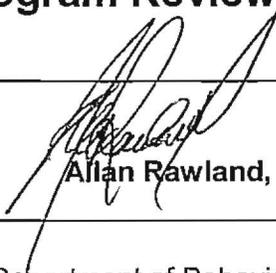


**County of San Bernardino
Department of Behavioral Health**

Alcohol and Drug Services Program Review Procedure

Effective Date 5/8/07
Approval Date 5/8/07


Allan Rawland, Director

Purpose To provide guidelines for Department of Behavioral Health (DBH) - Alcohol and Drug Services (ADS) staff in conducting formal program reviews and evaluations.

Procedure To ensure that all contracted, certified, and county programs are meeting Federal, State and County standards and requirements as indicated in the [Alcohol and Drug Services Program Review Policy](#) the steps below are followed:

Step	Action
1	<p>ADS sends notification letter to the agency 7-10 days prior to scheduled review date.</p> <p>The letter will include:</p> <ul style="list-style-type: none"> • Modality that will be reviewed • Name of ADS staff member conducting the review • List of items that will be requested during the review <p>Note: Copies of the notification letter will be maintained in the DBH-ADS permanent file and in the ADS staff member's agency file (See Attachment B, File Guide).</p>
2	<p>ADS staff member conducting the formal review will:</p> <ol style="list-style-type: none"> 1. Conduct an entrance interview with the agency staff explaining review process, including what ADS will be reviewing 2. Evaluate agency according to contract, utilizing the Alcohol and Drug Services Agency Evaluation form 3. Conduct an exit interview with agency staff to review findings, explain ADS timeframes, and Corrective Action Plan (CAP) procedures. <p>Note: The signature of each person attending the entrance and exit interviews is required on the back of the Alcohol and Drug Services Agency Evaluation form.</p>

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3	<p>ADS staff will create a written Agency Review Report of review findings and send to agency within <u>thirty (30) days</u> of review.</p> <p>The report should indicate the fiscal year and if it was:</p> <ul style="list-style-type: none"> • A required annual formal review • A required bi-annual formal review • A quarterly follow-up – direct service observation or technical assistance session
4	<p>ADS staff member that conducted review must sign, and date the Agency Review Report and ensure that the Deputy Director of DBH-ADS reviews, signs, and dates it as well.</p>

Copies of Formal Review Documentation

The Agency Review Report is distributed as follows:

- A copy is stored in DBH-ADS permanent files
- A copy is stored in ADS staff member's agency file
- Original is sent to the agency

The Alcohol and Drug Services Agency Evaluation form is distributed as follows:

- Copy is stored in ADS staff member's agency file

Content of Corrective Action Plan (CAP)

If deficiencies are identified in the Agency Review Report, the agency is required to submit a Corrective Action Plan (CAP) to DBH-ADS outlining:

- Steps the agency will take to correct deficiencies
- Policies, procedures, and/or actions the agency will implement to ensure ongoing compliance

Corrective Action Plan (CAP) Due Dates and Extensions

The CAP is due to ADS within **thirty (30) days** of delivery of Agency Review Report to the agency. ADS allows for a **thirty (30) day** due date extension for the CAP, but the request must be submitted in writing and approved by ADS staff. If ADS does not receive an extension request or a CAP from the agency within **forty five (45) days** of Agency Review Report delivery, ADS will call the agency and request CAP.

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**Corrective Action
Plan Approval/
Denial**

Within **fifteen (15) days** of receipt of CAP, ADS will review the CAP and send the agency a Corrective Action Plan Response (CAPR) in writing, approving or denying the CAP.

The following occurs depending on ADS' response:

If...	Then...
CAP is approved	<ol style="list-style-type: none"> 1. Agency is notified of approval 2. A follow-up or quarterly evaluation of program performance is scheduled
CAP is denied	<ol style="list-style-type: none"> 1. Agency sends a modified or amended CAP within fifteen (15) days. 2. Within fifteen (15) days of receipt of modified CAP, ADS sends CAPR to the agency. 3. If the 2nd CAP is denied, the agency must send a 3rd modified CAP within ten (10) days of notification of denial. <p>Note: If the 3rd CAP is denied, ADS staff notifies Management to intervene and take appropriate action (See Attachment A, Agency Review CAP Process).</p>

**Corrective Action
Plan Follow-
up/Quarterly
Evaluation**

After a CAP is approved, the agency is notified and an ADS staff member schedules a follow-up or quarterly evaluation of program performance.

The following steps are taken once the follow-up or quarterly evaluation of the CAP is scheduled:

Step	Action
1	ADS staff will send notification to agency 7-10 days prior to the Evaluation
2	A follow-up or evaluation is conducted on the scheduled date in which status of deficiencies, policies, procedures and corrective changes are analyzed

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3	A written report providing the evaluation findings will be sent to the agency within <u>thirty (30) days</u> follow-up or evaluation
4	If deficiencies are identified a second time the agency submits a 2 nd CAP.
5	If the 2 nd CAP is denied, the agency must send a 3 rd CAP within <u>ten (10) days</u> of receipt of notification of denial and the process repeats. Note: If a 3 rd CAP is denied, ADS staff notifies Management to intervene and take appropriate actions (See Attachment A, Agency Review CAP Process).

Notice: Effective Fiscal Year 2007-2008, ADS staff conducting program reviews are required to complete quarterly reviews summarizing overall performance of each agency. Summaries are due to the ADS Supervisor **thirty (30) days** after the last day of each quarter.

The summary report includes:

- Measurement of effectiveness and efficiency of implemented corrective action
 - Indication of participation in technical assistance and trainings
 - Agency improvements and suggested improvements
 - Additional concerns
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Agency Review CAP Process

Purpose Outline the steps to the Corrective Action Process according to responsibilities and actions of DBH-ADS and contract/County agencies.

Typical Corrective Action Plan Procedure: Scenario 1			
Steps	Actions		Timeline
	If ...	then ...	
1	DBH-ADS Staff identify deficiencies in review report...	Agency provides DBH-ADS with a Corrective Action Plan (CAP).	30 days
2	Contract/county agency provides a Corrective Action Plan (CAP) to DBH-ADS reviews and approves CAP...	DBH-ADS sends a Corrective Action Plan Response (CAPR) to the agency, approving the plan.	15 days

Typical Corrective Action Plan Procedure: Scenario 2			
Steps	Actions		Timeline
	If ...	then ...	
1	DBH-ADS Staff identify deficiencies in review report...	Agency provides DBH-ADS with a Corrective Action Plan (CAP).	30 days
2	Contract/county agency provides a Corrective Action Plan (CAP), DBH-ADS reviews and rejects CAP...	DBH-ADS sends a Corrective Action Plan Response (CAPR) to the agency, rejecting the plan.	15 days
3	CAPR rejecting plan is sent to agency...	Agency must provide 2 nd CAP to DBH-ADS	15 days
4	DBH-ADS receives, reviews and accepts 2 nd CAP...	DBH-ADS sends CAPR to agency, accepting the plan.	15 days

Attachment A

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Typical Corrective Action Plan Procedure: Scenario 3			
Steps	Actions		Timeline
	If ...	Then ...	
1	DBH-ADS Staff identify deficiencies in review report...	Agency provides DBH-ADS with a Corrective Action Plan (CAP).	30 days
2	Contract/county agency provides a Corrective Action Plan (CAP), DBH-ADS reviews and rejects CAP...	DBH-ADS sends a Corrective Action Plan Response (CAPR) to the agency, rejecting the plan.	15 days
3	CAPR rejecting plan is sent to agency...	Agency must provide 2 nd CAP to DBH-ADS	15 days
4	DBH-ADS receives, reviews and rejects 2 nd CAP...	DBH-ADS sends 2 nd CAPR to agency, rejecting the plan.	15 days
5	2 nd CAPR rejecting the CAP is sent to the agency	Agency must provide 3 rd CAP to DBH-ADS	10 days
6	3 rd CAP is received, reviewed, approved by DBH-ADS staff...	DBH-ADS sends CAPR to agency accepting the CAP	10 days
7	3 rd CAP is received, reviewed, and rejected by DBH-ADS staff	Management Team is informed and will intervene	Immediate action required

Attachment A