

SUBSTANCE ABUSE PREVENTION AND TREATMENT BLOCK GRANT PROGRAM FIDELITY REVIEW

6/8/2009

As required by the Nebraska Department of Health and Human Services, Division of Behavioral Health.

*adapted from the state of Wisconsin

SECTION I: SAPTBG MONITORING CHECKLIST

Instructions: Using the key below, please complete all applicable sections of this checklist by placing a check in the column that best describes the program's compliance with each SAPTBG requirement:

- Y = "Yes," the program meets all the conditions of the requirement.
- N = "No," the program does not meet any of the conditions of the requirement.
- P = The program is in "Partial" compliance but does not meet all the conditions of the requirement.
- N/A = This requirement is "Not Applicable" to the program.

Name - Program

Name - Reviewer

Date(s) of Review

§ 96.124 Certain Allocations: (Required Services for Designated Women's Set Aside (WSA) Programs for Pregnant Women and Women with Dependent Children)

The Regional Network Provider must offer priority admission to pregnant women and women with dependent children. If the program has insufficient capacity, the Regional Network Provider will check with alternate network providers and Regions for availability. The individual must be placed on a wait list and offered interim services within 48 hours if declining an opening with an alternate provider or when there is no available capacity.

The amount set aside for women's services shall be expended on individuals who have no other financial means of obtaining such services as provided in § 96.137. If the program receives funds for pregnant women and women with dependent children (including women attempting to regain custody of their children), complete items (1) through (7). ***If the program is not a designated WSA program, skip to item (8).**

Y | N | P | NA | The following needs were assessed as evidenced by the WSA-1 and/or other agreement, as well as in the program plan, policies & procedures, assessment, service plan, service note, case management plan, or case management note.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. The program treats the family as a unit and, therefore, admits both women and their children into treatment services, if appropriate. ¹
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. The program provides or arranges for primary medical care for women who are receiving substance abuse services, including prenatal care. Review the record to determine if the woman indicated she was already receiving primary medical care (if pregnant, prenatal care) or was referred to a primary care physician (if pregnant, prenatal care physician).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. The program provides or arranges for child care while the women are receiving services. Document if already receiving and review the record to determine if the woman's need for child care services in order to participate in substance abuse services was assessed and was provided or arranged, if needed.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. The program provides or arranges for primary pediatric care for the women's children, including immunizations. Review the record to determine if the woman indicated her child(ren) was already receiving primary pediatric care or was referred to a primary pediatric care provider. The referral could be to a local health department, private physician, federally supported health provider, hospital-based clinic, etc.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. The program provides or arranges for gender-specific substance abuse treatment and other therapeutic interventions for women that may address issues of relationships, sexual abuse, physical abuse, and parenting, and child care while the women are receiving these services. Review the record to determine if the woman received gender specific SA treatment other therapeutic interventions which address issues of relationships, sexual and/or physical abuse and/or parenting identified in the assessment or service plan. Gender specific services could include participation in women's only treatment services addressing these areas, arranging for specialized services i.e. domestic violence, etc.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. The program provides or arranges for therapeutic interventions for children in custody of women in treatment which may, among other things, address the children's developmental needs, their issues of sexual and physical abuse, and neglect. Review the record to determine if the woman indicated that her child(ren) was already receiving therapeutic interventions, received referral or indicated her child(ren) did not need therapeutic interventions. Therapeutic interventions could include services to address their developmental needs, child MH or SA issues.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. The program provides or arranges for sufficient case management and transportation services to ensure that the women and their children have access to the services provided by (2) through (6) above. Review the record to determine if the woman's need for case management and ability to get to and from SA services was assessed and adequate transportation was provided or arranged, if needed. (Adequate transportation would include bus vouchers [if buses were in operation at the time of the service and individual's return home], taxi voucher, reimbursement for gas, Medicaid transportation, transportation in a program vehicle, etc.)

Comments

¹ Such an admission may not be appropriate; however, if for example, the father of the child(ren) is able to adequately provide care.

§ 96.126 Capacity of Treatment for Intravenous Drug Abusers

The Regional Network Provider must offer priority admission through immediate admission to individuals for intravenous substance abuse treatment. The Regional Network Provider will provide interim services to intravenous substance abusers on the waiting list when capacity does not exist. The program must document the specific requirements of interim services for this population.

Y | N | P | NA |

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	8. Within 7 days of reaching 90 percent of its treatment capacity, the program notifies the State that 90 percent of the capacity has been reached as evidenced by the weekly capacity report .
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	9. The program admits each individual who requests treatment for intravenous substance abuse and who meets clinical criteria for treatment services within: look for in the Capacity Report, Treatment Plan and Waitlist log (a) 14 days after making the request <i>or</i> (b) 120 days if the program has no capacity to admit the individual on the date of the request and, (c) The program makes interim services available within 48 hours of the initial request for treatment and until the individual is admitted to a substance abuse treatment program.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	10. When applicable, the program offers interim services that include, at a minimum, the following: (a) Counseling and education about HIV and tuberculosis (TB), about the risks of needle-sharing, the risks of transmission to sexual partners and infants, and about steps that can be taken to ensure that HIV and TB transmission does not occur. (b) Referral for HIV or TB treatment services, if necessary. (c) Counseling on the effects of alcohol and other drug use on the fetus for pregnant women, as well as referral for prenatal care.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	11. The program has established a documented waiting list that includes a unique patient identifier for each injecting drug abuser seeking treatment, including those receiving interim services while awaiting admission.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	12. The program has a mechanism that enables it to: (a) Document and maintain contact with individuals awaiting admission. Document contact in the wait list log (b) Admit or transfer waiting list clients at the earliest possible time to an appropriate treatment program within a reasonable geographic area.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	13. The program takes individuals awaiting treatment for intravenous substance abuse off the waiting list only when one of the following conditions exists: Document contact in the wait list log (a) Such persons cannot be located for admission into treatment <i>or</i> (b) Such persons refuse treatment <i>or</i> (c) Person entered treatment.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	14. The program carries out activities to encourage individuals in need of treatment services for intravenous drug abuse to participate in such treatment and uses an approach which can reasonably be expected to be an effective outreach method.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	15. The program ensures that outreach efforts have procedures which may include the following: (a) Training and educating the workforce on the importance and benefits of outreach. (b) Contacting, communicating, and following up with high-risk substance abusers, their associates, neighborhood residents within the constraints of Federal and State confidentiality requirements 45 CFR parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, and 42 C.F. R. Part 2. (c) Promoting awareness among injecting drug abusers about the relationship between injecting drug abuse and communicable diseases such as HIV. (d) Recommending steps that can be taken to ensure that HIV transmission does not occur. (e) Encouraging entry into treatment. For example: motivational interviewing
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Comments

² Interim services may also include federally approved interim methadone maintenance.

§ 96.127 Requirements Regarding Tuberculosis

Y	N	P	NA	
				Review Provider policy and procedures for TB and/or look in individual record.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. The program reports active cases of TB to the DHHS Division of Public Health Tuberculosis Program Manager and
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(a) adheres to all reporting requirements as set forth including NRS Sec.71-502, 71-1626 and 173 NAC Chapters 1-6.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b) adheres to all state and Federal confidentiality requirements when reporting such cases.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(c) maintains infection control procedures that are consistent with those established by the DHHS Division of Public Health Infection Control Office.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. The program routinely makes TB services available to each individual receiving treatment for substance abuse and monitors such service delivery. Review individual record.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. The program has established procedures that ensures the following TB services are provided, either directly or through arrangement/agreements with other public or non-profit private entities:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(a) Screening of all admissions for TB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b) Positive screenings shall receive test for TB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(c) Counseling related to TB
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(d) Referral for appropriate medical evaluations for TB treatment
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(e) Case management for obtaining any TB services
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(f) Reports any active cases of TB to the DHHS Division of Public Health Tuberculosis Program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(g) Documents screening, testing and referrals and/or any necessary follow-up information

Comments

§ 96.128 Requirements Regarding HIV

Nebraska is not a designated State; therefore, Nebraska may not use any SAPTBG funds for HIV early intervention programs/services. As a non-designated state, users of illicit substances may receive HIV services through Ryan White Comprehensive AIDS Resources Emergency (CARE) Act programs. A report, *Investigation of the Adequacy of the Community Planning Process to Meet the HIV Care Needs of Active Substance Users*, provides recommendations on how more effectively to use Title I funds to meet the needs of the substance-using population. Any SAPTBG funds used for HIV early intervention programs will be subject to repayment to the Substance Abuse and Mental Health Services Administration (SAMSHA), which provides SAPTBG funds to states. All Nebraska programs and providers receiving SAPTBG funds must ensure adherence to items (20) through (25).

Y	N	P	NA	
				Review Provider policy and procedures
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. SAPTBG funds may not be used for any program to make appropriate pretest counseling for HIV and AIDS available at the sites at which the individuals are undergoing treatment for substance abuse.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. SAPTBG funds may not be used for any program to make available, at the sites at which the individuals are undergoing treatment for substance abuse, appropriate HIV/AIDS testing, including tests to diagnose the extent of the deficiency in the immune system and tests to provide information on appropriate therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease available.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. SAPTBG funds may not be used for any program to make available appropriate post-test counseling at the sites at which the individuals are undergoing treatment for substance abuse.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. SAPTBG funds may not be used for any program to make available, at the sites at which the individuals are undergoing treatment for substance abuse, therapeutic measures for preventing and treating the deterioration of the immune system and for preventing and treating conditions arising from the disease.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. SAPTBG funds may not be used for any program that has established linkages with a comprehensive community resource network of related health and social services organizations to ensure a wide-based knowledge of the availability of these services and to facilitate referral.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. SAPTBG funds may not be used for any program to ensure that HIV early intervention services provided with patients' informed consent, and are not required as a condition of receiving substance abuse treatment or any other services.

Comments

§ 96.131 Treatment Services for Pregnant Women

Nebraska programs receiving SAPTBG funds must publicize the availability of services to women from the facilities and the fact that pregnant women receive such preference. This may be done in the following ways: street outreach programs, ongoing public service announcements (radio/television), regular advertisements in local/regional print media, posters placed in targeted areas, and frequent notification of availability of such treatment distributed to the network or community based organizations, health care organizations, health care providers and social service agencies.

Y | N | P | NA | [As evidenced in the provider subcontract, as well as policies and procedures.](#)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25. The program gives preference in admission to pregnant women who seek or are referred for and would benefit from SAPTBG funded treatment services. Further, all entities that serve women and who receive SAPTBG funds must provide preference in the following order: (a) To pregnant injecting drug users first. (b) To other pregnant substance abusers second. (c) To other injecting drug users third. (d) Women with dependent children fourth. (e) To Mental Health Board Commitments. (f) To all other individuals.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. By documenting on a weekly capacity report list , the program notifies the Regional Behavioral Health Authority when there is insufficient capacity to provide services to any such pregnant women who seek the services of the program.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. The program makes interim services available within 48 hours to pregnant women who cannot be admitted to treatment because of lack of capacity. Tx plan, wait list log. Referral to interim services indicated in individual record.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. The program has established a documented waiting list that includes a unique patient identifier for each pregnant woman seeking treatment, including those receiving interim services while awaiting admission.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	29. The program has a mechanism that enables it to: as evidenced by the wait list log (a) Document and maintain contact with individuals awaiting admission. (b) Admit or transfer waiting list clients at the earliest possible time to an appropriate treatment program within a reasonable geographic area.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30. The program removes a pregnant woman off the waiting list only when one of the following conditions exists: Document contact in the wait list log (a) she cannot be located for admission into treatment <i>or</i> (b) she refuses treatment <i>or</i> (c) she has entered treatment.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	31. The program carries out activities to publicize the availability of services to pregnant women in need of substance abuse treatment and encourages participation in such treatment by using an approach which can reasonably be expected to be an effective outreach method. Some form of evidence that that services have been publicized such as program flyers, publications, ads, tv appearances, etc.

Comments

Requirements for obtaining Substance Abuse Assessment when a request for treatment has been made by a person identified as a Priority Population.

Y | N | P | NA | [As evidence in the subcontract, provider policies and procedures, as well as wait list log.](#)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	32. An appointment for an assessment was scheduled within 48 business hrs of the initial request for substance abuse treatment.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	33. The appointment for a substance abuse assessment took place within 7 business days.

Comments

§ 96.132 Additional Requirements

Y | N | P | NA |

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	34. The program facilitates, arranges or makes available continuing education classes/instruction to employees who provide the services. HR, training manual
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	35. The program has in effect a system to protect individuals' records from inappropriate disclosure, and the system: (a) Is in compliance with all applicable State and Federal laws and regulations 45 CFR parts 160 & 164 Health Insurance Portability and Accountability Act, HIPAA, including 42 CFR part 2. (b) Includes provisions for employee education on the confidentiality requirements and the fact that disciplinary action may occur upon inappropriate disclosure. Should be noted in the provider's policies & procedures manual.

Comments

§ 96.135 Restrictions on the Expenditure of the Grant

Vendor/Sub-Contractor Compliance

When a sub-contract is issued by the Region to purchase services utilizing SAPTBG funds, conditions 1-8 on prohibited expenditures and the condition of first priority of services to pregnant women must be adhered to and monitored by the Region. Regions should develop a policy to ensure that all Regional Network Providers comply with all of the requirements.

Y | N | P | NA | [As evidenced in provider subcontracts.](#)

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	36. The program does not expend SAPTBG funds to provide inpatient hospital substance abuse services.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	37. The program does not expend SAPTBG funds to make payments to intended recipients of health services [42 USC 300x-31(a), 45 CFR section 96.135(a)(2)].
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	38. The program does not expend SAPTBG funds to purchase or improve land; purchase, construct, or permanently improve (other than minor remodeling) any building or other facility; or purchase major medical equipment [42 USC 300x-31(a), 45 CFR section 96.135(a)(3) and (d)].
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	39. The program does not expend SAPTBG funds to satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds [42 USC 300x-31(a), 45 CFR section 96.135(a)(4)].
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	40. The program does not expend SAPTBG funds to provide financial assistance to any entity other than a public or nonprofit private entity [42 USC 300x-31(a), 45 CFR section 96.135(a)(5)].
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	41. The program does not expend SAPTBG funds to provide individuals with hypodermic needles or syringes [42 USC 300x-31(a), 45 CFR section 96.135(a)(2)].
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	42. The program does not expend SAPTBG funds to provide treatment services in penal or correctional institutions.

Comments

§ 96.137 Payment Schedule

Y | N | P | NA | [Review provider subcontract.](#)

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	43. The program uses the SAPTBG as the "payment of last resort" for treatment services for pregnant women and women with dependent children and therefore, makes every reasonable effort to do the following:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(a) Collect reimbursement for the costs of providing such services to persons entitled to insurance benefits under the Social Security Act, including programs under title XVIII and title XIX; any State compensation program, any other public assistance program for medical expenses, any grant program, any private health insurance, or any other benefit program.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(b) Secure from individuals' payments for services in accordance with their ability to pay.

Comments

Charitable Choice

The State must comply with 42 U.S.C. 300x-65 and 42 C.F.R. part 54. [See 42 C.F.R. 54.8(c)(4) and 54.8(b), Charitable Choice Provisions and Regulations.]

Y | N | P | NA |

	44. Under Charitable Choice, grant recipients ensure that the program does the following: Should be indentified in the program's policies & procedures manual.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(a) ensure that religious organizations that are providers provide notice of their right to alternative services to all potential and actual program services recipients;
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(b) ensure that religious organizations that are providers refer program beneficiaries to alternative services; and The number of individuals who opt out is to be reported on the weekly capacity form.
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	(c) funds and/or provides alternative services (which are accessible, comparable and provided within a reasonable period of time) from another SA provider to which the program services recipient has no religious objection.

Comments

By signing the Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Program Fidelity Review Document, the Agency Director represents and warrants that all items listed above, and as indicated by completing all sections within the checklist (Y,N,P,N/A), are in compliance or working towards becoming compliant with the Federal Block Grant requirements, are approved by the organization, and are adhered to.

Print Name

Signature

Date