

IOWA DEPARTMENT OF PUBLIC HEALTH
 Division of Behavioral Health
 OPIOID TREATMENT INSPECTION WEIGHTING REPORT

PROGRAM NAME: _____

In order for a program to receive a three (3) year license, the program must at least receive a 95% rating in each of the categories. For a two (2) year license, the program must at least receive a 90% rating in each of the categories. For a one (1) year license, the program must have at least receive a 70% rating. Less than 70% shall result in a recommendation of denial.

CATEGORY	PREVIOUS INSPECTION DATE		
	RECENT INSPECTION DATE		
OPIOID TREATMENT STANDARDS	ITEM VALUES This Program	PREVIOUS REPORT	CURRENT REPORT
Admission Requirements	16		
Placement Admission and Assessment	32		
Treatment Plans	17		
Progress Notes	12		
Rehabilitative Services	5		
Medication Dispensing	9		
Administration	6		
Take Home Medications	19		
Urinalysis	8		
Client Case Records	8		
Interim Maintenance			
Treatment	16		
Diversion Prevention Plan	2		
Quality Improvement	11		
TOTAL	161		

Three (3)	161 – 153 = 95%	Total Points Available:	161
Two (2) years:	152 – 145 = 90%	Total Points Received:	
One (1) year:	144 – 113 = 70%	Percent:	%
Denial:	112 or below.		

155.35(6) Treatment Plans	
A. Has the program completed an initial treatment plan upon intake?	_____
B. Have comprehensive treatment plans been developed within 30 days of admission?	_____
C. Does the comprehensive treatment plan minimally contain:	
1. A clear and concise statement of the patient/client's current strengths and needs;	_____
2. Short and long term goals;	_____
3. Type and frequency of therapeutic activities;	_____
4. Staff person responsible; and,	_____
5. The criteria to be met for successful completion?	_____
D. Are treatment plans:	
1. Developed in partnership with the patient/client	_____
2. Reviewed by the counselor and client	_____
a. Every 90 days during the first year; and,	_____
b. Semiannually after the first year?	_____
3. Reviewed by the program physician annually?	_____
E. Do treatment plan reviews contain;	
1. Reassessment of the patient/client's accomplishments and needs;	_____
2. A redefining of treatment goals when appropriate; and,	_____
3. Is the date of review and individuals involved documented?	_____
F. Is the plan written in a manner understandable to the patient/client, with a copy provided to the patient/client upon request?	_____
G. Are treatment plans culturally and environmentally specific?	_____
155.35(7) Progress Notes	
A. Are progress notes documented in the patient/client's case records to include:	
1. The patient/client's progress in meeting the goals of the treatment plan;	_____
2. Following each individual session; and,	_____
3. Summarized at least weekly for group notes?	_____
B. Are progress notes:	
1. Filed in chronological order;	_____
2. Include the date services were provided or the observation made;	_____
3. Date the entry was made;	_____
4. Signature or initials of the person providing the services; and,	_____
5. Entered in permanent pen, typewriter or computer?	_____
C. Are subjective interpretations supplemented with a description of the actual observation?	_____
D. Are abstract terms, jargon or slang avoided?	_____
E. Does the program coordinate with outside resources providing services to the patient/client?	_____
F. Has the program developed and implemented a uniform progress not format?	_____

<p>155.35(8) Rehabilitative Services</p> <p>A. Does the program provide, or provide through collateral providers, rehabilitative services based on the needs identified during the assessment process?</p> <p>B. Does the program provide rehabilitative services minimally as often as on-dosing for the client?</p> <p>C. For client/patients receiving two or less take home dosages are rehabilitative services at least weekly?</p> <p>D. Does the program place a patient/client who does not comply with rehabilitative services on probation?</p> <p>E. If a patient on probation does not comply with rehabilitative services, does the program progressively increase the frequency of clinic attendance until the patient/client complies with rehabilitative services or daily attendance is achieved?</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>155.35(9) Medication Dispensing</p> <p>A. Is the program physician responsible for determining the dosage of medication and dosing schedule, and assumes responsibility for the amount of medication administered or dispensed?</p> <p>B. Does the program physician, record, date and sign the patient/client's record each change in the dosing schedule?</p> <p>C. Does the program physician countersign all verbal orders within 72 hours?</p> <p>D. Is the initial dosage of medication 30mgs or less?</p> <p>E. Is the total first day dosage 40mgs or less?</p> <p>F. For patient/client transferring or guest dosing, is the initial dosage no more than the last dosage authorized by the primary program?</p> <ol style="list-style-type: none"> 1. Are all personnel dispensing medications authorized by law; and, 2. Are admission procedures completed on all patients prior to dispensing of methadone? <p>G. For a patient/client experiencing an emergency situation or admitting on the weekend, are admission procedures completed the next working day?</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><u>ADMINISTRATION</u></p> <p>A. Are take-home bottles labeled in accordance with state law and have childproof caps?</p> <p>B. Is a dispensing log maintained for medications in the dispensing area and in the patient/client case record?</p> <p>C. Does the log document the amount of medication dispensed and the signature of the staff person dispensing medication?</p> <p>D. Prior to dispensing medication, has the patient/client been positively identified?</p> <p>E. Does the program observe and verify ingestion of medication?</p> <p>F. Are daily dosages of methadone in excess of 100 mgs justified in the case record by the program physician?</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

<p>155.35(11) Drug Testing</p> <p>A. Has the program established policies and procedures for the collection and utilization of drug testing results?</p> <p>B. Has the program performed an initial drug screen on each prospective patient?</p> <p>C. Have at least eight random tests been performed in the first year of treatment?</p> <p>D. Are tests performed at least quarterly after the first year?</p> <p>E. Has the program followed the procedures to minimize test falsification?</p> <p>F. Are test results analyzed for all required substances?</p> <p>G. Does the program laboratory comply with all state and federal proficiency standards?</p> <p>H. Does the program use test results as a guide in changing treatment approaches?</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>155.35(12) Patient/Client Case Records</p> <p>A. Does the program have written policies and procedures governing the compilation, storage and dissemination of patient/client case records?</p> <p>B. Do the policies and procedures ensure that:</p> <ol style="list-style-type: none"> 1. The program protects the records against loss, tampering, or unauthorized disclosure; 2. The content and format of the records in uniform; and, 3. Entries in the record are uniform? <p>C. Are the records stored in locked, secured rooms or file cabinets?</p> <p>D. Are records kept in close proximity to the area in which patients/clients receive services?</p> <p>E. Does the program's policy on maintenance and disposal of case records require the records to be maintained for at least five years from the date they are closed?</p> <p>F. Has the program followed all federal and state regulations (42CFR, 155.35(12) when releasing patient/client information?</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>155.35(13) Diversion Prevention Plan</p> <p>A. Has the program developed a diversion identification and prevention plan that:</p> <ol style="list-style-type: none"> 1. Outlines methods by which the program shall detect possible diversion, and; 2. Actions to be taken when diversion is identified or suspected 	<p>_____</p> <p>_____</p>

