

**Substance Abuse Prevention & Treatment Agency
Center for the Application of Substance Abuse Technologies (CASAT)
Treatment Certification Report**

Provider Name:
Level of Service:
Date of Site Visit:

General / Organizational Protocols & Operations

<p>NAC 458.123 NRS 458.025</p> <p>25 pts</p>	<p style="text-align: center;">Certification</p> <p>Standard: An operator shall notify the Division of any anticipated change which will affect the certification of the program not later than 60 days before the change will occur or as soon as the operator is aware of the change if the operator is not aware of the change at least 60 days before the change will occur. The Division shall notify the operator of any actions the operator must take to maintain the certification of the program or whether the operator will be required to apply for a new certification as a result of the change.</p>
<p>NAC 458.153, 1. NRS 458.025</p> <p>15 pts</p>	<p style="text-align: center;">Operators / Governing Boards</p> <p>Standard: A program must have a specified operator who is responsible for the program. The operator may designate another responsible party to implement and supervise the responsibilities of the operator pursuant to this chapter. The operator remains responsible for any actions of his or her designee.</p>
<p>NAC 458.153, 2. NRS 458.025</p> <p>15 pts</p>	<p style="text-align: center;">Operators / Governing Boards</p> <p>Standard: If the program is operated by a corporation, the governing body of the corporation must be the operator.</p>
<p>NAC 458.153, 2. a-c NRS 458.025</p> <p>25 pts</p>	<p style="text-align: center;">Operators / Governing Boards</p> <p>Standard: The governing body shall: Adopt written bylaws or policies that define any reimbursement to be provided to its members and the powers and duties of the governing body and its committees. Meet at least quarterly and keep written minutes that indicate:</p> <ul style="list-style-type: none"> • The date of the meeting; • The names of the persons present at the meeting; • Any decisions made by the governing body at the meeting; • Any other actions taken by the governing body at the meeting; • The review and approval of budgets by the governing body; and <p>Make available for review by the Division the minutes of meetings, the articles of incorporation and the bylaws of the governing body.</p>

<p>NAC 458.153, 3. a-d NRS 458.025</p> <p>30 pts</p>	<p style="text-align: center;">Operators / Governing Boards</p> <p>Standard: An operator shall:</p> <ul style="list-style-type: none"> • Develop and maintain a manual containing the policies and procedures of the program which meets the requirements set forth in NAC 458.158; • Review any changes to the manual containing the policies and procedures of the program and have those changes approved by the Division as required pursuant to NAC 458.108; • Comply with the provisions of the manual containing the policies and procedures of the program in operating the program; • Make a copy of the manual containing the policies and procedures of the program available for review to any person who requests to review it.
<p>NAC 458.153, 3. e NRS 458.025</p> <p>25 pts</p>	<p style="text-align: center;">Operators / Governing Boards</p> <p>Standard: An operator shall:</p> <ul style="list-style-type: none"> • Notify the Division within 24 hours after the occurrence of an incident that may cause imminent danger to the health or safety of the clients, participants or staff of the program, or a visitor to the program.
<p>NAC 458.153, 3. f-g NRS 458.025</p> <p>30 pts</p>	<p style="text-align: center;">Quality Assurance Plan</p> <p>Standard: An operator shall:</p> <ul style="list-style-type: none"> • Establish a plan for <ul style="list-style-type: none"> ○ Improving the quality of the services provided by the program which addresses, without limitation, operational services, human resources, fiscal services and clinical outcome measures; and ○ Ensuring that the integrity of the program will be maintained; • Make a copy of the plan established pursuant to paragraph (f) available to the Division at the time of an inspection by the Division of the premises where the program is providing services.
<p>NAC 458.153, 3. h-i NRS 458.025</p> <p>30 pts</p>	<p style="text-align: center;">Operators / Governing Boards</p> <p>Standard: An operator shall:</p> <ul style="list-style-type: none"> • Maintain all licensure and certifications required by the Division and comply with all local, state and federal laws, regulations and ordinances; and • Document that paid staff are on the premises where the program is providing services at all times when a client or participant is present on the premises.
<p>NAC 458.153, 3. j NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Governmental / Certifying Agency Reports</p> <p>Standard: If the operator receives a report from a governmental agency or certifying agency relating to the program, the physical plant on the premises where the program is providing services or the operations of the program, provide a copy of the report to the Division (SAPTA):</p> <ul style="list-style-type: none"> • At the time of an inspection by the Division (SAPTA) of the premises where the program is providing services; or • If the report requires the operator to take correction action, not more than 30 days after the operator receives the report.

<p>NAC 458.173, 1. NRS 458.025</p> <p>30 pts</p>	<p style="text-align: center;">Insurance</p> <p>Standard: An operator shall ensure that the program is insured:</p> <ul style="list-style-type: none"> • For liability in an amount sufficient to protect the clients, participants and staff of the program, and the visitors to the program. The policy of insurance must, at a minimum, provide coverage for professional liability and, if the operator receives state or federal money for an alcohol or drug abuse program and is the governing body of a corporation or of a nonprofit organization, the policy of insurance must include liability insurance for directors and officers. The policy of insurance must provide that notice be given to the Division not later than 30 days after cancellation of the policy or after an operator does not renew the policy.
<p>NAC 458.173, 2. NRS 458.025</p> <p>30 pts</p>	<p style="text-align: center;">Insurance / Consultants</p> <p>Standard: An operator shall ensure that the program is insured:</p> <ul style="list-style-type: none"> • For all liabilities arising out of the acts or omissions of a consultant while providing a service for the program. The policy of insurance may be provided by the program or the consultant. If the policy of insurance is provided by the consultant, the operator must obtain a copy of the policy and place the copy in the personnel file of the consultant.
<p>NAC 458.177, 1. NRS 439.200, 458.025</p> <p>15 pts</p>	<p style="text-align: center;">Ethics</p> <p>Standards: An operator and the staff shall not knowingly provide false information to the Division or a representative of the Division.</p>
<p>NAC 458.177, 2. NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Ethics</p> <p>Standards: An operator and the staff shall use information that is generally accepted in the field of prevention or treatment of substance-related disorders.</p>
<p>NAC 458.177, 3. (a-b) NRS 439.200, 458.025</p> <p>15 pts</p>	<p style="text-align: center;">Ethics</p> <p>Standards: An operator shall supervise the staff to ensure that a member of the staff does not:</p> <ul style="list-style-type: none"> • Become impaired in his or her ability to perform services; or • Perform activities which are unauthorized by his or her licensure or certification.
<p>NAC 458.183, 1-6. NRS 439.200, 458.025</p> <p>25 pts</p>	<p style="text-align: center;">Ethics</p> <p>Standards: An operator shall:</p> <ul style="list-style-type: none"> • Upon the request of the client/participant, assist the client/participant in reporting any violation of any licensure or certification standard or requirement, or any violation of any law or regulation to the appropriate board or agency. • Act in the best interest of the client/participant. • Terminate the provision of a service to a client/participant if it is reasonably clear that the client/participant is not benefiting from the service. • Not give or receive any commission or any other form of remuneration for the referral of a client/participant from the entity to which the client/participant is referred. • Not use his or her relationship with a client/participant to promote his or her personal gain or profit. • Not enter into, or attempt to enter into, a financial relationship that is unrelated to services performed by the program with a current client/participant or a former client/participant, as required by the licensure or certification board of the operator or the member of the staff and for unlicensed or uncertified operators or staff, for at least 2 years after the client/participant is discharged from the program.

Policy and Procedure

<p>NAC 458.158, 1. NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Medical Emergency</p> <p>Standard: An operator shall maintain a manual containing the policies and procedures of the program and the services to be provided by the program, including, without limitation, the policies and procedures to be followed in the event of a medical emergency.</p>
<p>NAC 458.158, 2. NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Grievance Procedure</p> <p>Standard: An operator shall maintain a manual containing the policies and procedures of the program and the services to be provided by the program, including, without limitation, the policies and procedures for the registration and disposition of complaints by clients, participants and staff and the right to appeal without threat of reprisal.</p>
<p>NAC 458.158, 3. a-c NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Human Resources</p> <p>Standard: An operator shall maintain a manual containing the policies and procedures of the program and the services to be provided by the program, including, without limitation, the policies and procedures for the staff, including, without limitation, an accurate job description, signed by the applicable employee, for each position held by an employee of the program that describes:</p> <ul style="list-style-type: none"> • The title of the position; • The duties and responsibilities of the position; and • The qualifications for the position.
<p>NAC 458.158, 4. a-f NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Financial</p> <p>Standard: An operator shall maintain a manual containing the policies and procedures of the program and the services to be provided by the program, including, without limitation, the policies and procedures to be used by the operator to:</p> <ul style="list-style-type: none"> • Claim funds or bill for services; • Receive and record funds; • Record expenditures; • Prepare financial reports; • Maintain information for the support of claims for funds or to bill for services; and • Implement internal controls and audits, as necessary.
<p>NAC 458.158, 5. a-c NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Financial</p> <p>Standard: An operator shall maintain a manual containing the policies and procedures of the program and the services to be provided by the program, including, without limitation, the policies and procedures to be used to maintain financial records of clients or participants when a client or participant is billed for services. The policies and procedures must include, without limitation, requirements that an operator shall:</p> <ul style="list-style-type: none"> • Inform prospective clients and participants of financial arrangements concerning a service before providing the service; • Maintain accurate records of: <ul style="list-style-type: none"> ○ Any fees charged to a client or participant; and ○ Any payments made by a client or participant; and • Make the records required pursuant to paragraph (b) available to the client or participant for review upon request.

<p>NAC 458.163, 1 NRS 458.025, 458.055</p> <p>10 pts</p>	<p style="text-align: center;">Confidentiality</p> <p>Standard: An operator shall ensure that the program complies with all applicable confidentiality and recordkeeping provisions set forth in 42 C.F.R. Part 2, 45 C.F.R. Parts 160, 162 and 164, NRS 458.055 and any other applicable confidentiality laws pertaining to the services provided by the program.</p> <p>In the event of a conflict in the confidentiality requirements set forth in 42 C.F.R. Part 2, 45 C.F.R. Parts 160, 162 and 164, NRS 458.055 and any other applicable confidentiality laws, the more restrictive law will apply.</p>
<p>NAC 458.163, 3 NRS 458.025, 458.055</p> <p>10 pts</p>	<p style="text-align: center;">Confidentiality</p> <p>Standard: An operator shall ensure that the program allows a consultant to have access to confidential information concerning clients or participants only if the confidentiality agreements required by 42 C.F.R. Part 2, 45 C.F.R. Parts 160, 162 and 164 are satisfied. Such agreements must be maintained in the personnel file of the consultant.</p>
<p>NAC 458.272, 5-7. NRS 458.025, 458.055</p> <p>10 pts</p>	<p style="text-align: center;">Confidentiality</p> <p>Standard: An operator shall ensure that:</p> <ul style="list-style-type: none"> • The staff readily has access to the client records to the extent authorized pursuant to 42 C.F.R. Part 2 and 45 C.F.R. Parts 160, 162 and 164. • The program maintains a system for the maintenance and protection of client information which satisfies the requirements set forth in 42 C.F.R. Part 2 and 45 C.F.R. Parts 160, 162 and 164, including, without limitation, requirements for: <ul style="list-style-type: none"> ○ Adequate provisions to prevent unauthorized access or theft of any form of a record of a client. ○ The locked storage of paper records. ○ Adequate provisions for a system of backup of records maintained in a computer system in case of a failure of the primary system. ○ Retention of the records of each client for not less than 6 years after the client is discharged from the treatment program, to be made available as required pursuant to 45 C.F.R. Parts 160, 162 and 164. ○ Appropriate methods to destroy records of clients as required by federal regulation. • Each client has access to their records as required pursuant to 42 C.F.R. Part 2 and 45 C.F.R. Parts 160, 162 and 164.
<p>NAC 458.168, 1, 2. NRS 458.025, 458.055</p> <p>10 pts</p>	<p style="text-align: center;">Human Resources</p> <p>Standard: An operator must establish a system for maintaining the records of the members of the staff which maintains the confidentiality and safekeeping of the records and contains elements per NAC 458.168 1. b-g, 2.</p>
<p>NAC 458.168, 3. NRS 458.025, 458.055</p> <p>10 pts</p>	<p style="text-align: center;">Human Resources</p> <p>Standard: A record of a member of the staff must be made available only to the member of the staff upon submission of a request to review the records and to persons who are:</p> <ul style="list-style-type: none"> • Authorized by the policies and procedures of the program; • Inspecting the program; and • Authorized by the member of the staff.
<p>NAC 458.177, 4. NRS 458.025</p> <p>10 pts</p>	<p style="text-align: center;">Ethics</p> <p>Standards: An operator shall not allow a client or participant to grant power of attorney to the operator or a member of the staff.</p>

<p>NAC 458.241, 1. NRS 458.025, 458.055</p>	<p style="text-align: center;">Control of Infections</p> <p>Standards: The operator of a treatment program shall maintain a manual containing the policies and procedures of the treatment program which includes, without limitation, the policies and procedures concerning the control of infections, including, without limitation, communicable diseases, and concerning universal precautions against bloodborne pathogens.</p>
<p>NAC 458.241, 2. NRS 458.025, 458.055</p>	<p style="text-align: center;">Assessment and Treatment Procedures</p> <p>Standards: The operator of a treatment program shall maintain a manual containing the policies and procedures of the treatment program which includes, without limitation, the policies and procedures describing the manner in which the treatment program will satisfy the requirements set forth in NAC 458.246 and 458.272. 458.246: Provisions of services to clients. 458.272: Records regarding clients.</p>
<p>NAC 458.241, 3. NRS 458.025, 458.055</p>	<p style="text-align: center;">Assessment and Treatment Procedures</p> <p>Standards: The operator of a treatment program shall maintain a manual containing the policies and procedures of the treatment program which includes, without limitation, the policies and procedures for releasing information about a client which satisfies the requirements set forth in 42 C.F.R. Part 2 and 45 C.F.R. Parts 160, 162 and 164 and which reveals:</p> <ul style="list-style-type: none"> • That the client has abused or neglected a child or an elderly person; • That the client presents a danger to other people; • That the client has a communicable disease; or • The identity of the client and his or her human immunodeficiency virus seropositive status.
<p>NAC 458.241, 4. NRS 458.025, 458.055</p>	<p style="text-align: center;">Assessment and Treatment Procedures</p> <p>Standards: The operator of a treatment program shall maintain a manual containing the policies and procedures of the treatment program which includes, without limitation, the policies and procedures describing the criteria which the treatment program will use to satisfy and comply with the criteria of the Division for admission, continued service and discharge. (<i>ASAM Criteria</i>)</p>
<p>NAC 458.257 NRS 439.200, 458.025</p>	<p style="text-align: center;">Opioid Treatment Program</p> <p>Standards: The operator of an opioid treatment program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.</p>
<p>NAC 458.267, 1-2. NRS 458.025, 458.055</p>	<p style="text-align: center;">Telehealth Procedures</p> <p>Standards: The operator of a treatment program which offers services using telehealth shall submit the policies and procedures for telehealth to the Division for approval. The policies, procedures and protocols must provide for:</p> <ul style="list-style-type: none"> • The confidentiality of the setting for clients and information concerning clients which satisfies the requirements set forth in 42 C.F.R. Part 2 and 45 C.F.R. Parts 160, 162 and 164; • Protocols for verifying: <ul style="list-style-type: none"> ○ The location of a client; ○ The identity of a client and the professional at the time the service using telehealth is provided; ○ Whether telehealth is appropriate for a client; and ○ The informed consent of a client concerning telehealth; • Actions the program will take in case of an emergency involving a client including, without limitation, verifying the safety of the client and emergency services available to the client; • Compliance with ethical standards relating to any applicable professional licensure and certification specific to telehealth; • Compliance with other policies of the Division required in the <u>Administrative Manual</u> of the Division;

	<ul style="list-style-type: none"> • Compliance with the applicable documentation requirements of NAC 458.103 to 458.193, inclusive, and section 2 of this regulation and 458.241 to 458.272, inclusive, and section 3 of this regulation as if the services were provided to a client in person; and • The manner in which the dignity of clients will be maintained. <p><i>Telehealth means the use of telecommunications and information technology to provide access to health assessment, diagnoses, interventions, consultations, supervision and information across distance.</i></p>
<p>NAC 458.291, 1-6. NRS 458.025, 458.055</p> <p>10 pts</p>	<p style="text-align: center;">Drug Court Services</p> <p>Standards: The operator of a drug court program shall maintain a manual containing the policies and procedures of the drug court program which includes, without limitation, the policies and procedures required pursuant to NAC 458.158, and the policies and procedures of the drug court program must include, without limitation, evidence of implementation of:</p> <ul style="list-style-type: none"> • A restorative justice model of treatment for criminal justice clients; • Incentives and sanctions; • Motivation enhancement approaches; • Activities that encourage behavior that is designed to benefit other persons; • Phasing of programs; and • Modeling of behavior by staff.
<p>NAC 458.321 NRS 458.025, 458.055, 484C.310</p> <p>10 pts</p>	<p style="text-align: center;">Evaluation Centers</p> <p>Standards: The operator of an evaluation center program shall maintain a manual containing the policies and procedures of the evaluation center program which includes, without limitation, the policies and procedures required pursuant to NAC 458.158, and policies and procedures describing the manner in which the evaluation center program will satisfy the requirements set forth in NAC 458.326 and 458.331.</p> <p>458.326: Assessments of clients. 458.331: Records regarding clients.</p>
<p>Division Criteria</p> <p>10 pts</p>	<p style="text-align: center;">Level 0.5 Early Intervention</p> <p>Standards: The operator of an early intervention program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.</p>
<p>Division Criteria</p> <p>10 pts</p>	<p style="text-align: center;">Level 1 Outpatient</p> <p>Standards: The operator of an outpatient program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.</p>
<p>Division Criteria</p> <p>10 pts</p>	<p style="text-align: center;">Level 2.1 Intensive Outpatient</p> <p>Standards: The operator of an intensive outpatient program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.</p>
<p>Division Criteria</p> <p>10 pts</p>	<p style="text-align: center;">Level 2.5 Partial Hospitalization</p> <p>Standards: The operator of a partial hospitalization program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.</p>

Division Criteria 10 pts	Level 3.1 Clinically Managed Low-Intensity Residential Standards: The operator of a clinically managed low-intensity program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.
Division Criteria 10 pts	Level 3.5 Clinically Managed Medium-Intensity Residential (Adolescent) Standards: The operator of a clinically managed medium-intensity adolescent program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria. In addition to the description in ASAM, the program must include no less than 25 hours per week of structured interventions. A minimum of 7 hours per day of structured activities must be provided. A minimum of 10 hours of clinical counseling services must be provided in each week. Types of therapies are noted with ASAM Level 3.5 services.
Division Criteria 10 pts	Level 3.5 Clinically Managed High-Intensity Residential (Adult) Standards: The operator of a clinically managed high-intensity adult program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria. In addition to the description in ASAM, the program must include no less than 25 hours per week of structured interventions. A minimum of 7 hours per day of structured activities must be provided. A minimum of 10 hours of clinical counseling services must be provided in each week. Types of therapies are noted with ASAM Level 3.5 services.
Division Criteria 10 pts	Level 3.7 Medically Monitored High-Intensity Inpatient (Adolescent) Standards: The operator of a medically monitored high-intensity adolescent program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.
Division Criteria 10 pts	Level 3.7 Medically Monitored Intensive Inpatient (Adult) Standards: The operator of a medically monitored intensive inpatient adult program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.
Division Criteria 10 pts	Level 1-WM Ambulatory Withdrawal Management without Extended On-Site Monitoring Standards: The operator of an ambulatory withdrawal management program without extended on-site monitoring shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.
Division Criteria 10 pts	Level 2-WM Ambulatory Withdrawal Management with Extended On-Site Monitoring Standards: The operator of an ambulatory withdrawal management program with extended on-site monitoring shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.
Division Criteria 10 pts	Level 3.2-WM Clinically Managed Residential Withdrawal Management Standards: The operator of a clinical managed residential withdrawal management program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.
Division Criteria 10 pts	Level 3.7-WM Medically Monitored Inpatient Withdrawal Management (Adult) Standards: The operator of a medically monitored inpatient withdrawal management adult program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The ASAM Criteria.

<p>Division Criteria</p> <p>10 pts</p>	<p align="center">Civil Protective Custody (Adult)</p> <p>Standards: The operator of a civil protective custody adult program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in the Division Criteria (NRS 458.175 and 458.270). CPC's must meet, at a minimum, requirements of a Level 3.2WM program per ASAM.</p>
<p>Division Criteria</p> <p>DDC Toolkits</p> <p>10 pts</p>	<p align="center">Co-Occurring Disorder (COD) Services</p> <p>Standards: The operator of a co-occurring disorder program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the requirements set forth in The Dual Diagnosis Capability in Addiction Treatment Toolkit.</p>
<p>Division Criteria</p> <p>10 pts</p>	<p align="center">Transitional Housing</p> <p>Standards: The operator of a transitional housing program shall develop a program description and policies and procedures describing the manner in which the program will satisfy the following requirements set forth in the Division Criteria:</p> <ul style="list-style-type: none"> • Supportive living / drug free environment • Admission, Continued Service, Transfer and Discharge Criteria
<p>NAC 458.262</p> <p>NRS 458.025</p> <p>10 pts</p>	<p align="center">Group Counseling (treatment levels only)</p> <p>Standard: If a treatment program provides counseling for groups, the operator shall ensure that any session for counseling for a group includes not more than 15 clients. The Provider shall include this requirement in policy for treatment levels of service.</p>

Human Resource / Personnel Protocols & Operations

<p>NAC 458.168, 1. b</p> <p>NRS 458.025, 458.055</p> <p>5 pts per record</p>	<p align="center">Personnel Record Content</p> <p>Standard: An operator must establish a system for maintaining the records of the members of the staff which contains:</p> <ul style="list-style-type: none"> • The application or resume of each member of the staff, • Any employment contract signed by a member of the staff and the operator or a designee thereof, and • Any document containing the job performance standards which is signed by a member of the staff and the operator or the designee.
<p>NAC 458.168, 1. c, g</p> <p>NRS 458.025, 458.055</p> <p>20 pts per record</p>	<p align="center">Personnel Record Content / Background Checks</p> <p>Standard: An operator must establish a system for maintaining the records of the members of the staff which:</p> <ul style="list-style-type: none"> • Includes, for each member of the staff who serves clients who are under 16 years of age, documentation of the results of an inquiry made pursuant to NRS 179A.180 to 179A.240, inclusive. • Includes a copy of any report of criminal history that is obtained pursuant to NRS 641C.260 or for each member of the staff working with any person who is less than 18 years of age.

<p>NAC 458.168, 1. d, e NRS 458.025, 458.055</p> <p>20 pts per record</p>	<p align="center">Personnel Record Content / Licensure</p> <p>Standard: An operator must establish a system for maintaining the records of the members of the staff which:</p> <ul style="list-style-type: none"> • Includes a copy of the certification, registration or license of each member of the staff who provides treatment or another service requiring certification, registration or licensure of the member of the staff. • Includes a verification signed by each member of the staff indicating that the member of the staff has participated in a course of orientation regarding the policies and procedures which govern the service that the member of the staff provides.
<p>NAC 458.168, 1. f NRS 458.025, 458.055</p> <p>5 pts per record</p>	<p align="center">Personnel Record Content</p> <p>Standard: An operator must establish a system for maintaining the records of the members of the staff which:</p> <ul style="list-style-type: none"> • Includes, for each member of the staff who is not a citizen of the United States, a copy of Form I-9, Employment Eligibility Verification, of the United States Citizenship and Immigration Services of the Department of Homeland Security, which verifies that the member of the staff is lawfully entitled to remain and work in the United States.
<p>NAC 458.168, 2. 458.173, 2. NRS 458.025, 458.055</p> <p>15 pts per record</p>	<p align="center">Consultant / Personnel Record Content</p> <p>Standard: If a record of a member of the staff includes an employment contract or a document containing job performance standards, the contract or standards must clearly specify the nature and amount of the service to be provided by the member of the staff.</p> <p>If the policy of insurance is provided by the consultant, the operator must obtain a copy of the policy and place the copy in the personnel file of the consultant.</p>

CLINICAL PROTOCOLS

Screening, Assessment and Consent Protocols

<p>NAC 458.163, 2. NRS 458.025, 458.055</p> <p>10 pts per record</p>	<p style="text-align: center;">HIV Release of Information</p> <p>Standard: An operator shall ensure that a client or participant provides separate and explicit consent to allow the operator or a designee thereof to release information which identifies the client or participant and his or her human immunodeficiency virus seropositive status.</p>
<p>NAC 458.246, 1. a-b NAC 458.306 NAC 458.331 NRS 458.025</p> <p>30 pts per record</p>	<p style="text-align: center;">Assessment: Bio-psycho-social / ASAM / DSM / Case Management</p> <p>Standard: The operator of a treatment program shall:</p> <ul style="list-style-type: none"> • Perform an assessment of each client using a method approved by the Division that addresses both substance-related and mental health disorders or obtain the most recent assessment of the client which is found to be sufficient to: <ul style="list-style-type: none"> ○ Make a complete identification of any problems concerning the substance-related disorder of the client; and ○ Determine the appropriate level of service for the client pursuant to the criteria of the Division.
<p>NAC 458.246, 4. NRS 458.025</p> <p>15 pts per record</p>	<p style="text-align: center;">Assessment and Referral</p> <p>Standard: The operator of a treatment program shall:</p> <ul style="list-style-type: none"> • Provide the appropriate level of services determined pursuant to the assessment or refer the client to services which are the appropriate level and are otherwise available in the community.
<p>NAC 458.246, 5. NRS 458.025</p> <p>15 pts per record</p>	<p style="text-align: center;">Assessment and Referral</p> <p>Standard: The operator of a treatment program shall:</p> <ul style="list-style-type: none"> • Provide, when appropriate, a referral to, and coordination of care with any other provider of a service related to the treatment of a substance-related or mental health disorder to address any identified problems of a client which cannot be resolved by a service provided by the treatment program.
<p>NAC 458.252, 1. a-b, 4. NAC 458.306 NAC 458.326 NRS 458.025</p> <p>15 pts per record</p>	<p style="text-align: center;">Assessment / Qualified Staff</p> <p>Standard: The operator of a treatment program which provides an assessment for substance-related disorders and mental health disorders shall:</p> <ul style="list-style-type: none"> • Require that such an assessment be conducted by: <ul style="list-style-type: none"> ○ One person who is both: <ul style="list-style-type: none"> • Licensed or certified as an alcohol and drug abuse counselor pursuant to chapter 641C of NRS, or the intern of such a counselor; and • A mental health professional, or the intern of such a professional, who is licensed as a psychologist pursuant to chapter 641 of NRS, a marriage and family therapist pursuant to chapter 641A of NRS or a clinical social worker pursuant to chapter 641B of NRS, or who is a medical physician with a certification in addiction medicine from a nationally accepted board; or ○ Two persons: <ul style="list-style-type: none"> • One of whom is licensed or certified as an alcohol and drug abuse counselor pursuant to chapter 641C of NRS, or the intern of such a counselor; and • The other of whom is a mental health professional, or the intern of such a professional, who is licensed as a psychologist pursuant to chapter 641 of NRS, a marriage and family therapist pursuant to chapter 641A of NRS or a clinical social worker pursuant to chapter 641B of NRS, or who is a medical physician with a certification in addiction medicine from a nationally accepted board.

	<ul style="list-style-type: none"> If such an assessment is conducted by an intern, require that the assessment be supervised and reviewed by the appropriate licensed or certified alcohol and drug abuse counselor or mental health professional who is licensed as a psychologist pursuant to chapter 641 of NRS, a marriage and family therapist pursuant to chapter 641A of NRS or a clinical social worker pursuant to chapter 641B of NRS, or who is a medical physician with a certification in addiction medicine from a nationally accepted board.
<p>NAC 458.252, 2. 3. NAC 458.296 NAC 458.306 NAC 458.326 NRS 458.025</p> <p>30 pts per record</p>	<p style="text-align: center;">Assessment</p> <p>Standard: The operator of a treatment program which provides an assessment for substance-related disorders and mental health disorders shall:</p> <ul style="list-style-type: none"> Determine whether the person being assessed has a co-occurring substance-related and mental health disorder and, if so, determine the appropriate treatment for the disorders. Provide a comprehensive written report concerning such an assessment which includes, without limitation, the findings of each person who conducted the assessment.
<p>NAC 458.272, 1. a, c, d, e, f, k NAC 458.306 NAC 458.331 NRS 458.025, 458.055</p> <p>30 pts per record</p>	<p style="text-align: center;">Clinical Record Content</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must adhere to procedures for medical records and include:</p> <ul style="list-style-type: none"> The name, age, gender, race, ethnicity and permanent address of the client. A statement from the client, signed within 24 hours after intake or upon enrollment in the treatment program, explaining that he or she is seeking service, unless the client is being provided a service related to civil protective custody. A consent form for treatment services signed by the client or the parent or guardian of the client within 24 hours after intake or upon enrollment in the treatment program, unless the client is being provided a service related to civil protective custody. If <i>Drug Court</i> the consent form must be signed upon intake or enrollment in the drug court program. If <i>Evaluation Center</i> the consent form must be signed upon intake or enrollment in the evaluation center program. Any consent to release information which satisfies the requirements set forth in 42 C.F.R. Part 2 and 45 C.F.R. Parts 160, 162 and 164. The source of any referral to the treatment program. The date, type and duration of any contact with the client, and any services provided to the client.
<p>NAC 458.272, 1. b NAC 458.306 NAC 458.331 NRS 458.025, 458.055</p> <p>10 pts per record</p>	<p style="text-align: center;">Clinical Record Content (funded providers only)</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must include:</p> <ul style="list-style-type: none"> If services are funded by the Division, an evaluation of the financial status of the client sufficient to determine eligibility for such services.
<p>NAC 458.272, 1. g, i, j NAC 458.306 NAC 458.331 NRS 458.025, 458.055</p> <p>20 pts per record</p>	<p style="text-align: center;">Clinical Record Content / Assessment Discussion</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must include:</p> <ul style="list-style-type: none"> A copy of the assessment performed by the operator or obtained by the operator. Any additional information that should be taken into consideration during the planning of treatment, determination of appropriate referrals and determination of any need for coordination of care. Documentation of any discussion with the client concerning the results of the treatment assessment, appropriate referrals and any barriers to treatment.

<p>NAC 458.272, 1. 1. 1-4 NAC 458.306 NAC 458.331 NRS 458.025, 458.055</p> <p>15 pts per record</p>	<p style="text-align: center;">Clinical Record Content</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must include documentation of any:</p> <ul style="list-style-type: none"> • Incident that may cause imminent danger to the health and safety of the client, other clients or staff, or persons outside the treatment program. • Problem involving the client. • Infraction of the rules of the treatment program by the client. • Signs or symptoms of illness or injury of the client.
<p>NAC 458.272, 1. m. 1-2 NAC 458.306 NAC 458.331 NRS 458.025, 458.055</p> <p>15 pts per record</p>	<p style="text-align: center;">Clinical Record Content</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must include:</p> <ul style="list-style-type: none"> • Documentation in support of services that the treatment program provides to the client, including, without limitation, any: <ul style="list-style-type: none"> ○ Correspondence concerning the client. ○ Results of a test conducted on the client, including, without limitation, any test conducted by a laboratory.
<p>NAC 458.272, 1. p. 1-3, 2 NAC 458.306 NAC 458.331 NRS 458.025, 458.055</p> <p>20 pts per record</p>	<p style="text-align: center;">Clinical Record Content</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must include acknowledgement that the client received:</p> <ul style="list-style-type: none"> • A copy of the notification, which is in the form approved by the Division and which was signed by the client, indicating: <ul style="list-style-type: none"> ○ The procedure for the client to register a complaint and to appeal a decision by the treatment program concerning a complaint. ○ The requirements for the confidentiality of the client information set forth in 42. C.F.R. Part 2, 45 C.F.R. Parts 160, 162 and 164 and any other applicable federal or state laws governing the confidentiality of client information for the service provided. ○ Any other rights of the client that are specified by the Division.
<p>NAC 458.272, 3 NAC 458.306 NAC 458.331 NRS 458.025, 458.055</p> <p>15 pts per record</p>	<p style="text-align: center;">Clinical Record Content</p> <p>Standard: The operator of a treatment program shall ensure that client records adhere to procedures for medical records.</p>

Treatment and Level of Care Protocols

<p>NAC 458.246, 2. NRS 458.025</p> <p>10 pts per record</p>	<p style="text-align: center;">Treatment Plan</p> <p>Standard: The operator of a treatment program shall: Identify the staff which provide the services based on the assessment and require such staff to develop a plan of treatment, not including detoxification, on or before the third contact of the client with the program or on or before the third day on which the client receives services from the program, whichever occurs first. For the purposes of this subsection, any contact that a client has with the program for the sole purpose of receiving medication does not constitute contact or receiving services.</p>
<p>NAC 458.246, 2. a-c NRS 458.025</p> <p>30 pts per record</p>	<p style="text-align: center;">Treatment Plan</p> <p>Standard: The operator of a treatment program shall ensure: The plan of treatment must specify:</p> <ul style="list-style-type: none"> • Time-specific behavioral goals and action steps within the six dimensions set forth in the ASAM Criteria: Treatment Criteria for Addictive, Substance-Related, and Co-Occurring Conditions, which is adopted by reference pursuant to NAC 458.095, as specific in the criteria of the Division to be achieved by the client in response to the problems identified by the treatment assessment; • The services to be provided by the staff to facilitate the client in attaining the goals of the plan; and • The member of the staff who is responsible for ensuring that the services specified are provided and that the client attains the goals of the plan.
<p>NAC 458.246, 3. NRS 458.025</p> <p>20 pts per record</p>	<p style="text-align: center;">Treatment Plan Review / ASAM Continued Service or Transfer Criteria</p> <p>Standard: The operator of a treatment program shall review and, as applicable, revise the plan of treatment of a client based on the criteria of the Division for continuing the provision of services to and transferring a client. <i>(ASAM Criteria)</i></p>
<p>NAC 458.262 NAC 458.301 NRS 458.025</p> <p>10 pts per record</p>	<p style="text-align: center;">Group Counseling (treatment levels only)</p> <p>Standard: If a treatment program provides counseling for groups, the operator shall ensure that any session for counseling for a group includes not more than 15 clients. Group sign-in sheets will be reviewed to ensure not more than 15 clients are in session at one time.</p>
<p>NAC 458.272, 1. H NAC 458.306 NRS 458.025, 458.055</p> <p>20 pts per record</p>	<p style="text-align: center;">Treatment Plan</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must include:</p> <ul style="list-style-type: none"> • The original treatment plan for the client and all revisions of the plan of care.
<p>NAC 458.272, 4. NAC 458.306 NRS 458.025, 458.055</p> <p>20 pts per record</p>	<p style="text-align: center;">Case Notes</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. The record must include:</p> <ul style="list-style-type: none"> • The case notes for each client accurately reflect the treatment and services needed by the client, as identified in the assessment and treatment plan.

<p>NAC 458.272, 1. n. 1-4 NAC 458.306 NRS 458.025, 458.055</p> <p>20 pts per record</p>	<p style="text-align: center;">Client Transfer</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. If the client is transferred to a different location or provided a different service, including a service provided by the same operator, the record must include:</p> <ul style="list-style-type: none"> • A copy of the case note made at the time of transfer which includes, without limitation: <ul style="list-style-type: none"> ○ Diagnosis of the client at the time of admission or intake. ○ The response of the client to treatment. ○ Diagnosis of the client at the time of transfer. ○ Recommendations for persons who will be providing treatment to the client.
<p>NAC 458.272, 1. o. 1. NAC 458.306 NRS 458.025, 458.055</p> <p>25 pts per record</p>	<p style="text-align: center;">Client Discharge</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. After the client is discharged from the treatment program, the record must include:</p> <ul style="list-style-type: none"> • Documentation that a copy of the plan for continuing care of the client, including, without limitation, any referrals given to the client, was provided to the client before discharge.
<p>NAC 458.272, 1. o. 2. NAC 458.306 NRS 458.025, 458.055</p> <p>25 pts per record</p>	<p style="text-align: center;">Client Discharge</p> <p>Standard: The operator of a treatment program shall ensure that a record is maintained for each client. After the client is discharged from the treatment program, the record must include:</p> <ul style="list-style-type: none"> • Documentation that, not more than 5 business days after the client was discharged from the treatment program, a summary was completed which meets the criteria of the Division for discharge of a client.

Drug Court Programs

Drug Court programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

<p>NAC 458.291, 1-6. NRS 458.025, 458.055</p> <p>15 per record</p>	<p style="text-align: center;">Service Delivery</p> <p>Standards: The operator of a drug court program shall maintain documentation verifying evidence of implementation of the following 6 service elements:</p> <ul style="list-style-type: none"> • A restorative justice model of treatment for criminal justice clients; • Incentives and sanctions; • Motivation enhancement approaches; • Activities that encourage behavior that is designed to benefit other persons; • Phasing of programs; and • Modeling of behavior by staff.
<p>NAC 458.306 NRS 458.025, 458.055</p> <p>5 pts per record</p>	<p style="text-align: center;">Clinical Record Content</p> <p>Standard: The operator of a drug court program shall meet the requirements of NAC 458.272; and ensure that a record is maintained for each client. The record must include:</p> <ul style="list-style-type: none"> • The information required by NAC 458.272, except that the statement from the client explaining that he or she is seeking service, unless the client is being provided a service related to civil protective custody, must be signed upon intake or enrollment in the drug court program.

Evaluation Centers

Evaluation Centers must meet all applicable standards of the Clinical Protocols section above, including the following service specific requirements.

<p>NAC 458.331, 2, NRS 458.025, 458.055, 484C.310</p> <p>5 pts per record</p>	<p style="text-align: center;">Clinical Record Content</p> <p>Standard: The operator of an evaluation center program shall ensure that a record is maintained for each client. The record must include:</p> <ul style="list-style-type: none"> • The information required by NAC 458.272, except that the statement from the client explaining that he or she is seeking service, unless the client is being provided a service related to civil protective custody, must be signed upon intake or enrollment in the evaluation center program.
<p>NAC 458.336 NRS 458.025, 484C.310</p> <p>50 pts</p>	<p style="text-align: center;">Area of Operation</p> <p>Standard: An evaluation center program must not be operated by an operator who operates or has a financial interest in a treatment program or any other organization which provides treatment for substance-related disorders in the same geographic area at which the evaluation center program will be provided if the evaluation center program is provided in a county whose population is 100,000 or more.</p>

Co-Occurring Disorder Services

The Provider scored _____ on a 5 point scale placing them in the AOS / DDC / DDE range. Refer to the Dual Diagnosis Capability in Addiction Treatment (DDCAT) report for specific detail within each of the 7 Dimensions. Co-Occurring Disorder programs must also meet all applicable standards of the Clinical / Treatment Protocols sections above.

Transitional Housing

Transitional Housing programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

<p>Division Criteria</p> <p>25 per record</p>	<p style="text-align: center;">Eligibility / Admission Criteria</p> <p>Standard: The operator of a transitional housing program shall ensure clients are receiving substance use treatment services from a Level 1 or Level 2.1 program. The client record must contain evidence of the ASAM 6 Dimensional Assessment, containing evidence that there is sufficient risk in Dimension 6: Recovery Environment.</p>
<p>Division Criteria</p> <p>25 per record</p>	<p style="text-align: center;">Continued Service Criteria</p> <p>Standard: The operator of a transitional housing program shall maintain documentation of Continued Service Criteria:</p> <ul style="list-style-type: none"> • The client remains in Level 1 or Level 2.1 services and ASAM Dimensional reviews reveal continued risk in Dimension 6: Recovery Environment. • The client does not require a higher level of care.

Division Criteria	Transfer / Discharge Criteria
25 per record	Standard: The operator of a transitional housing program shall maintain documentation of Transfer / Discharge Criteria: <ul style="list-style-type: none"> • The client needs a higher level of care per ASAM Dimensional review and is transferred. • The client has gained stable/supportive housing/recovery environment and no longer needs Transitional Housing.

Level 1-WM Ambulatory Withdrawal Management without Extended On-Site Monitoring

Withdrawal Management programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

Division Criteria/ASAM	Withdrawal Management - Record Content
No score	Standard: If the treatment program provides ambulatory detoxification services, ensure that all applicable standards of the Clinical Protocols section above are implemented.
Division Criteria/ASAM	Withdrawal Management - Required Services
15 pts per record	Standard: A treatment program that provides ambulatory detoxification services shall maintain documentation of: <ul style="list-style-type: none"> • A physical examination by a physician, physician assistant, or nurse practitioner, performed as part of the initial assessment. • Daily assessment of progress during withdrawal management and any treatment changes (or less frequent, if the severity of withdrawal is sufficiently mild or stable). • Withdrawal rating scale tables and flow sheets (which may include tabulation of vital signs) are used as needed.

Level 2-WM Ambulatory Withdrawal Management with Extended On-Site Monitoring

Withdrawal Management programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

Division Criteria/ASAM	Withdrawal Management - Record Content
No score	Standard: If the treatment program provides ambulatory detoxification services, ensure that all applicable standards of the Clinical Protocols section above are implemented.
Division Criteria/ASAM	Withdrawal Management - Required Services
15 pts per record	Standard: A treatment program that provides ambulatory detoxification services shall maintain documentation of: <ul style="list-style-type: none"> • A physical examination by a physician, physician assistant, or nurse practitioner, performed as part of the initial assessment. • Daily assessment of progress during withdrawal management and any treatment changes (or less frequent, if the severity of withdrawal is sufficiently mild or stable). • Serial medical assessments, using appropriate measures of withdrawal. • Withdrawal rating scale tables and flow sheets (which may include tabulation of vital signs) are used as needed.

Level 3.2-WM Clinically Managed Residential Withdrawal Management

Withdrawal Management programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

<p>NAC 458.246, 6. NRS 458.025</p> <p>15 pts per record</p>	<p style="text-align: center;">Withdrawal Management</p> <p>Standard: If the treatment program provides residential detoxification services, ensure that a detoxification technician or qualified practitioner monitors each client who receives residential detoxification services from the treatment program during the provision of those services. As used in this subsection, “qualified practitioner” includes, without limitation, a licensed physician, a physician assistant licensed pursuant to chapter 630 or 633 of NRS, an advanced practice registered nurse, a registered nurse and a licensed practical nurse.</p>
<p>Division Criteria</p> <p>25 per record</p>	<p style="text-align: center;">Service Delivery beyond Clinical Section</p> <p>Standard: The operator of a Level 3.2-WM Clinically Managed Residential Withdrawal Management program must maintain clinical records for each client containing the following:</p> <ul style="list-style-type: none"> • During intake, a Blood Alcohol Content (BAC) and/or urine screen will be administered. • The client’s vital signs must be monitored at least every 2 hours during the person’s waking hours by a staff member with a nursing license, physician license or be certified as a Detoxification Technician.

Level 3.7-WM Medically Monitored Inpatient Withdrawal Management (Adult)

Withdrawal Management programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

<p>NAC 458.246, 6. NRS 458.025</p> <p>15 pts per record</p>	<p style="text-align: center;">Withdrawal Management</p> <p>Standard: If the treatment program provides residential detoxification services, ensure that a detoxification technician or qualified practitioner monitors each client who receives residential detoxification services from the treatment program during the provision of those services. As used in this subsection, “qualified practitioner” includes, without limitation, a licensed physician, a physician assistant licensed pursuant to chapter 630 or 633 of NRS, an advanced practice registered nurse, a registered nurse and a licensed practical nurse.</p>
<p>Division Criteria</p> <p>25 per record</p>	<p style="text-align: center;">Service Delivery beyond Clinical Section</p> <p>Standard: The operator of a Level 3.7-WM Medically Monitored Inpatient Withdrawal Management (Adult) program must maintain clinical records for each client containing the following:</p> <ul style="list-style-type: none"> • During intake, a Blood Alcohol Content (BAC) and/or urine screen will be administered. • The client’s vital signs must be monitored at least every 2 hours during the person’s waking hours by a staff member with a nursing license, physician license or be certified as a Detoxification Technician.

Civil Protective Custody Adult (Controlled Substance)

Civil Protective Custody programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

<p>Division Criteria NRS 458.175</p> <p>5 per record</p>	<p style="text-align: center;">Certification / Licensing</p> <p>Standard: The operator of a Civil Protective Custody program must be a Provider that is SAPTA certified for residential Withdrawal Management services.</p>
<p>Division Criteria NRS 458.175</p> <p>15 per record</p>	<p style="text-align: center;">Admission</p> <p>Standard: The operator of a Civil Protective Custody program shall ensure clients were placed into the intoxication management program by a peace officer.</p>
<p>Division Criteria</p> <p>20 per record</p>	<p style="text-align: center;">Service Delivery</p> <p>Standard: The operator of a Civil Protective Custody program must maintain clinical records for each client containing the following:</p> <ul style="list-style-type: none"> • During intake, a Blood Alcohol Content (BAC) and/or urine screen will be administered. • The client's vital signs must be monitored at least every 2 hours during the person's waking hours by a staff member with a nursing license, physician license or be certified as a Detoxification Technician.
<p>Division Criteria</p> <p>20 per record</p>	<p style="text-align: center;">Service Delivery</p> <p>Standard: The operator of a Civil Protective Custody program must maintain clinical records for each client containing the following:</p> <ul style="list-style-type: none"> • Prior to discharge, a good faith effort must be made to advise the person of his/her treatment options.
<p>Division Criteria NRS 458.175</p> <p>15 per record</p>	<p style="text-align: center;">Discharge</p> <p>Standard: The operator of a Civil Protective Custody program shall ensure clients released from the intoxication management program are remanded to the custody of the apprehending a peace officer.</p>

Civil Protective Custody Adult (Alcohol)

Civil Protective Custody programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

<p>Division Criteria NRS 458.270</p> <p>5 per record</p>	<p style="text-align: center;">Certification / Licensing</p> <p>Standard: The operator of a Civil Protective Custody program must be a Provider that is SAPTA certified for residential Withdrawal Management services.</p>
<p>Division Criteria NRS 458.270</p> <p>15 per record</p>	<p style="text-align: center;">Admission</p> <p>Standard: The operator of a Civil Protective Custody program shall ensure clients were placed into the intoxication management program by a peace officer.</p>

Division Criteria 20 per record	Service Delivery Standard: The operator of a Civil Protective Custody program must maintain clinical records for each client containing the following: <ul style="list-style-type: none"> • During intake, a Blood Alcohol Content (BAC) and/or urine screen will be administered. • At the earliest practical time the person's family or next of kin must be advised they are in CPC if they can be located. • The client's vital signs must be monitored at least every 2 hours during the person's waking hours by a staff member with a nursing license, physician license or be certified as a Detoxification Technician.
Division Criteria 20 per record	Service Delivery Standard: The operator of a Civil Protective Custody program must maintain clinical records for each client containing the following: <ul style="list-style-type: none"> • Prior to discharge, a good faith effort must be made to advise the person of his/her treatment options.
Division Criteria NRS 458.270 15 per record	Discharge Standard: The operator of a Civil Protective Custody program shall ensure clients <i>taken into custody for a public offense</i> , that are released from the intoxication management program are remanded to the custody of the apprehending a peace officer.
Division Criteria NRS 458.270 15 per record	Discharge Standard: The operator of a Civil Protective Custody program shall ensure clients are not required against his or her will to remain in the licensed facility longer than 48 hours.

Level 3.5 Clinically Managed Medium-Intensity Residential (Adolescent)
Level 3.5 Clinically Managed High-Intensity Residential (Adult)

Residential programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

Division Criteria 25 per record	Service Delivery Standard: The operator of a Level 3.5 residential program shall ensure clients receive no less than 25 hours per week of counseling interventions are documented. A minimum of 7 hours per day of structured activities must be provided on each billable day. A minimum of 10 hours of clinical counseling services must be provided in each week. Types of therapies are noted within ASAM Level 3.5 services.
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Level 3.7 Medically Monitored Intensive Inpatient (Adult)

Residential programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

Division Criteria/ASAM No score	Level 3.7 Residential requirement Standard: If the treatment program provides Level 3.7 services, ensure that all applicable standards of the Clinical Protocols section above are implemented.
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Opioid Treatment Program (Adult)
Opioid Treatment Program (Adolescent)

Opioid Treatment programs must meet all applicable standards of the Clinical / Treatment Protocols sections above, including the following service specific requirements.

NAC 458.257 NRS 439.200, 458.025 10 pts	Opioid Treatment Program Standards: A treatment program which provides opioid maintenance therapy services must be certified to provide services for outpatients and ambulatory detoxification services. The facility at which the treatment program provides opioid treatment services must be licensed by the Division (HCQC) as a facility for treatment with narcotics pursuant to NAC 449.154 to 449.15485, inclusive.
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