



## Credentialing Procedures for Recovery Support Organizations

Access to Recovery II (ATR) is the second three-year grant awarded to Missouri by the Substance Abuse and Mental Health Services Administration (SAMHSA). The ATR II Grant was awarded in September 2007 and funding will be administered by the Missouri Department of Mental Health's (DMH) Division of Alcohol and Drug Abuse (ADA). All substance abuse assessment, clinical treatment, and recovery support services under this program are to be provided pursuant to a voucher or vouchers given to a client by the State or its designee. Eligible service providers for the voucher program may include public and private, nonprofit, proprietary, faith-based and community-based organizations, as approved by the State.

### Program Overview

Research has established that there are many paths to recovery from substance abuse or addiction. Some people are able to resolve their problems without outside intervention. Others recover with the support of self-help groups such as Alcoholics Anonymous, the faith community, or other community organizations. Some require clinical treatment interventions along with recovery support services.

ATR has three broad goals:

- To engage faith-based and nontraditional community providers in providing a broader spectrum of treatment services and recovery supports.
- To ensure genuine, free, and independent client choice for substance abuse clinical treatment and recovery support services.
- To improve access and increase capacity for substance abuse treatment and recovery support services.

In order to meet these goals, the Division of Alcohol and Drug Abuse will expand and enhance its existing substance abuse service delivery system by recruiting, training, and enrolling faith-based and nontraditional service providers on a statewide basis to provide an array of recovery support services. The ATR voucher program is a collaborative effort between the recovery support service providers and the clinical treatment providers.

Recovery supports are often provided by paid staff or volunteers familiar with how their communities can support people seeking lives free of alcohol and other drugs.

Important things to know about participant rules for Access to Recovery:

- The ATR project is for adults only, ages 18 years and older, unless otherwise noted.
- The federal funding for this grant is allocated to the state on a year-to-year basis. Funding cannot be guaranteed beyond the term of the grant, which is September 30, 2010.
- Faith-based and other community-based organizations that receive federal funds through this grant are subject to basic audit and reporting requirements of the grant. The audit and reporting requirements will normally be limited to the organization that specifically made the application for

credentialed status. Example: A church that has a separate subsidiary 501 (c) (3) organization that applies for and is awarded ATR II grant funds will have to subject that separate organization to audit and reporting requirements; however, the church itself will not normally have to undergo the audit or reporting requirements so long as it does not receive any of the grant funds. These reviews are done to ensure that the award recipient organization follows sound general accounting practices and that the ATR II federal dollars have been spent properly on legitimate costs. It is important to keep accurate records of all transactions conducted with the federal grant funds.

- Organizations credentialed by Committed Caring Faith Communities (CCFC) will be offered a contractual service agreement for the provision of ATR voucher funded recovery support services. This contract must be signed and returned along with other required forms prior to providing ATR voucher funded services.
- Organizations will be required to attend DMH training prior to providing ATR voucher funded services.

## ATR Services and Qualified Providers

Clinical substance abuse treatment is an array of professional services provided by organizations that meet state certification and/or national quality standards. Recovery support services are a complementary array of activities, resources, and services designed to assist an individual's integration into the community, participation in treatment, improved functioning, and recovery. These services are delivered by trained clergy, ministers, mentors, and lay people who likely do not possess a professional credential but have experience in addiction recovery. Recovery supports provided by community- and faith-based organizations introduce a person to recovery and offer long term connectedness. A wide variety of services are offered such as work preparation, spiritual life skills, transportation, recovery support groups, emergency and extended housing, child care, and pastoral counseling, all of which greatly improve client outcomes. All recovery support providers must be credentialed by DMH and CCFC.

### **Clinical Treatment Services**

- Clinical treatment services must be provided by agencies that are certified by the Department of Mental Health in accordance with requirements under 9 CSR 30-3.100 through 9 CSR 30-3.199.
- Faith-based or non-traditional organizations desiring to provide clinical substance abuse treatment must be certified by the Missouri Department of Mental Health in accordance with requirements under 9 CSR 30-3.100 through 9 CSR 30-3.199. *Attaining "certified" status does not guarantee receiving a contract to provide ATR clinical treatment services.*

### **Recovery Support Services**

- Programs currently certified by the Division of Alcohol and Drug Abuse to provide clinical substance abuse treatment services are not eligible to provide recovery supports as defined in this document. Exception will be granted for any ATR recovery support provider credentialed and contracted during the ATR I grant funding period.
- Organizations desiring to provide recovery support services through ATR must be credentialed by the Department of Mental Health, Division of Alcohol and Drug Abuse and Committed Caring Faith Communities (CCFC), an independent statewide 501(c)(3) interfaith corporation. The credential will remain in effect for three years, pending passage of an annual review. See Attachment (A) Credentialed Status application.

# Requirements for Credentialed Status

## Program Administration and Organization

This section describes the administrative and organizational requirements that faith-based and community based service providers must have in place in order to participate in the ATR program.

1. Produce proof of and maintain documentation of good standing under the requirements of the Office of Secretary of State of Missouri.
2. Each organization is required to maintain a working phone and email account. Changes to phone number and or email address must be reported to DMH within three (3) business days.
3. Credentialed key staff or volunteers shall provide supervision of the recovery support services for which the organization is credentialed.
4. Programs that provide emergency/temporary housing or extended residential support must have a plan of action for continuity of services in the event the organization can no longer perform services due to facility incapacitation or loss of key personnel.
5. The organization shall not subcontract services it is credentialed to provide under the ATR program unless a previous agreement has been arranged with the Division of Alcohol and Drug Abuse.
6. Organizations must indicate if they are a "faith based" or a "community based" organization.

## Personnel

1. The organization shall maintain complete, confidential, and current personnel records for each staff or volunteer assigned to the ATR program.
2. The organization shall ensure that staff possesses the training, experience, and credentials to effectively perform their assigned services and duties related to the ATR program. Key personnel and volunteers assigned to supervise the organization's ATR program must successfully complete the Addictions Academy, a 32-hour substance abuse course designed for clergy, lay leaders, congregation members, and other community volunteers. At least two key personnel have attended the Addictions Academy.
3. Organizations that choose to utilize the Department of Mental Health's electronic invoicing system must receive appropriate training on use of the system.
4. The organization shall conduct an orientation for all staff and/or volunteers. Orientation must include, but is not limited to, components of the ATR program and policies and procedures of the organization. Documentation of orientation must be maintained in the employee personnel file.
5. Each staff member or volunteer shall participate in at least 3 hours of relevant continuing education per year with appropriate documentation in the employee personnel file.
6. The organization shall ensure that each employee or volunteer is legally eligible to work and reside in the United States. Proof of legal eligibility to work in the USA is documented by a photocopy in the employee personnel file of; valid state driver's license, social security card, or approved work Visa (green card).

7. The organization shall conduct a complete caregiver background check for all staff and volunteers who have contact with ATR clients. It is recommended service providers secure background screening information by utilizing the "Family Care Safety Registry" maintained by the Missouri Department of Health and Senior Services. More information and forms are available at: <http://www.dhss.mo.gov/FCSR/>

See Attachment (B) for complete rules regarding background screening for employees and volunteers.

## Ethics

A Code of Ethics for Recovery Support Providers has been developed. See attachment (C)

## Physical Plant and Safety

1. All individuals shall be served in a safe facility.
2. The organization shall maintain documentation of all inspections and correction of all cited deficiencies to assure compliance with applicable state and local fire safety and health requirements.
3. A currently credentialed organization that relocates any program into a new physical facility shall ensure that the new facility complies with these requirements in order to maintain credentialed status. Any additions or expansions to existing physical facilities must also meet these requirements. Relocation or additions to existing facilities must be approved by the credentialing body (CCFC or the Division of ADA) prior to the delivery of ATR services.
4. The organization shall provide proof of occupancy and zoning permits in cities, counties, and towns where this is required.
5. DMH and/or CCFC personnel will inspect recovery support organization programs and facilities as needed to comply with state and federal rules, laws and program guidelines
6. Organizations that provide transportation for clients must present proof of a chauffeur's or CDL license (more than 15 passengers) and shall maintain auto insurance coverage, in adequate form and amount, throughout the time period they are providing ATR services. It is recommended as a best practice that the organization secure and maintain adequate insurance to protect against other liabilities as deemed necessary based on the services being provided.

For complete rules regarding physical plant and safety, see attachment (D)  
See attachment (E) for Fire Safety Rules.

## Dietary Service

1. Agencies that provide housing must have a meal plan that demonstrates how clients will be fed during their stay.
2. Potential clients must be aware of a housing provider's policy for client meals prior to voucher creation.
3. Consumers cannot be forced to turn over food stamps, but may voluntarily use their food stamps to purchase food for the program.

4. Food will be served at realistic meal times in a pleasant, relaxed dining area.
5. Food will be stored in a safe and sanitary manner.
6. Food shall be free from spoilage, filth, or other contamination and safe for human consumption.
7. All appliances shall be in safe and proper operating condition.
8. Food preparation areas will be cleaned regularly and in good working order.
9. Utensils shall be sanitized.
10. Hand washing facilities that include hot and cold water, soap and a means of hand drying shall be readily available

## Fiscal Accountability

1. The organization shall operate according to an annual written budget of anticipated revenues and expenditures that is approved in a timely manner by the governing body. Fiscal reports should be prepared at least annually and shared with the governing body and show a comparison of the budget to actual expenditures. The organization should expect their budget to be reviewed annually by DMH or CCFC personnel.
2. Programs must indicate if they meet ATR grant classification as a “grassroots organization” (annual budget of less than \$500,000 per year) or if they are classified as “corporate” (annual budget of over \$500,000 per year).
3. The organization shall have fiscal management policies, procedures, and practices consistent with generally accepted accounting principles and, as applicable, state and federal law, regulation, or funding requirements.
4. The organization shall utilize financial activity measures to monitor and ensure its ability to pay current liabilities and to maintain adequate cash flow.
5. Fiscal records shall be retained for at least five years or until any litigation or adverse audit findings, or both, are resolved.

## Documentation

1. The organization shall have an organized record system for each client that receives recovery support services.
2. Client records shall be maintained in a manner which ensures confidentiality and security. The organization shall abide by all local, state, and federal laws and regulations concerning the confidentiality of records.
3. If records are maintained on computer systems, there must be a backup system to safeguard records in the event of operator or equipment failure and to ensure security from inadvertent or unauthorized access.
4. The organization shall retain individual records for at least five (5) years or until all litigation, adverse audit findings, or both, are resolved.

5. The organization shall assure ready access to all records, including computerized records, by authorized staff and other authorized parties including Department of Mental Health staff.
6. All entries in the individual record shall be legible, clear, complete, accurate, and recorded in a timely fashion. Any errors shall be marked through with a single line, initialed and dated. Documentation shall be made with indelible ink or print.
7. Organizations providing voucher funded recovery support services shall document services in accordance with the Missouri ATR Recovery Support Services Documentation Manual. See attachment (F)

## Data Collection and Reporting

1. All faith-based and community-based organizations that participate in the ATR program must comply with reporting requirements of the grant.
2. Although this option is not expected to be available until July 1, 2008, organizations that choose to use the DMH Customer Information, Management and Outcomes Reporting system (CIMOR) for invoicing must participate in DMH approved training and meet minimum work station certification requirements.

### **DMH Contract Provider Technical Requirements**

#### **Hardware, Software & Connection Certification**

The Office of Administration, Information Technology Services Division (ITSD) requires that all workstations connected to DMH be certified. This certification is necessary to assure that your computer and network connection will be able to access DMH systems and operate properly with minimal technical difficulty or risk. The certification takes place over the network and electronically verifies that the minimum hardware, software and connection requirements described in this document are met.

#### **How Do I Certify My System?**

Certification can be accomplished by clicking the certification link on the Internet Portal Website <https://portal.dmh.missouri.gov> or by contacting the DMH Customer Support Center at (573) 526-5888 or (888) 601-4779.

If minimum requirements are not met, the workstation will not be certified and may be unable to access DMH systems. New or current workstations can be certified anytime. Your agency is responsible for meeting these minimum requirements.

#### **Minimum Workstation Requirements for Certification**

Listed below are the current minimum workstation requirements. It is recommended that you check this site periodically to determine if any updates or changes have been made.

Computer/Processor <b>Minimum System Requirements</b>	Computer with Pentium 450 megahertz (MHz) or higher processor; 1 GHz or higher recommended 256 MB of RAM; 512 MB or higher recommended
Internet Browser Memory Operating System	Internet Explorer 6.0 (with current updates/service packs & ability to handle 128-bit SSL). Microsoft Windows XP Professional version (with current service packs) *
Display/Monitor Peripherals Printer (required to print reports)	Super VGA with at least 800 x 600 or higher-resolution monitor with 65,536 (16 bit) colors. (1024x768 with 32-bit color highly recommended)

Software E-mail Address Internet Accessible	Macromedia Flash Player and Adobe Acrobat Reader 7.07 or greater may be required to view certain files or reports. Both programs can be downloaded free of charge. Download Macromedia Flash Player Download Adobe Acrobat Reader (Adobe Reader 7.x.x <a href="http://www.adobe.com/products/acrobat/readstep2.html">http://www.adobe.com/products/acrobat/readstep2.html</a> ) e-mail address
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At the present time, the Virtual Private Network (VPN) used by DMH is not compatible with Microsoft Vista. Although preliminary tests with Vista indicate compatibility with the Department's current systems, DMH is unable to provide support and, therefore, it will cause a failure with the current certification process.

## Client Rights, Responsibilities, and Grievances

1. The organization shall demonstrate through its policies, procedures, and practices an ongoing commitment to the rights, dignity, and respect of the people it serves.
2. Each client shall be informed and oriented as to what will happen as recovery support services are provided. Information shall include applicable program rules, participation requirements or other expectations.
3. The organization shall have in place an internal procedure for handling client complaints and grievances in an expedient manner.
4. DMH Client Rights must be posted in each facility and housing unit. See attachment (G)

## Report of Complaints of Abuse, Neglect, and Misuse of Funds/Property

1. Any employee or volunteer who has reasonable cause to believe that a client has been subjected to physical abuse, sexual abuse, misuse of funds/property, class I neglect, class II neglect, or verbal abuse while under the care of a recovery support program shall immediately make a verbal or written report. For complete requirements, see attachment (H)

## Client Confidentiality/HIPAA

1. All faith-based and community-based organizations that handle or maintain confidential alcohol or drug abuse treatment client information shall follow the Federal Confidentiality Regulations (42 CFR Part 2) related to the release of alcohol and drug abuse records.
2. All organizations that have been determined to be a covered entity as defined by HIPAA shall adhere to the policies and procedures that the HIPAA privacy rule requires for each covered entity. For complete requirements, see attachment (I)

## **RECOVERY SUPPORT SERVICES – ACCESS TO RECOVERY II**

Vouchers for recovery support services may be issued to clients following assessment and enrollment into a PR+ or Women and Children's CSTAR level of care. Reentry Coordination vouchers may also be issued by designated Department of Corrections Transitional Housing Units.

**Recovery Support Limit** – Authorization per client: **\$500** per treatment episode

**Extended Residential Support:** **\$400** per client, per treatment episode.

Recovery support vouchers will be generated by the clinical treatment agency, based upon the client's informed choice of provider. In the event the client will be receiving services from multiple providers of recovery supports, separate vouchers will be issued for each service. The amount of service the client is authorized to receive will be identified on the recovery support voucher.

*The voucher represents a commitment on the part of the State of Missouri, Division of Alcohol and Drug Abuse, to pay for services while funding is available and the client remains eligible. If at any point in the fiscal year funds are exhausted, all subsidies end for that year without regard to the existence of vouchers that have not expired.*

See Recovery Support Service descriptions and prices, attachment (J)

## **Terms and Definitions**

Unless the context clearly indicates otherwise, the following terms used in reference to the Access to Recovery project shall mean:

1. **ADA** – Missouri Division of Alcohol and Drug Abuse
2. **Assessment** – systematically collecting information regarding the individual's current situation, symptoms, status and background, and developing a treatment plan that identifies appropriate service delivery.
3. **ATR** – Access to Recovery
4. **CAGE-AID Screening** – four-question screening instrument that has been designed to identify individuals who have or are at risk for developing alcohol- or drug-related problems and need assessment to diagnose their substance use disorders and develop plans to treat them.
5. **CCFC** – Committed Caring Faith Communities
6. **Charitable Choice** – the general term for several laws that were enacted during the period 1996-2000. These laws are designed to give people in need choices among charities offering them services. It applies to projects funded by four Federal agencies including the Substance Abuse and Mental Health Services Administration which funds ATR. These laws clarify the rights and responsibilities of faith-based organizations that receive Federal funds.

7. **CIMOR** – Customer Information Management, Outcomes, and Reporting system. The Department of Mental Health comprehensive web based data management system.
8. **Clinical Treatment** – clinical substance abuse treatment is an array of professional services provided by organizations that meet state and national quality standards.
9. **Community-based organization** – an agency or organization that is incorporated and in good standing under the requirements of the Office of Secretary of State of Missouri and is providing services that are part of the ATR program.
10. **DMH** – Missouri Department of Mental Health
11. **Faith-based organization** – entity having a distinct legal existence that is organized and operated exclusively for religious or other charitable purposes.
12. **FBCP** – Office of Faith-Based and Community Partnerships.
13. **GPRA** – Government Performance and Results Act; within ATR refers to the required outcomes measurement instrument.
14. **Grassroots** – an organization with annual budget of less than \$500,000.
15. **Corporate** – an organization with an annual budget over \$500,000.
16. **Individual client choice** – for purposes of the ATR grant program, individual choice is defined as a client being able to select from at least two agencies qualified to provide the necessary services, with at least one to which the client has no religious objection.
17. **Qualified Substance Abuse Professional (QSAP)** – a person who demonstrates substantial knowledge and skill regarding substance abuse by being one (1) of the following- 1) A physician or qualified mental health professional who is licensed in Missouri with at least one (1) year of full time experience in the treatment of persons with substance use disorders; 2) A person who is certified or registered as a substance abuse professional by the Missouri Substance Abuse Counselors Certification Board, Inc.; 3) An individual who is within one (1) year of meeting one of the above criteria and has a department approved written training plan
18. **Recovery supports** – Recovery support services are an array of activities, resources, and services designed to assist an individual's integration into the community, participation in treatment, improved functioning, and recovery. These services are delivered by trained ministers, mentors, and lay people who likely do not possess a professional credential but have a strong personal interest in addiction recovery. Recovery supports provided by community- and faith-based organizations introduce a person to recovery and offer long term social connectedness. A wide variety of services are offered such as work preparation, spiritual life skills, transportation, recovery support groups, emergency and extended housing, child care, and pastoral counseling, all of which greatly improve client outcomes. All recovery support providers must be credentialed by the state.
19. **Voucher** – provided to eligible clients to pay for assessment and other clinical treatment and recovery support services from a broad network of eligible providers. Vouchers can be time-limited and are issued based on availability of ATR grant funds.