

**RECOVERY SERVICES ORGANIZATION
COMPLIANCE ASSESSMENT TOOL**

	A	B	C	D	E	F	G	H
1	CATEGORY	SECTION	STANDARD	EVIDENCE OR METHOD OF COMPLIANCE	PROVIDER SCORE	MAXIMUM SCORE		SCORING DESCRIPTION
2	Leadership and Governance	1.1	The RSO has a governance structure. - The RSO identifies those individuals responsible for governance.			1		0=no governance structure present 1=individuals responsible for governance are identified
3		1.2	The RSO's governance structure is responsible for the safety and quality of care and services. - The RSO's governance structure defines in writing its responsibilities and the responsibilities of the staff in leadership roles. - The RSO's governance structure is reflective of and responsive to the community in which the RSO serves.			1		0=not present 1=present
4		1.3	The RSO's governance structure meets regularly and meetings are documented by written and dated meeting minutes.	Governance meeting minutes			1	0=governance does not meet regularly or no meeting minutes present 1=governance meets regularly that results with meeting minutes
5		1.4	The RSO has an organizational chart that reflects current staffing. - The organizational chart is made available to all staff and members of the RSO's governance structure.	RSO organizational chart			2	0=RSO does not have an org chart or is outdated 2=RSO has an up-to-date org chart
6						0	5	
7	Planning	2.1	The mission, vision, and goals of the RSO support the safety and quality of care and services.			1		0=not present 1=present
8		2.2 - 2.2.2.4	The RSO has a written, dated, and publicly available strategic plan. •The strategic plan is developed with input from persons served, personnel, and other stakeholders. The strategic plan at minimum •Articulates how the organization intends to meet the recovery needs of the population they serve. •Sets goals and priorities. •Includes measurable objectives. •Is reviewed, updated, and remains current. •Identifies the methods used to coordinate services with other service providers.			3		0=not present 1=present but not inclusive of most components 2=present and inclusive of some components and limited in design or implementation 3=present, inclusive, and fully designed and implemented
9		2.3	The RSO has a written and dated plan to address the national standards for Culturally and Linguistically Appropriate Services (CLAS).				1	0=not present 1=present
10		2.4	The RSO maintains a Continuity of Operations Plan (COOP) to ensure recovery support services are continuously available for Vermonters during unforeseen circumstances and in case of unexpected closures.				2	0=not present 1=present but not thorough 2=present and thorough
11					0	7		
12	Fiscal Management	3.1.1	Reliable monitoring, in accordance with generally accepted accounting principles (GAAP), of billing and expenditures-versus-revenues assessed by person served, by staff, by service, and by program.			3		0=not present 1=present but not inclusive 2=present and inclusive but limited in design or implementation 3=present, inclusive, and fully designed and implemented
13		3.1.2	Accurate tracking of the time of staff and volunteers.			2		0=not present 1=has a basic framework to capture time of staff and volunteers 2=has an adequate system to capture time of staff and volunteers 3=robust system to accurately capture time of staff and volunteers
14		3.1.3	Formal written procedures to prepare a revenue and expense budget.				2	0=not present 2=present
15					0	7		

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16	Human Resources	4.1-4.1.1.10	The RSO has a written description of its non-discrimination practices, policies, and procedures. The policy addresses non-discrimination on the basis of: - Race. - Religion. - Gender. - Ethnicity. - Age. - Disabilities. - Sexual orientation. - Real or perceived HIV or other medical statuses. - Mental health or substance use status. - Pathway to recovery.			1		0=not present in the entirety 1=all policies fully present
17		4.2 - 4.2.1	The RSO has a Code of Ethics, which governs the behavior of all staff, volunteers, board members, and business practices. - There are procedures for investigating and acting upon violations, including reporting to authorities as warranted.			2		0=not present 2=present
18		4.3 - 4.3.1	The RSO ensures their Code of Ethics and Non-Discrimination policies are visibly posted in the areas of their building where visitors access and is posted publicly on the RSO's website.			2		0=not present 2=present
19			The RSO has a Conflict-of-Interest policy that addresses how staff, volunteers, and members serving on the RSO governance structure should proceed when they have a direct or indirect interest, or their immediate family or friends have direct or indirect interests known to the staff, volunteers, and members serving on the RSO governance structure.			3		0=not present 3=present
20		4.4 - 4.4.2	RSO staff and volunteers are aware that their positions can influence the individuals with whom support is provided. - RSO staff do not exploit the trust and/or dependency of people being served by the RSO. - RSO staff strive to avoid dual relationships or commitments that could impair judgment, increase the risk of exploitation, or create conflict with the interests of persons served. If a dual relationship is unavoidable, RSO staff disclose and discuss dual relationships with their supervisor.			2		0=not present 2=present
21		4.5 - 4.5.2	The RSO develops and maintains grievance policies and procedures for RSO volunteers, and staff, and - Articulates the process for escalating review of the grievance through the RSO's higher levels of authority up to the RSO's governance structure. - Provides oversight of the RSO's leadership team, including but not limited to the Executive Director, Chief Executive Officer, and/or Chief Operating Officer through the RSO's governance structure.			2		0=not present 2=present
22		4.6	The RSO has policies that require staff responsible (per their job descriptions) for Recovery Support Services to be appropriately credentialed within 180 days after the date of hire.			2		0=present in less than 80% of personnel charts 2=present in 80% or more of personnel charts
23		4.7	The RSO has policies and procedures for conducting background checks on personnel in compliance with state and federal laws, including but not limited to Medicaid regulations.	Personnel policies and procedures			3	

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26		4.10 - 4.10.7	The RSO has a job description for each staff position that contains information regarding the position's - Required credentials, if applicable; - Job duties and responsibilities; - Minimum levels of education and training required; - Related work experience required; - Reporting and supervisory responsibilities; - Salary range of the position; and - Performance criteria.			1		0=not present in all personnel charts 1=present in all personnel charts
27		4.11	There is documentation in the personnel file, signed by the employee, that a copy of the current job description has been provided to them.			2		0=not present in all personnel charts 2=present in all personnel charts
28		4.12 - 4.12.4	A personnel record is maintained for each staff member. The personnel record contains documentation of the staff's credentialing and training documents. - The personnel record contains signed and dated documentation of the staff member's performance appraisals. - Staff can access their own personnel records for review and comment. - Personnel records are secured, stored, maintained, and utilized in such a way as to protect employee confidentiality.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
29		4.13 - 4.13.2	Documentation is maintained for each volunteer that includes - Documentation that the staff member has completed training related to person-served policies and procedures. - A written and dated agreement, signed by the volunteer, that they agree to abide by state and federal confidentiality laws, including HIPAA and 42 CFR Part 2.	Policies and procedures		2		0=less than 50% of components present in reviewed volunteer files 1=50% to 89% of components present in reviewed volunteer files 2=90% or more components present in reviewed volunteer files
30		4.14 - 4.14.4	Performance appraisals are conducted using pre-established performance criteria based on the specific responsibilities of the position as stated in the job description. - Performance objectives established in the previous period are evaluated. - Dated performance appraisals are conducted for each staff person at least annually. - There is dated documentation, in the personnel record, the staff have reviewed, signed, and discussed their performance appraisals with their supervisor. - Performance appraisals document deficient performance and establish a plan to address the deficiencies.	Supervision notes		2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
31		4.15 - 4.15.1	The RSO has policies and procedures for the supervision of all individuals providing direct services. - The policies and procedures require supervision of any persons providing direct services by a qualified professional at least twice a month.			1		0=not present 1=present
32		4.16	Ongoing supervision of direct service personnel is documented.			2		0=supervision of direct service staff not occurring 1=supervision of direct service staff occurring inconsistently 2=supervision of direct service staff occurring regularly

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33		4.17	The RSO has a written and dated policy and procedure for staff or volunteers who have problems that interfere with acceptable job performance.			1		0=not present 1=present
34		4.18	Students, interns, or volunteers are held to the standards outlined by this section.			1		0=not present 1=present
35						0	36	
36		Accessibility	5.1	The RSO makes accommodations for individuals with special needs in compliance with the American Disability Act (ADA) and for individuals with language barriers.			2	
37					0	2		
38	Health and Safety	6.1 - 6.1.4.13	The RSO has procedures for addressing critical incidents that include - Reporting; - Remedial action. - Timely review of incidents including but not limited to --Type of incident --Staff and volunteers involved --Relevant policies and procedures --Response to incident --Required staff and volunteer training, remediation, and follow-up -The following incidents --Serious illness; --Injuries; --Deaths; --Alleged or confirmed abuse or neglect; --Aggression or violence; --Use and unauthorized possession of a weapon; --Vehicular accidents; --Bio-hazardous accidents; --Suicide or attempted suicide; --Unauthorized use and possession of legal or illegal substances; --Sexual abuse or assault; --Abduction; and --Security breaches.			3		0=procedures not fully comprehensive 3=procedures fully comprehensive
39		6.2	Each RSO defines critical incidents for its own purposes and communicates this definition throughout the organization.			1		0=not present 1=present
40		6.3 - 6.3.5	The following critical incidents are reported using the VDH-designated form to DSU within 24 hours. - Serious illness or injuries resulting in needing medical care; - Death; - Alleged or confirmed assault, including sexual assault by staff or by others; - Unlawful activity perpetrated on property by staff or by others; and - Any incident, marked by seriousness or severity, that may result in liability for the State or the RSO.			2		0=not reported 1=not reported consistently 2=reported consistently

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41		6.4 - 6.4.3	The RSO's policies and procedures for addressing for the VDH reportable critical incidents include, at a minimum: - Conducting timely, thorough, and credible root cause analysis of the incident; - Development of an action plan designed to implement improvements to reduce risks; - Implementation of improvements and monitoring the effectiveness of those improvements.			1		0=not present 1=present
42		6.5	The RSO has policies and procedures for the handling of both licit and illicit substances brought into the RSO.			2		0=not present 2=present
43						0	9	
44	Quality Assurance and Performance Improvement	7.1	The RSO maintains a data system that captures appropriate documentation of the persons served.			1		0=not present 1=present
45		7.2	The RSO establishes procedures to ensure data quality.			1		0=not present 1=present
46		7.3	The RSO has a quality improvement plan for analyzing and using data to improve the quality of recovery support services and programs.			2		0=not present 2=present
47		7.4	The RSO utilizes processes at established intervals to ensure recovery support services and programs are effectively meeting the needs of the community and persons served.			3		0=not present 1=present but not inclusive 2=present and inclusive but limited in design or implementation 3=present, inclusive, and fully designed and implemented
48						0	7	
49	Rights of the Person Served	8.1 - 8.1.3	Rights of the person served must be communicated to the person served - In plain language. - Prior to the beginning of service delivery or at the initiation of service delivery. - When informed consent is not possible due to the inability of the person served to understand their rights in the process, documentation of this appears in the person served record.			2		0=present in less than 80% of reviewed charts 2=present in 80% or more of reviewed charts

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50		8.2 - 8.2.5.4	The RSO's policies ensure the following rights of the persons served while receiving services at the RSO: - Confidentiality and privacy of information in accordance with law; - Freedom from -- Abuse; -- Financial or other exploitation; -- Retaliation; -- Humiliation; and -- Neglect. - Access to: -- Information pertinent to person served in a timely manner in order to facilitate their decision-making. -- Their record including --- Recovery plan. --- Recovery support service notes. - Opportunity to provide informed consent to or refusal of -- Service delivery. -- Release of information. -- Concurrent services. - Referral to the following services, as appropriate: -- Treatment services. -- Case management services. -- Harm reduction services. -- Other social service agencies.			1		0=not present in the entirety 1=all rights are fully present
51		8.3 - 8.3.4	The RSO implements procedures for persons served that conform to Vermont Medicaid's grievance process and administrative rules, which states that - A grievance may be expressed orally or in writing; - A person served or their designated representative may file a grievance at any time; - Written acknowledgment of the grievance must be mailed within five (5) days of receipt of a grievance, unless a decision is made within 5 business days, then a notice of decision shall be sent instead of a notice of acknowledgement; - All grievances shall be addressed as expeditiously as the person served's health requires but not more than 90 days after the RSO's receipt of the grievance.			3		0=not present 3= present
52					0	6		
53	Program Structure and Staffing	9.1	The RSO posts their hours of operation in the office and on the RSO's website. The RSO is open at least 30 hours per week.	Website and site review		2		0=hours of operation less than 30 hours per week 2=hours of operation 30 or more hours per week
54		9.2	The RSO ensures appropriate staffing levels for daily operations, recovery support services, and organization, such that - People seeking services receive services within 10 business days; and - People receiving services are safe and feel welcome.	Chart review		2		0=people are not receiving requested services within 10 business days 2=people are receiving requested services within 10 business days

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55		9.3	The RSO serves people seeking and maintaining recovery from substance use disorders while acknowledging that many people seeking services have a co-occurring mental health or other condition.	Person served interviews		2		0=persons served report that RSO is not capable in recognizing co-occurring conditions. 2=persons served report that RSO is capable in recognizing co-occurring conditions.
56		9.4	The RSO serves family and friends of those experiencing a substance use disorder.	Person served interviews and RDP		1		0=RSO does not serve family and friends of people experiencing a SUD 1=RSO does serve family and friends of people experiencing a SUD
57		9.5	The RSO maintains manuals outlining the processes and procedures for all of the services and groups offered.	Program manuals and curriculum and chart review		2		0=does not have manuals 1=has manuals but are not up-to-date 2=has up-to-date manuals
58		9.6	The RSO provides individual and group services with fidelity to evidence-based practices or generally-accepted best practices.	Program manuals and curriculum and chart review		2		0=services do not align with manuals 1=services inconsistently align with manuals 2=services consistently align with manuals
59						0	11	
60	Documentation	10.1 - 10.1.9	Documentation regarding the person served is integrated into the recovery support relationship and - Includes the recovery support service provided, how the recovery support service related to the person's goals, the progress towards their goals, and next steps; - Documents medical necessity, if applicable, the rationale for services provided, and is justified for the services rendered; - Is accurate, clear, and concise; - Maintained and available for review and audit; - Uses plain language; - Focuses on person's goals and strengths; - Does not include language regarding diagnoses, symptoms, medications, compliance, or other elements beyond the scope of practice of RSS personnel; - Is legible, signed, and dated; and - Is never altered.	Chart review		5		0=less than 50% of components present in reviewed client charts 3=50% to 89% of components present in reviewed client charts 5=90% or more components present in reviewed client charts
61		10.2 - 10.2.5.3	Service notes include the following information: - Service start and end time; - Service date; - Recovery support provider name, signature, and credential (if applicable); - Setting or location where the service was provided; and - Summary of service provided, which includes -- Clear description of the service provided; -- Response of the person; and -- Plan for next steps.	Chart review		5		0=less than 50% of components present in reviewed service notes 3=50% to 89% of components present in reviewed service notes 5=90% or more components present in reviewed service notes
62		10.3	Recovery support services are a component of the person's individualized, person-centered recovery plan and are related to a goal or issue listed in the recovery plan.	Chart review		2		0=less than 50% of reviewed files connect RSS with goal or issue in recovery plan 1=50% to 89% of reviewed files connect RSS with goal or issue in recovery plan 2=90% or more reviewed files connect RSS with goal or issue in recovery plan
63					0	12		

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64	Recovery Plan	11.1 - 11.1.3	There is written and dated documentation that each person served receives a person-centered recovery plan that is - Developed with the person served and with the involvement of family or other support persons, when applicable and permitted. - Recognizes the persons' strengths, needs, abilities, preferences. - Formed with knowledge of the persons' cultural considerations.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
65		11.2	The Recovery Plan identifies of the needs and desires of the person served through goals that are expressed in the words of the person served and are reflective of the informed choice of the person served.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
66		11.3 - 11.3.6.2	For each goal, there are recovery objectives that are - Specific to the person served. - Measurable. - Achievable. - Realistic. - Time specific and time limited. - Services identified to be provided, including -- Frequency of contact. -- The staff responsible for helping to accomplish the objective.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
67		11.4	The person served signs and dates a statement, included in the recovery plan, indicating that they have reviewed, participated in the development of, and understands the recovery plan.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
68		11.5	The RSO staff signs and dates the recovery plan upon its completion.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
69		11.6	Recovery plans are reviewed and updated by the RSO staff and the person served as verified by a signed and dated plan as needed.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
70		11.7	The person served is offered a copy of their Recovery Plan and it is documented in their record.			2		0=less than 50% of components present in reviewed personnel files 1=50% to 89% of components present in reviewed personnel files 2=90% or more components present in reviewed personnel files
71					0	14		
72	Community Involvement	12.1	The RSO has relationships with local prevention, harm reduction, treatment, and social service agencies.			4		0=RSO does not have positive working relationships with local community partners. 2=RSO has a working relationship with a few local community partners. 4=RSO has many working relationship with many local community partners.
73		12.2	The RSO has policies and procedures about how to communicate, interact, and maintain confidentiality between the RSO and community partners in order to coordinate services.			1		0=not present 1=present
74					0	5		
75					0	121		
76							FINAL OVERALL SCORE:	0%