

PROVIDER NAME:

ELEMENT: Stabilization Rehabilitation Reintegration

Reviewer:

Review Date:

Part 820 Residential Services Policies, Procedures and Methods

1. ADMISSION AND DISCHARGE, INCLUDING TRANSFER AND REFERRAL PROCEDURES:

- | | |
|--|--|
| <input type="checkbox"/> Admission Criteria | <input type="checkbox"/> Disease Assessment |
| <input type="checkbox"/> Initial Determination | <input type="checkbox"/> Transfer |
| <input type="checkbox"/> Level of Care Determination | <input type="checkbox"/> Referral |
| <input type="checkbox"/> Admission Decision/Assessment | <input type="checkbox"/> Discharge Criteria |
| <input type="checkbox"/> Admission Priorities | <input type="checkbox"/> Involuntary Discharge |
| <input type="checkbox"/> Rules and Regulations | <input type="checkbox"/> Discharge Planning |
| <input type="checkbox"/> Confidentiality/Voluntary | <input type="checkbox"/> Discharge Summary |
| <input type="checkbox"/> Anti-Discrimination | |

Remarks (if applicable):

2. TREATMENT/RECOVERY PLANS, SERVICE PLANS:

- Treatment Plan/Recovery/Service Treatment Plan/Recovery Review Care Coordination

Remarks (if applicable):

3. STAFFING:

- | | |
|---|---|
| <input type="checkbox"/> Program Director | <input type="checkbox"/> Registered Nurse (RN) |
| <input type="checkbox"/> Clinical Supervisor | <input type="checkbox"/> Psychiatrist and/or Psychiatric Nurse Practitioner |
| <input type="checkbox"/> Medical Director | <input type="checkbox"/> CASAC/CASAC-T |
| <input type="checkbox"/> Health Coordinator | <input type="checkbox"/> Vocational Counselor |
| <input type="checkbox"/> Licensed Practical Nurse (LPN) | <input type="checkbox"/> House Manager (if applicable) |
| <input type="checkbox"/> LMSW/LCSW/LMHC | |

Remarks (if applicable):

4. SCREENING AND REFERRAL PROCEDURES-PHYSICAL OR PSYCHIATRIC CONDITIONS:

Medical Assessment

Physical Exam

Psychiatric Assessment

Remarks (if applicable):

5. A SCHEDULE OF FEES FOR SERVICES RENDERED:

Remarks (if applicable):

6. INFECTION CONTROL PROCEDURES:

Remarks (if applicable):

7. COOPERATIVE AGREEMENTS:

Remarks (if applicable):

8(a). HIV/AIDS EDUCATION, COUNSELING, PREVENTION AND TESTING:

Remarks (if applicable):

8(b). THE USE OF MEDICATION ASSISTED TREATMENT:

Remarks (if applicable):

9. ALCOHOL AND DRUG SCREENING:

Remarks (if applicable):

10. ORDERING, PROCURING AND DISPOSING OF MEDICATION, AS WELL AS SELF-ADMINISTRATION

OF MEDICATION:

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Institutional Dispenser, if applicable | <input type="checkbox"/> Ordering |
| <input type="checkbox"/> Procuring | <input type="checkbox"/> Disposing |
| <input type="checkbox"/> Self-Administration | |

Remarks (if applicable):

11. QI and UR:

- | | | |
|---------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> QI Committee | <input type="checkbox"/> Key Performance Measures | <input type="checkbox"/> UR Process |
|---------------------------------------|---|-------------------------------------|

Remarks (if applicable):

12. EMERGENCIES:

Remarks (if applicable):

13. INCIDENT REPORTING AND REVIEW IN ACCORDANCE WITH PART 836:

- | | |
|--|---|
| <input type="checkbox"/> Administration of the Incident Management Program | <input type="checkbox"/> Annual Review by the Governing Authority |
| <input type="checkbox"/> Recording and Reporting Procedures | <input type="checkbox"/> Overall Effectiveness |
| <input type="checkbox"/> Minimum Standards for Investigation | <input type="checkbox"/> Corrective Action Plans |
| <input type="checkbox"/> Committee Composition | <input type="checkbox"/> Periodic Training |
| <input type="checkbox"/> Retention of Records | |

Remarks (if applicable):

14. RECORDKEEPING:

Remarks (if applicable):

15. EDUCATIONAL SERVICES FOR SCHOOL AGE CHILDREN:

Remarks (if applicable):

16. PROCUREMENT, STORAGE, PREPARATION OF FOOD AND NUTRITIONAL PLANNING:

Remarks (if applicable):

17. RECORD RETENTION:

Remarks (if applicable):

18. TOBACCO POLICIES:

Remarks (if applicable):

***For programs servicing children, please see LSB 2017-02 and add to policies**