

Department of Alcohol and  
Drug Addiction Services  
Two Nationwide Plaza  
280 N. High Street, 12th Floor  
Columbus, Ohio 43215-2537



George V. Voinovich, Governor  
Luceille Fleming, Director

November 18, 1997

Tri-State Rehabilitation  
and Counseling Program, Inc.  
Attn: Executive Director  
6074 Branch Hill-Guinea Pike  
Milford, Ohio 45150

Dear Director:

Enclosed is your certificate to operate an alcohol and drug  
addiction outpatient treatment program at the above address.

Also enclosed is a copy of the program certification inspection  
report.

If you close the program at this site or move it to another site,  
the certificate is void and is to be returned to the Department.

If you have any questions concerning the enclosures, please call us  
at 614/644-8318.

Sincerely,

Roger Kenton, Chief  
Division of Quality Improvement

Enc. a/s

Copies to:

Executive Director  
Clermont County ADAMHS Board  
The James Wasserman Building  
1088 Wasserman Way - Suite B  
Batavia, Ohio 45103

Walter Hull, Chief  
Div. of MIS, ODADAS

RK:fp

# Ohio Department of Alcohol and Drug Addiction Services

George V. Voinovich  
Governor



Luceille Fleming  
Director

## CERTIFICATE TO OPERATE AN ALCOHOL AND DRUG ADDICTION OUTPATIENT TREATMENT PROGRAM

is issued to:

**Owner/Operator:**

Name: Tri-State Rehabilitation and Counseling Program, Inc.

Street Address: 6074 Branch Hill-Guinea Pike

City: Milford

State: OH Zip Code: 45150

County: Clermont

**Program Site:**

Name: Kids Helping Kids

Street Address: 6074 Branch Hill-Guinea Pike

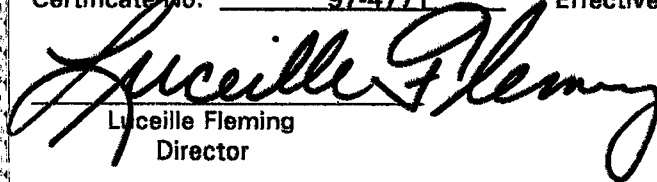
City: Milford

State: OH Zip Code: 45150

County: Clermont

in accordance with section 3793.06 of the Ohio Revised Code and Chapters 3793:2-1-01 through 17, and 3793:2-2-01 of the Ohio Administrative Code. This certificate is not assignable or transferable to any operator or program site other than those listed hereon.

Certificate No. 97-477T Effective Date: 02/01/98 Expiration Date: 01/31/00

  
Luceille Fleming  
Director

  
Roger Kenton, Chief,  
Division of Quality Improvement



**OHIO DEPARTMENT OF ALCOHOL AND DRUG ADDICTION SERVICES  
DIVISION OF QUALITY IMPROVEMENT**

**PROGRAM CERTIFICATION INSPECTION REPORT**

**PROGRAM OWNER:** Tri-State Drug Rehabilitation and Counseling Program Inc.  
6070 Branch Hill-Guinea Pike  
Milford, Ohio 45150

**PROGRAM SITE:** SEQ: 03234  
Kids Helping Kids  
6070 Branch Hill-Guinea Pike  
Milford, Ohio 45150

**TYPE OF PROGRAM:** Outpatient

**Date of Survey:** October 7 and November 5, 1997  
**Name of Surveyor:** Janice C. Jones

**SCOPE AND PURPOSE OF REVIEW**

The purpose of this review was to compare the program's documentation and practices for compliance with the Ohio Department of Alcohol and Drug Addiction Services' (ODADAS) Standards for treatment program certification. The Standards are identified as follows: Rules 3793:2-1-01 through 3793:2-1-17 and Rules 3793:2-2-01 of the Ohio Administrative Code.

Tri-State Drug Rehabilitation and Counseling Program Inc. is a Kentucky, non-profit, corporation licensed to do business in Ohio.

On August 19, 1997, Kids Helping Kids submitted an "Application for Treatment Program Certification". The application was reviewed, determined to be complete, and a certification site visit was scheduled for October 7, 1997. The surveyor was unable to complete the survey on that date and scheduled to return to the agency on November 5, 1997.

The primary participants in the process were Penny Walker, Executive Director, and Michele Walton, Program Director.

**Fiscal Policies and/or procedures:**

The program has policies and/or procedures that include:

- A chart of Accounts.
- Procedures for preparing an annual revenue and expenditure operating budget for the program.
- A financial records disclosure policy.
- Policy that states the accounting method (accrual) used by the program.
- Policy requiring a monthly financial statement of the program that shows monthly expenditures and revenues received.
- Accounting procedures for receipts and disbursements.
- Billing procedures.

**Personnel Policies and Procedures:**

The program maintains written personnel policies and procedures that comply with relevant federal, state and local statutes. Personnel policies and/or procedures include:

- Provisions for providing cultural sensitivity training to staff.
- Employment recruitment and selection process.
- Provisions for promotion, discipline and termination of employment.
- Annual performance evaluation of each employee.
- Employee grievance procedure.
- Staff development, sick leave and vacation.
- Procedures for paying employees for time worked, and for overtime.
- Retirement plans and/or annuities.

The program has a policy ensuring that a copy of the program's personnel policies and procedures is available to each employee, and a procedure for notifying employees of changes in personnel policies and procedures.

The program has a policy and procedure for permitting each employee the right to review his/her own personnel file.

include an examination of service usage patterns and trends.

The program maintains monthly documentation of Utilization review, Peer review and Completeness-of-records reviews.

### **CLINICAL MANAGEMENT**

The program has written policies and procedures that include:

- Admission criteria
- Procedures to follow when an individual has been determined to be inappropriate for admission to the program.
- Procedures for making referrals to other organizations.
- Procedures for terminating client services, and for terminating services against the advice of the program.
- Releasing of client information to other organizations.

The program has an affiliation agreement with Bethesda Hospital for the provision of emergency medical services.

The program has a policy/procedure for client education on HIV infection, AIDS related complex and AIDS.

The program does not have a policy for providing communications assistance to clients, family members/significant others, at no additional cost, who speak a language other than English, or who have a communications disorder such as deafness or hearing impairment.

The program has a policy that states that individuals credentialed by professional regulatory boards in Ohio shall not practice outside of their scope of practice as defined by their regulatory board(s).

### **CLIENT RECORDS**

The program has written policies and/or procedures for maintaining a uniform client records system that includes ● Confidentiality of client records ● Releasing client information ● A system for locating client records removed from the central filing area ● Access to client records by staff, clients and others ● Storage and destruction of client records ● Components of client records.

Client records are maintained in a secure room in locked filing cabinets as required by 42 CFR Part 2, Confidentiality of Alcohol and Drug Abuse Patient Records.

for the service component.

**DEFICIENCIES:**

1. The program's written policies, code of regulations and/or by-laws stating the responsibilities of the governing authority do not include (a) ensuring that the hours of operation for alcohol and drug addiction services provided by the program accommodate the needs of persons served, or (b) ensuring that all alcohol and drug addiction services provided and employment practices are in accordance with non-discrimination provisions of all applicable federal and state laws and regulations, as required by OAC 3793:2-1-02 (I)(9)(10).

**Corrective Action:** The Executive Director said that the policy will be revised to meet the requirements of the Standards.

2. All personnel are not qualified by education, experience and/or credentials to function in their assigned tasks as defined in their job descriptions, as required by OAC 3793:2-1-03 (N)(4).

**Corrective Action:** The Executive Director said that all personnel will obtain the required credentials to function in their assigned tasks as defined in their job descriptions.

3. All service providers of Individual and Group Counseling were not qualified by credentials and/or licensed to provide this service, as required by OAC 3793:2-1-11 (H).

**Corrective Action:** The Executive Director said that all of the service providers will obtain the proper credentials and/or licenses to provide this service. **Resolution:** On 11/12/97, the Executive Director faxed confirmation of the service providers' credentials. One service provider has no documentation of credentials. Documentation to be provided to ODADAS.

4. The program does not have a written policy and/or procedure for providing communication assistance to clients, their family members and/or significant others, at no additional cost to the person served, who speak a language other than Standard English as a primary means of communication, or who have a communication disorder such as deafness or hearing impairment, as required by OAC 3793:2-1-05 (D)(15).

**Corrective Action:** The Executive Director said that a policy will be written to meet the requirements of the Standards.

5. Assessments did not include a recommended course of treatment, as required by OAC 3793:2-1-08 (L)(14)

**Resolution:** The Executive Director said that the assessment currently being used has