Mandatory Introductory Training
Driver Education and Evaluation Program

DEEP Office
September/October 2018
This training is a SUMMARY of the requirements of DEEP Providers. It is a requirement of providers to read and understand all the requirements of the DEEP Procedure Manual

Private Provider: A Community-based Service Provider operating a private practice who is applying to be, or has been approved by the Office under 5 MRSA sections 20005, 20073-B and/or 20075 to provide the treatment component or the evaluation component, or both of the Driver Education and Evaluation Programs.

The term Private Provider is used within these rules to mean only that individual defined above who operates a private practice.

- Must have a valid and current Certificate of Approval issued by the Department of Health and Human Services – DEEP Office
- Must be licensed M.R.S.A 32, Ch. 81 – CADC/LADC, not an ADCA.

Also the list below:

NOTE: These are the requirements to perform DEEP Services. These licensing regulations do not guarantee payment. Payor Services may require different licensure standards for which payment may be requested.
• Shall have clinical supervision by a Certified Clinical Supervisor
  – May be individual or group supervision
  – May be peer supervision provided there are (3) or more clinicians involved with at least (1) being currently licensed as an LADC
  – Occur at least (1) hour for each (20) hours of direct client contact or not less than (1) hour per calendar quarter in the case of a part-time clinician
• Shall have clinical supervision by a Certified Clinical Supervisor
  – Maintain a log of supervision meetings that contain date, duration, and content of supervision meetings and be submit quarterly
  – Includes a review of case records, develop of training plan and upgrading of clinical skills
  – New Requirement:
    • Quarterly submission due 10/15, 1/15, 4/15, and 7/15

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Provider Certification Standards
Agency Providers

Program: A Community-based Service Provider certified and/or licensed by the Department of Health and Human Services consisting of a combination of Governing Authority/Management and one or more other components conducted in a residential or nonresidential setting. A Program is a general term for an organized system of service designed to address the evaluation and/or treatment needs of clients.

- Must have a valid and current Certificate of Approval issued by the Department of Health and Human Services – DEEP Office and a valid and current Mental Health Agency license
- Responsible person must sign a “Letter of Agreement” which assures staff compliance with DEEP regulations
- Submit provider change of information form for all changes of employees/affiliates providing DEEP services
- Expected to train, supervise or monitor, as well as ensure the compliance to DEEP regulations by all employees and/or affiliates
• Certificate of Approval – two years
• Provisional Certificate of Approval – minimum 3 months-maximum 1 year
  – Not eligible for full certificate because:
    • Has not operated a practice for which the application is made;
    • Has a Certificate, but has not operated during the term of that Certificate;
    • Complies with these regulations, except those which can only be documented once clients are served by the applicant; and
  – Need to demonstrate the ability to comply with these regulations by the end of the provisional term
Provider Certification Standards
Renewal Certification Requirements

• Full Certificate Renewals (1 year or more) – submit application and required elements (60) days prior to the expiration date
• Provisional (less than 1 year) – submit application and required elements (30) days prior
• Failure to apply prior to the expiration date will result in the removal from DEEP provider list

• Certification renewal or monitoring on-site inspections shall be completed at least (30) days prior to the expiration or anniversary date of the current Certificate
• Current Certificate remains in effect until DEEP has taken final action on the application
Renewal inspection – DEEP client case records that were open at the time of and since the most recent on-site inspection separate from other client records, or shall clearly mark those DEEP to allow for random selection.

Inspection of physical location
- Posted certificate of approval
- Review of case files
- Signed DEEP confidentiality statement

1. Fire escape plan posted
2. Handicap accessible
   If not, does Provider plan to serve clients with disabilities (see policy and procedures manual Question #1 for plan)
3. License posted and is valid and current. Expiration Date: 
4. Client’s case records stored to ensure confidentiality (double lock)
5. Office location ensures client confidentiality
6. Conditions present which may immediately endanger the health and safety of the client. If yes, please explain:
7. Exits clearly marked
Provider Application Process
 Agency Providers

- Must have an “active” substance abuse agency license
- A signed letter of agreement
- All employees trained per this presentation
- A list of all employees and/or affiliates who will be providing DEEP with a copy of their license
- A copy of the license of the CCS who will be providing clinical supervision to DEEP providers
Provider Application Process
Private Providers

• Submit application and the required elements:
  – NOTE: DEEP developed a policies and procedures manual as a template. You may customize this to include your policies and procedures (see forms link)
• DEEP to review application and requirements, inspect facility ensure new provider training, and issue a determination within (60) days from receipt of application
Providers must enter intakes, enrollments, waitlists, and discharges in WITS by the 15th of the month following month end

- Link to access WITS: me.witsweb.org/Public/
- New access request: Julia.mason@maine.gov
- Training Manuals:
  - Client admission manual
  - Waitlist manual
  - Discharge Manual
Complete (6) actual hours per year of DEEP specific training that is directly related to the provision of evaluation and/or treatment services

- Training: Special schools, workshops and other opportunities (such as CEU programs) for Program staff and Private Providers intended to:
  - Improve administration of programs and services;
  - Develop skills in treatment substance abusers and their families;
  - Increase knowledge of drug abuse, alcohol abuse and alcoholism
  - Provide information on the Driver Education and Evaluation Program’ regulations, policy, procedures, and process

- The requirement above is providing by the DEEP office via Annual Regional Provider Trainings scheduled in the fall of each year. This training/venue may change with prior notification from DEEP
Standards:

- May not provide both evaluation and treatment services to the same individual unless a waiver is granted on a case-by-case basis by DEEP

Waiver to the client shall include the name of (3) providers at least one of whom must not be employed at the same Program/Agency.

Waiver is limited to individuals participating in the Under 21 Program.

- Do not provide evaluation or treatment services until you have received the client registration form from DEEP

- The cost of the clinical substance abuse evaluation and treatment is the responsibility of the client

- Evaluation and treatment services shall be consistent with that of any other referred client
• Standards:
  – Notify DEEP when there is a change in provider information (Change of Information Form)
  – Notify DEEP when there is a change in clinical supervision
  – Notify DEEP when an office is opened or closed in any location
  – Notify DEEP if you have a waiting list in excess of 30 days

• Failure to comply with applicable laws or rules may result in revocation or suspension
  – Providers have the right to an adjudicatory hearing if a written request is filed within 10 days of the receipt of the notice of action
Forms, Processes and Standards
Registration Form

- Do not provide services until you receive this form from DEEP
- Submit by mail or fax
- DEEP Provider Evaluation Form (Evaluation/Status Update/Second Opinions)
  - Submit this registration form with the DEEP Provider Evaluation Form within (10) working days of completed evaluation
### Forms, Processes and Standards

#### Registration Form

- **DEEP Provider Treatment Form**
  - Submit this registration form with the DEEP Provider Treatment Form within (15) working days of completion of treatment.

- **Return registration form after (90) days to DEEP when clients discontinue treatment process without notification.**
• PURPOSE: To determine if evidence of a substance abuse problem exists AND if the client is at risk to recidivate

• DEEP Procedure Manual – Section E
  – Minimum of (2) and maximum of (4) hour sessions
  – Minimum of (5) working days between the first and second session
  – If client and evaluator agree to a positive finding after the first session, the client may waive subsequent sessions
    • Must notify DEEP within (5) working days and a copy of the form maintained in the client file
One session with a concerned person (unless waived after initial session)
   - Refusal by client results in an unsatisfactory completion of the evaluation unless an exception allowed by Clinician for exceptional circumstance(s)

No group evaluations are allowed

Required abstinence from alcohol and/or other non-prescribed drugs during the course of the evaluation

Last scheduled session, client informed of the results of the evaluation

Any time an evaluation is not completed within (6) months, client will be required to undergo another complete evaluation

If an initial evaluation has resulted in a positive finding, any subsequent evaluation will be conducted as a second opinion evaluation

Clients who have completed treatment six (6) months prior to submitting documentation of treatment completion shall be required to provide documentation of compliance… for a status update evaluation
• Required documentation per Chapter 2 which will be verified at site inspections:
  – Mental status assessment;
  – Psychosocial history, including family background, employment, education, legal and medical history;
  – Detailed history of alcohol and other drug use, including age of first use, evidence of tolerance or withdrawal, memory loss, consumption, list of all drugs used (past and present, patterns of use and family history of alcohol/drug problems);

– History of previous treatment for a substance abuse disorder, if any, including past participation in self-help, and any significant periods of abstinence or recovery;
– Diagnostic assessment test instrument scores and their clinical interpretation;
– Content of the interview with at least one significant other;
– Description of the client’s current alcohol and/or other drug use status;
• Required documentation per Chapter 2 which will be verified at site inspections:
  – Clinical summary, including DSM diagnosis and the stage of chemical abuse/dependency in accordance with the Completion of Treatment Guidelines, any recommendations for further service, and the client’s current risk for repeating an alcohol or other-drug related offense

• STATUS UPDATE EVALUATIONS: In addition to the above, documentation of previous treatment, including copy of the discharge summary and aftercare plan
• Evaluation Results
  – Incomplete: client failed to attend all the required evaluation sessions, fails to bring a concerned person without special circumstances, fails to complete the evaluation or fails to comply with any other reasonable requirement that is a customary part of the evaluation
  – Negative: evaluation determines there is no clinical evidence that a client has an alcohol or other drug problem requiring treatment
• Evaluation Results
  – Positive: evaluation determines that a client has an alcohol or other drug problem requiring treatment either outpatient, non-residential or residential treatment
    • The consequences of client’s failure to comply with treatment requirements must be explained to the client
    • Prescribe a type of treatment that is appropriate and likely to be beneficial
    • Give the client the names of three (3) Private Providers and/or Programs
      – Must not be employed by the same Program as the counselor conducting the evaluation unless a waiver is granted (for Under 21 participants only)
• Evaluation Results
  – Positive-in remission: evaluation determines the client has HAD an alcohol or other drug problem for which the client has demonstrated clinical evidence of remission sufficient to comply with Satisfactory Completion of Treatment

• Definition: Satisfactory Completion of Treatment: Individual has responded to treatment to the extent that there is a substantial probability the individual will not be operating under the influence
Communicate the evaluation results within (10) working days on form provided by DEEP (in addition to the registration form)
  – Five (5) working days if waived after first session
PURPOSE: Designed to address the client’s specific problem with alcohol or other drugs

• DEEP Procedure Manual – Section F
• Each client shall receive a complete assessment, including clinical consideration of the client’s needs, and a written individual treatment plan based on this assessment
• Progress notes shall be maintained
• An aftercare plan shall be developed
• A discharge summary shall be completed
• A case record shall be maintained

• A reduction of treatment outside the recommended number of clinical hours and/or time frames established by the Completion of Treatment Guidelines must be approved upon completion of treatment
• An extension of treatment outside the recommended number of clinical hours and/or time frames established by the Completion of Treatment Guidelines must be approved upon determination prior to extending treatment
• DEEP clients participating in a protective environment will be required to complete a minimum of (1) contact hour per week over a period of not less than (30) days after discharge from the protective environment prior to the submission of the DEEP Provider Treatment form.

• DEEP clients receiving treatment while residing in a halfway house or pre-release center may receive DEEP services provided the client registers for the Completion of Treatment Program:
  – Treatment cannot be provided by an employee of the halfway house or pre-release center.
  – DEEP clients who do not complete DEEP while at a halfway house, pre-release center, or residential rehabilitation program shall complete a minimum of (1) contact hour per week over a period of not less than (30) days after discharge from the Program.
Communicate the treatment results within (15) working days on form provided by DEEP (in addition to the registration form)

– Also communicate with this form in this timeframe when a registration form is held due to non-payment

Registration forms for clients who discontinue treatment without notification for (90) days shall be returned to DEEP

Special License Eligible (use Special License Eligible Form). Notify DEEP within (5) days of the completion of the 3rd session
• DEEP Procedures Manual - Section L
• The completion of treatment other than the Driver Education and Evaluation Programs, the “Completion of Treatment Program,” is for those clients who acknowledge a problem with alcohol and/or other drugs and request treatment at the time of registration
• Clients who are determined for any reason not to need treatment may be required to complete the appropriate DEEP Program
The DEEP representative will contact providers via corrective measure letter when out of compliance with Chapter 2.
Forms, Processes and Standards

Required Forms

For Initial Application and Renewal

- Application
- Clinical Supervision Agreement (Peer)
- Clinical Supervision Agreement
- DEEP Policies and Procedures Manual Template
- Letter of Agreement
- Person of Authority Agreement

Provision of Service Forms

- Change of Information Form
- Clinical Supervision Log
- Evaluation Form
- Extension of Treatment Request Form
- Special License Eligibility Form
- Treatment Form
Where do I find the DEEP regulations?

Where do I find M.R.S.A. 32, Ch. 81?
   – http://legislature.maine.gov/statutes/32/title32ch81sec0.html

Where do I find the DEEP forms?

How do I contact DEEP?
   – Provider Phone Line: 207-626-8600
Questions?

DEEP Office
Contact Information

Office of Substance Abuse and Mental Health Services
Dept. of Health and Human Services
41 Anthony Ave.
#11 State House Station
Augusta, ME 04333-0011

Telephone: (207) 626-8600
TTY users call Maine relay: 711
Fax: (207) 287-3903
Email: deep.osa@maine.gov

DEEP phone representatives are available from 8:30 am to 4:30 pm, Monday through Friday.