67:61:01:01. Definitions. Terms used in this article mean:

(1) "Addiction counselor," an individual who ~~meets the standards established by the Board of Addiction and Prevention Professionals and~~ is ~~recognized as~~ a licensed addiction counselor or certified addiction counselor by the ~~board~~ Board of Addiction and Prevention Professionals;

(2) "Addiction counselor supervisee," an individual who is recognized as a licensed addiction counselor supervisee or certified addiction counselor supervisee by the Board of Addiction and Prevention Professionals;

(3) "Addiction counselor trainee," an individual who ~~meets the standards established by, and~~ is recognized ~~by,~~ as an addiction counselor trainee by the Board of Addiction and Prevention Professionals;

~~(3)~~ (4) "Admission," the point in an individual's relationship with an agency or program when the intake ~~services are~~ process is complete, and the individual is eligible to receive and accept services;

~~(4)~~ (5) "Advocate," an individual designated by a client to ~~support that client by speaking or acting~~ speak or act on the client's behalf;

~~(5)~~ (6) "Agency," a facility seeking or holding accreditation through the department, as provided in SDCL subdivision 34-20A-2(1);

~~(6) "Agency director," the individual in charge of the overall management of the agency;~~

~~(7) "Board of directors," the entity legally responsible for the overall operation and management of an agency;~~

~~(8)~~ (7) "Client," an individual receiving alcohol, other drug, or gambling treatment

services~~,~~ from an ~~accredited~~ agency;

~~(9)~~ (8) "Clinically-managed, low-intensity residential treatment program," an accredited residential program that is designed to aid reentry into the community and that provides services listed in chapter 67:61:16 to a client in a structured environment ~~designed to aid re-entry into the community~~;

~~(10)~~ (9) "Clinically-managed, residential detoxification program," an accredited short-term residential program that is designed for an individual not having a known serious physical or immediate psychiatric complication and that provides services listed in chapter 67:61:17~~,~~ ~~through~~ for the duration of a supervised withdrawal from alcohol or other drugs~~, for an individual not having a known serious physical or immediate psychiatric complication~~;

~~(11)~~ (10) "Collateral contact," telephone or face-to-face contact with an individual, ~~other than~~ who is not the ~~identified~~ client, ~~in order~~ to plan appropriate treatment ~~to:~~

~~(a) Assist an individual, so the individual can respond therapeutically to the client's substance abuse problem;~~ or

~~(b) Refer~~ to refer the client, family, or both, to other necessary community supports;

~~(12) "Continued service criteria," criteria to describe the clinical severity and degree of resolution of a client's alcohol or other drug problem and indicate the intensity of the services needed in determining continuing care;~~

~~(13)~~ (11) "Continuing care," the provision of a treatment plan and organizational structure ~~that will~~ to ensure a client receives the care needed ~~at the time~~, particularly at the point of discharge or transfer from the current level of care~~. The treatment program is flexible and tailored to the shifting needs of the client and level of treatment acceptance or adherence~~;

~~(14)~~ (12) "Co-occurring disorder," a mental health condition that is present in an individual, in combination with a substance use problem, trauma issues, problem gambling, medical issues, or developmental disabilities;

~~(15)~~ (13) "Crisis intervention," services that are provided to an individual ~~experiencing~~ during a crisis situation ~~related to~~ caused by the individual's ~~use of~~ alcohol or ~~other drugs~~ drug use, ~~and includes crisis situations in which~~ including a crisis situation involving co-occurring mental health symptoms ~~may be present with a focus on restoring~~, to restore the individual to the pre-crisis level of functioning ~~before the crisis~~ or ~~that provides a means~~ to place the individual into a secure environment;

~~(16)~~ (14) "Day treatment program," an ~~accredited~~ agency's program that provides services listed in chapter 67:61:15 to a client~~,~~ in a clearly defined, structured, and intensive treatment program;

~~(17)~~ (15) "Department," the Department of Social Services;

~~(18) "Discharge summary," a narrative summary of a client's treatment record, including the reason for the client's admission, clinical problems, accomplishments during treatment, and reason for discharge, and may include a recommendation or referral for further services;~~

~~(19)~~ (16) "Diversion services," services intended to divert a person at high risk for alcohol, tobacco, or other drug use, abuse, ~~and~~ or dependency;

~~(20)~~ (17) "Early intervention program," an ~~accredited~~ agency's nonresidential program that provides services listed in chapter 67:61:12 to individuals who may have ~~substance use related~~ substance-use-related problems~~,~~ but do not meet the diagnostic criteria for a substance use disorder;

~~(21)~~ (18) "Family counseling," the face-to-face or telehealth interaction between an addiction counselor, addiction counselor supervisee, or addiction counselor trainee~~,~~; a client~~,~~; and a family member of the client~~,~~ for a therapeutic purpose related to the client's treatment program;

~~(22)~~ (19) "Group counseling," the face-to-face or telehealth interaction between an addiction counselor, addiction counselor supervisee, or addiction counselor trainee, and at least two clients, for a specific therapeutic purpose, provided the number of clients does not exceed fifteen, unless otherwise dictated by the evidence-based practice used;

~~(23)~~ (20) "High risk individual," an individual who is exposed to or is experimenting with alcohol or other drugs~~,~~ and who possesses multiple risk factors for substance abuse;

~~(24)~~ (21) "Individual counseling," the face-to-face or telehealth interaction between an addiction counselor, addiction counselor supervisee, or addiction counselor trainee, and an individual client for a specific therapeutic purpose;

~~(25)~~ (22) "Integrated assessment," the gathering of information and engaging in a process with the client~~, thereby enabling~~ that enables the provider completing the assessment, as provided in § 67:61:07:05, to establish the presence or absence of a co-occurring disorder ~~and identifying~~, identify a client's strengths and needs,~~ determining~~ determine the client's motivation and readiness for change, and~~ engaging~~ engage the client in the development of an appropriate treatment relationship in which an individualized treatment plan can be developed;

~~(26)~~ (23) "Intensive outpatient treatment program," an~~ accredited~~ agency's nonresidential program that provides services listed in chapter 67:61:14 to a client~~,~~ on a regular basis in a clearly defined, structured, and intensive outpatient treatment program~~, on a regularly scheduled basis~~;

~~(27)~~ (24) "Intern," a college or university student gaining supervised practical experience;

~~(28)~~ (25) "Management information system," a system designed to collect, store, and report treatment and treatment outcome data;

~~(29)~~ (26) "Medical director," the individual responsible for providing ~~care~~ and overseeing ~~the provision of~~ medical care ~~to a client~~ in an ~~accredited~~ agency;

~~(30)~~ (27) "Medically-monitored, intensive inpatient treatment program," an ~~accredited~~ agency's residential treatment program that provides services listed in chapter 67:61:18~~,~~ to an individual in a structured environment;

~~(31) "Mental disorder" means a substantial organic or psychiatric disorder of thought, mood, perception, orientation, or memory, as specified within the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition, criteria or in coding found in § 67:16:01:26. An intellectual disability, epilepsy, another developmental disability, alcohol abuse, substance abuse, brief periods of intoxication, or criminal behavior do not, alone, constitute a mental disorder;~~

~~(32)~~ (28) "Nonresidential program," an ~~accredited~~ agency's program that provides alcohol and other drug abuse treatment and prevention services~~,~~ on a ~~less than twenty-four hour a day~~ less-than-twenty-four-hour-a-day basis~~, but~~ and does not provide housing for clients;

~~(33)~~ (29) "Outpatient treatment program," an ~~accredited~~ agency's nonresidential program that provides outpatient treatment services ~~listed in chapter 67:61:13~~, via regularly scheduled counseling, to a client or a person ~~harmfully affected~~ harmed by alcohol or other drugs ~~through regularly scheduled counseling services~~;

~~(34)~~ (30) "Prevention program," an ~~accredited~~ agency's program that provides services listed in chapter 67:61:11~~,~~ through a planned and recurring sequence of recognized prevention strategies and multiple~~,~~ structured activities to inform, educate, impart skills, and provide appropriate referrals for other services~~, through the practice and application of recognized prevention strategies~~;

~~(35)~~ (31) "Program," an organized system and specific level of services, offered by an agency, and designed to address the treatment needs of a client;

~~(36)~~ (32) "Residential program," an ~~accredited~~ agency's program that provides room and board~~,~~ in addition to alcohol and other drug abuse treatment services on a ~~twenty-four hour a day, seven day a week~~ twenty-four-hour-a-day, seven-day-a-week basis;

~~(37)~~ (33) "Services," direct or indirect contact between a client or a group of clients and agency staff~~,~~ for the purpose of diagnosis, evaluation, treatment, consultation, or other action directly necessary ~~direct assistance in providing~~ for the provision of comprehensive treatment;

~~(38)~~ (34) "Substance use disorder," a diagnosable substance use condition or diagnosed gambling disorder;

~~(39)~~ (35) "Telehealth," a method of delivering services, including the use of interactive audio-visual or audio-only technology, in accordance with SDCL chapter 34-52;

~~(40)~~ (36) "Transfer," the movement of the client from one level of service to another;

~~(41)~~ (37) "Treatment plan," a written, individualized, and comprehensive plan that is based on information obtained from the integrated assessment, ~~is~~ designed to improve a client's condition, and that includes treatment goals or objectives for primary problems that indicate a need for treatment services; and

~~(42)~~ (43) "Work therapy," a therapeutic task that is based on the client's physical

abilities, interest level, and proficiency, and is used to habilitate or rehabilitate a client.

Source: 43 SDR 80, effective December 5, 2016; 48 SDR 14, effective August 22, 2021; 50 SDR 63, effective November 27, 2023.

General Authority: SDCL 1-36-25, 34-20A-27.

Law Implemented: SDCL 34-20A-27.

~~**Cross Reference:** Use of International Classification of Diseases, § 67:16:01:26.~~

~~**Reference: DSM-5 -- Diagnostic and Statistical Manual of Mental Disorders**, Fifth Edition, published by the American Psychiatric Association, 1000 Wilson Boulevard, Suite 1825, Arlington, VA 22209-3901. Cost: $199.00.~~

67:61:04:09. Staffing, training, and hours of operation. Each agency shall have policy and procedures ~~to respond~~ for responding to potential medical emergencies that clients may encounter while residing at the agency. Each agency that provides treatment services shall provide adequate staffing, training, and hours of operation at the following levels:

(1) Early intervention, outpatient programs, and intensive outpatient treatment programs shall have counseling staff on duty or available by phone at all times during scheduled hours of program operation ~~or available by phone~~. The agency shall post the hours that the agency is open to the general public in a prominent place on the premises. The agency shall have an on-call system~~,~~ available seven days a week, twenty-four hours a day, for client access to program services~~,~~ in the event of an emergency;

(2) Day treatment programs without residential services shall have counseling staff on duty at all times during scheduled hours of program operation. The agency shall post the hours that the agency is open to the general public in a prominent place on the premises. The agency shall have an on-call system~~,~~ available seven days a week, twenty-four hours a day~~,~~ for client access to program services~~,~~ in the event of an emergency;

(3) Day treatment with residential services and clinically-managed, low-intensity residential treatment programs shall operate seven days a week, twenty-four hours a day. The agency shall have~~,~~ on duty at all times~~,~~ a staff member who is trained to respond to fires and other natural disasters~~, as well as~~ and to administer emergency first aid and cardiopulmonary resuscitation. An addiction counselor, addiction counselor supervisee, or addiction counselor trainee must be available to the clients at least eight hours a day, five days a week, and must be available on-call~~,~~ twenty-four hours a day. The agency shall maintain written staff schedules~~, which~~ that must be available to the department at the time of the accreditation

survey;

(4) Clinically-managed, residential detoxification programs shall operate seven days a week, twenty-four hours a day whenever clients are present. If no clients are present, a staff member must be on call to open the facility, if necessary. When the agency is open, a staff member who is trained~~,~~ in accordance with § 67:61:17:06~~,~~ to respond to fires and other natural disasters~~, as well as~~ and to administer emergency first aid and cardiopulmonary resuscitation~~,~~ must be on duty. An addiction counselor, addiction counselor supervisee, or addiction counselor trainee must be available to clients at least eight hours a day, five days a week, and available on-call~~,~~ twenty-four hours a day. The agency shall maintain written staff schedules~~,~~ ~~which~~ that must be available to the department at the time of the accreditation survey; and

(5) Medically-monitored, intensive inpatient treatment programs shall operate seven days a week, twenty-four hours a day. The agency shall have~~,~~ on duty at all times~~,~~ a staff member who is trained to respond to fires and other natural disasters~~, as well as~~ and to administer emergency first aid and cardiopulmonary resuscitation. Training and annual training updates in each area must be documented in the staff members' personnel files. Nursing staff must be on-call twenty-four hours a day, seven days a week. Counseling staff ~~shall~~ must be on duty during normal daytime hours and must be on-call~~,~~ twenty-four hours a day, seven days a week. The agency shall maintain written staff schedules~~, which~~ that must be available to the department at the time of the accreditation survey.

Source: 43 SDR 80, effective December 5, 2016; 50 SDR 63, effective November 27, 2023.

General Authority: SDCL 1-36-25, 34-20A-27.

Law Implemented: SDCL 34-20A-27.

67:61:05:03. Qualifications of addiction counselors. All agency staff that provide addiction counseling shall meet the standards for an addiction ~~counselors~~ counselor, addiction counselor supervisee, or addiction counselor ~~trainees~~ trainee as established by the Board of Addiction and Prevention Professionals. A certificate and identification card issued by the board is evidence of meeting the standards for an addiction counselor ~~or~~. A certificate of recognition is evidence of meeting the standards for an addiction counselor supervisee or trainee. An addiction counselor must obtain certification and an addiction counselor supervisee or trainee must obtain recognition before performing any addiction counseling functions.

Source: 43 SDR 80, effective December 5, 2016; 50 SDR 63, effective November 27, 2023.

General Authority: SDCL 1-36-25, 34-20A-27.

Law Implemented: SDCL 34-20A-27.

Cross Reference: Addiction and prevention professionals, article 20:80.

67:61:05:07. Clinical supervision. The agency board of directors or ~~the agency~~ director shall designate ~~an~~ a licensed or certified addiction counselor to be responsible for supervising clinical services~~,~~ and ~~for~~ providing required supervision of an addiction counselor ~~trainees~~ supervisee or trainee. The methods of supervising clinical services are:

(1) Case staffing, meaning a meeting of an ~~agency's staff~~ agency's internal treatment team to review and evaluate a client's case progress in treatment and determine whether changes are needed in the services provided to a client;

(2) Individual case supervision;

(3) Consultation with other clinical professionals;

(4) Review of case record maintenance; and

(5) Other clinically appropriate supervision methods, as determined by agency policy.

If an addiction counselor is not available within the addiction counselor supervisee or trainee's employing agency, supervision may be obtained on a contractual or consultant basis~~,~~ from an outside party meeting the required qualifications.

Source: 43 SDR 80, effective December 5, 2016; 50 SDR 63, effective November 27, 2023.

General Authority: SDCL 1-36-25, 34-20A-27.

Law Implemented: SDCL 34-20A-27.

67:61:07:05. Integrated assessment. An addiction counselor, addiction counselor supervisee, or addiction counselor trainee shall meet with the client and, if appropriate, the client's family, to complete an integrated assessment, within thirty days of the first day the intake process begins. The integrated assessment must include both functional and diagnostic components. The assessment must establish the historical development and dysfunctional nature of the client's alcohol and drug abuse or dependence, and must assess the client's treatment needs. The assessment must be recorded in the client's case record and must contain:

(1) Strengths of the client and the client's family, if appropriate, as well as previous periods of success, the strengths that contributed to that success, and the identification of potential resources within the family, if applicable;

(2) Presenting problems or issues that indicate a need for services;

(3) Identification of readiness for change for problem areas, including motivation and supports for making such changes the change;

(4) Current substance use and relevant treatment history of any previous mental health and substance use disorder or gambling treatment, and periods of success, psychiatric hospital admissions, psychotropic and other medications, relapse history or potential for relapse, physical illness, and hospitalization;

(5) Relevant family history, including family relationship dynamics and family psychiatric and substance abuse history;

(6) Family Current family and relationship issues along with social needs;

(7) Educational history and needs;

(8) Legal issues;

(9) Living environment or housing;

(10) Safety needs and risks with regard to physical acting out, health conditions, acute intoxication, or withdrawal;

(11) Past or current indications of trauma or domestic violence;

(12) Vocational and financial history and needs;

(13) Behavioral observations or mental status;

(14) Formulation of a diagnosis~~,~~ including documentation of co-occurring ~~medical, developmental disability, mental health, substance use disorder, or gambling issues or a combination of these based on~~ disorders obtained through integrated screening;

(15) Eligibility determination, including a level of care determination for substance use services, or serious mental illness or serious emotional disturbance for mental health services, or both;

(16) Clinician's signature, credentials, and date; and

(17) Clinical supervisor's signature, credentials, and date~~,~~ to verify review of the assessment and if there is agreement with:

(a) The initial diagnosis; or

(b) The formulation of the initial diagnosis, if the staff does not have the education or training to make a diagnosis.

Any information related to the integrated assessment must be verified through collateral contact, if possible, and recorded in the client's case record.

Source: 43 SDR 80, effective December 5, 2016; 50 SDR 63, effective November 27, 2023.

General Authority: SDCL 1-36-25, 34-20A-27.

Law Implemented: SDCL 34-20A-27.

67:61:07:06. Treatment plan. An addiction counselor, addiction counselor supervisee, or addiction counselor trainee shall develop an individualized treatment plan, based upon the integrated assessment for each client admitted to an outpatient treatment program,; an intensive outpatient treatment program,; a day treatment program,; a clinically-managed, low-intensity residential treatment program,; or a medically-monitored, intensive inpatient treatment program. Evidence of the client's meaningful involvement in formulating the plan must be documented in the client's clinical record. The treatment plan must be recorded in the client's clinical record and must contain:

(1) A statement of specific client problems, with supporting evidence, including any co-occurring disorders, to be addressed during treatment, with supporting evidence;

(2) A diagnostic statement and a statement of short- and long-term treatment goals that relate to the problems identified;

(3) Measurable objectives or methods leading to the completion of short-term goals:

(a) Time frames for the anticipated dates of achievement or completion of each objective, or for reviewing progress towards objectives;

(b) A specification and description of the indicators to be used to assess progress;

(c) Referrals for needed services that are not provided directly by the agency; and

(d) Interventions, for identified issues, that match the client's readiness for change; and

(4) A statement identifying the staff member responsible for facilitating the methods

or treatment procedures.

The individualized treatment plan must be developed within ten calendar days of the client's admission to an intensive outpatient treatment program; a day treatment program; a clinically-managed, low-intensity residential treatment program; or a medically-monitored, intensive inpatient treatment program.

The individualized treatment plan must be developed within thirty calendar days of the client's admission to a counseling services program.

All treatment plans must be reviewed, signed, and dated by the addiction counselor, addiction counselor supervisee, or addiction counselor trainee. The signature must be followed by the counselor's credentials.

Source: 43 SDR 80, effective December 5, 2016; 50 SDR 63, effective November 27, 2023.

General Authority: SDCL 1-36-25, 34-20A-27.

Law Implemented: SDCL 34-20A-27.

67:61:07:10. Transfer or discharge summary. An addiction counselor, addiction counselor supervisee, or an addiction counselor trainee shall complete a transfer or a discharge summary for a client, within five working days after the client is transferred or discharged, regardless of the reason for the transfer or discharge. A transfer or a discharge summary of the client's problems, course of treatment, and progress toward planned goals and objectives identified in the treatment plan must be maintained in the client's case record. A process must be in place to ensure that the transfer or discharge summary is completed in the management information system.

When a client prematurely discontinues services, reasonable attempts must be made and documented by the agency to re-engage reengage the client, if appropriate.

Source: 43 SDR 80, effective December 5, 2016; 50 SDR 63, effective November 27, 2023.

General Authority: SDCL 1-36-25, 34-20A-27.

Law Implemented: SDCL 34-20A-27.