South Dakota Department of Social Services

Accreditation Report – Avera Addiction Care Center - Aberdeen
Date of Review: July 19-20, 2022
Review Outcome: Three Year Accreditation

REVIEW PROCESS:
Avera Addiction Care Center (AACC) was reviewed by The Department of Social Services, Office of Licensing and Accreditation for adherence to the Administrative Rules of South Dakota (ARSD) on August 30-31, 2021. This report contains the following:

- Agency Summary
- Interview Summary
- Stakeholder Results
- Areas of Recommendations
- 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:
Avera Addiction Care Center is a Substance Use Disorder agency located in Aberdeen, S.D. The agency is seeking to renew accreditation for medically-monitored intensive inpatient treatment.

Kelli Fischer is the current director of Avera Addiction Care Center, and Jessi Paysen is the clinical manager. According to Avera's website, Avera Addiction Care Center "treats individuals with respect and dignity, and welcomes family members as an integral part of therapy. Avera Addiction Care Center – Aberdeen treats addiction related to alcohol, drugs or gambling, as well as the broad scope of problems associated with these illnesses. Our philosophy is based on the 12 steps of Alcoholics, Gamblers, and Narcotics Anonymous." Avera Addiction Care Center – Aberdeen covers a large area including the entire Northeastern part of South Dakota. Avera St. Luke's is also accredited for prevention services, outpatient treatment services, and day treatment services through The Joint Commission.

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.

Avera Addiction Care Center did not have any clients admitted to Medically-Monitored Intensive Inpatient Treatment at the time of the review, so no clients were interviewed.

Four employees were interviewed. All employees discussed how much internal communication and teamwork has improved, especially since the arrival of new clinical leadership. Staff noted that St. Luke's may need to work on evolving their services to match changing client populations and needs.

STAKEHOLDER SURVEY:
Description: Stakeholder Survey data is collected once a year for all accredited mental health and substance use disorder agencies. As part of the survey process, accredited agencies are asked to share the survey with at least three stakeholders in their community. In addition, feedback is gathered from the Department of Corrections (DOC), Unified Judicial System (UJS), and Child Protection Services (CPS) regarding the accredited agencies. The surveys are not a scored component of the accreditation review. However, the information obtained in the survey results is used for quality improvement of the agency.

There were eleven stakeholder surveys received regarding Avera Addiction Care Center over the last year. Multiple stakeholders note that AACC has excellent communication, hires skilled employees, and are genuinely invested in the wellbeing of their clients. There were no complaints from stakeholders.

AREAS OF RECOMMENDATION FOR SUBSTANCE USE DISORDER SERVICES:
Description: The following areas is identified as areas that the agency is recommended to review and ensure are corrected. The areas identified met minimum standards which do not require a plan of correction at this time; however, if they continue to be found out of compliance on the next accreditation review, could become future areas of non-compliance requiring a plan of correction.

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

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

Two out of five reviewed medically-monitored intensive inpatient treatment plans were not completed within ten calendar days of admission.

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.

According to ARSD 67:61:05:05, the agency shall provide orientation for all staff, including contracted staff providing direct clinical services, interns, and volunteers within ten working days after employment. The orientation must be documented and must include at least the following items:

(1) Fire prevention and safety, including the location of all fire extinguishers in the facility, instruction in the operation and use of each type of fire extinguisher, and an explanation of the fire evacuation plan and agency's smoking policy;
(2) The confidentiality of all information about clients, including a review of the confidentiality of alcohol and drug abuse patient records, 42 C.F.R. Part 2 (June 9, 1987), and the security and privacy of HIPAA, 45 C.F.R. Parts 160 and 164 (April 17, 2003);
(3) The proper maintenance and handling of client case records;

(4) The agency's philosophical approach to treatment and the agency's goals;
(5) The procedures to follow in the event of a medical emergency or a natural disaster;
(6) The specific job descriptions and responsibilities of employees;
(7) The agency's policies and procedure manual maintained in accordance with ARSD 67:61:04:01; and
(8) The agency's procedures regarding the reporting of cases of suspected child abuse or neglect in accordance with SDCL 26-8A-3 and 26-8A-8.

The required orientation items were completed in all personnel files reviewed, but not within 10 working days.

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

Description: Avera Addiction Care Center was last reviewed by the Department of Social Services, Office of Licensing and Accreditation on August 30-31, 2021. There were no areas requiring a plan of correction at that time.

SUBSTANCE USE DISORDER ACCREDITATION RESULTS:

x	Three Year Accreditation
	Two Year Accreditation
	Probation