCE USE DISORDER ACCREDITATION RESULTS:

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