

# CONTRA COSTA COUNTY

## Minimum Quality Drug Treatment Standards for Drug Medi-Cal (DMC)

Compliance with the following Minimum Quality Treatment Standards is required in addition to CCR Title 9 and 22 regulations for all SUD treatment programs either partially or fully funded through DMC. If conflict between regulations and standards occurs, the most restrictive shall apply.

### A. Personnel Policies

1. Personnel files shall be maintained on all employees and volunteers/interns and shall contain the following:
  - a) Application for employment and/or resume;
  - b) Signed employment confirmation statement/duty statement;
  - c) Job description;
  - d) Performance evaluations;
  - e) Health records/status as required by program or Title 9;
  - f) Other personnel actions (e.g., commendations, discipline, status change, employment incidents and/or injuries);
  - g) Training documentation relative to substance use disorders and treatment;
  - h) Current registration, certification, intern status, or licensure;
  - i) Proof of continuing education required by licensing or certifying agency and program; and
  - j) Program Code of Conduct and for registered, certified, and licensed staff, a copy of the certifying/licensing body's code of conduct as well.
2. Job descriptions shall be developed, revised as needed, and approved by the Program's governing body. The job descriptions shall include:
  - a) Position title and classification;
  - b) Duties and responsibilities;
  - c) Lines of supervision; and
  - d) Education, training, work experience, and other qualifications for the position.

3. Written code of conduct for employees and volunteers/interns shall be established which addresses at least the following:
  - a) Use of drugs and/or alcohol;
  - b) Prohibition of social/business relationship with beneficiary's or their family members for personal gain;
  - c) Prohibition of sexual contact with beneficiary's;
  - d) Conflict of interest;
  - e) Providing services beyond scope;
  - f) Discrimination against beneficiary's or staff;
  - g) Verbally, physically, or sexually harassing, threatening, or abusing beneficiary's, family members or other staff;
  - h) Protection beneficiary confidentiality;
  - i) The elements found in the code of conduct(s) for the certifying organization(s) the program's counselors are certified under; and
  - j) Cooperate with complaint investigations.
4. If a program utilizes the services of volunteers and or interns, procedures shall be implemented which address:
  - a) Recruitment;
  - b) Screening;
  - c) Selection;
  - d) Training and orientation;
  - e) Duties and assignments;
  - f) Scope of practice;
  - g) Supervision;
  - h) Evaluation; and
  - i) Protection of beneficiary confidentiality.
5. Written roles and responsibilities and a code of conduct for the medical director shall be clearly documented, signed and dated by a program representative and physician.

## B. Program Management

### 1. Admission or Readmission

- a) Each program shall include in its policies and procedures written admission and readmission criteria for determining beneficiary's eligibility and suitability for treatment. These criteria shall include, at minimum:
  - i. DSM diagnosis;
  - ii. Use of alcohol/drugs of abuse;
  - iii. Physical health status; and
  - iv. Documentation of social and psychological problems.
- b) If a potential beneficiary does not meet the admission criteria, the beneficiary shall be referred to an appropriate service provider.
- c) If a beneficiary is admitted to treatment, a consent to treatment form shall be signed by the beneficiary.
- d) The medical director shall document the basis for the diagnosis in the beneficiary record.
- e) All referrals made by program staff shall be documented in the beneficiary record.
- f) Copies of the following documents shall be provided to the beneficiary upon admission:
  - i. Beneficiary rights, share of cost if applicable, notification of DMC funding accepted as payment in full, and consent to treatment.
- g) Copies of the following shall be provided to the beneficiary or posted in a prominent place accessible to all beneficiaries:
  - i. A statement of nondiscrimination by race, religion, sex, ethnicity, age, disability, sexual preference, and ability to pay;
  - ii. Complaint process and grievance procedures;
  - iii. Appeal process for involuntary discharge; and
  - iv. Program rules, expectations and regulations.
- h) Where drug screening by urinalysis is deemed medically appropriate the program shall:
  - i. Establish procedures which protect against the falsification and/or contamination of any urine sample; and

- ii. Document urinalysis results in the beneficiary's file.
2. Treatment
- A. Assessment for all beneficiaries shall include:
    - i. Drug/Alcohol use history;
    - ii. Medical history;
    - iii. Family history;
    - iv. Psychiatric/psychological history;
    - v. Social/recreational history;
    - vi. Financial status/history;
    - vii. Educational history;
    - viii. Employment history;
    - ix. Criminal history, legal status; and
    - x. Previous SUD treatment history.
  - B. Treatment plans shall be developed with the beneficiary and include:
    - i. A problem statement for all problems identified through the assessment whether addressed or deferred;
    - ii. Goals to address each problem statement (unless deferred);
    - iii. Action steps to meet the goals that include who is responsible for the action and the target date for completion;
    - iv. Typed or legibly printed name, signature, and date of signature of primary counselor, beneficiary, and medical director; and
    - v. All treatment plans shall be reviewed in accordance with CCR Title 22 requirements and updated to accurately reflect the beneficiary's progress or lack of progress in treatment.
  - C. Progress notes shall document the beneficiary's progress toward completion of activities and achievement of goals on the treatment plan.
  - D. Discharge documentation shall be in accordance with CCR Title 22 51341.
    - i. A copy of the discharge plan shall be given to the beneficiary.