

Michigan Supreme Court

State Court Administrative Office **Trial Court Services Division** Michigan Hall of Justice P.O. Box 30048 Lansing, Michigan 48909 Phone (517) 373-4835

Jennifer Warner Director

MEMORANDUM

DATE:	April 11, 2017
TO:	District Court Judges District Court Administrators District Court Probation Officers
FROM:	Michele Muscat, Management Analyst
RE:	SARF-Designated Courts Facility Survey

District courts that use staff to conduct substance abuse screenings and assessments pursuant to MCL 257.625b(5) are required to be surveyed at least once every three years by the Department of Licensing and Regulatory Affairs (LARA) as a Screening, Assessment, Referral, and Follow-Up (SARF)-designated agency.

Attached is a substance abuse treatment facility survey checklist. Please pay special attention to the first eight items on page one, as well as all requirements under SARF on page four. Definitions and descriptions of these required documents can be located on <u>LARA's website</u>.

Please note that the survey activity is separate from the annual license renewal activity. All licenses for facilities issued by LARA's Bureau of Community and Health Systems (BCHS) State Licensing, which includes SARF-designated agencies, expire on July 31 of each year. Courts licensed as a SARF-designated facility must pay an annual \$500 licensing fee pursuant to MCL 333.6237. If the fee is not paid upon renewal, the court is not licensed to perform substance abuse screenings and assessments pursuant to MCL 257.625b. Courts and other licensed facilities will receive a notice in the mail in late May or early June with instructions on how to renew online. Please note that online payment of the \$500 licensing fee is the only method that LARA accepts for license renewal.

If you have questions, please contact me at 517-373-3756 or TrialCourtServices@courts.mi.gov.



Facility:	# of Counselors	
Address:	Medical Director	
Office Phone:	License Number:	
Administrator:	Survey Date:	
eMail:	Surveyor:	
# of Patients	# of Physicians	

Code/Rules	Part 1 General Provisions	Compl iant	Non- compli ant
333.6237 & R325.14212 (5)	License display		
R 325.14302 (7) (9)	Recipient Rights Poster-program rights advisor name posted		
R 325.14107	Operating Manual		
R 325.14108	Hours of operation posted in public place		
R 325.14112	Personnel policy and procedure		
R 325.14113	Program evaluation		
R 325.14114	Staff development program		
R 325.14115	Referrals to other resources		
	OUTPATIENT Applicable Not applicable		
R 325.14701	Staffing requirement-1 to 40 counselors		
R 325.14701 (5)	Records and documentation required		
R 325.14705	Recovery/treatment plan required		
R 325.14707	Progress note required		
R 325.14302 (6) (e)	Recipient Rights Brochure given and signed by recipient		
R 325.14708	Discharge summary required		
	OUTPATIENT TREATMENT OF OPIOD DEPENDENCY (METHADONE)		
	Applicable Not applicable		



Code/Rules	Part 1 General Provisions	Compl iant	Non- compli ant
R 325.14404 (1)	Medical Director required		
R 325.14403 (1)	Physician staffing requirement		
R 325. 14403 (2)	Nursing staff requirements		
R 325.14403 (3)	Physician's assistant requirements		
R 325.14401 (R 338.3132 (1) R 338.3170 (2)	Drug Treatment Program Prescriber License		
R 325.14404 (2) (3)	Medical director and physician records requirements and responsibilities-client contact every 60 days.		
R 325.14406	Urinalysis required weekly		
R 325.14408	Informed consent-must have signed consent to treat		
R 325.14412	Complete physical exam required before dispensing methadone		
R 325.14413	Medical history required		
R 325. 14414	Personal history required		
R 325.14302 (6) (e)	Recipient Rights Brochure given and signed by recipient		
R 325.14419	Client records required		
R 325.14421	Security of drug stocks		
	RESIDENTIAL Applicable Not applicable		
R 325.14901 (1)	1 staff member present at all times		
R 325.14901 (2)	1 full time counselor required		
R 325. 14904	Medical exam required		
R 325.14905	Treatment plan required		
R 325.14906	Client activities required-2 hours		
R 325.14907	Progress note required		
R 325.14908	Support and rehabilitative services availability required		



Code/Rules	Part 1 General Provisions	Compl iant	Non- compli ant
R 325.14909	Discharge summary required		
R 325.14902	Admission record requirements		
R 325.14302 (6) (e)	Recipient Rights Brochure given and signed by recipient		
	RESIDENTIAL DETOX/INPATIENT Applicable Not applicable		
R 325.14922	Annual review documentation required		
R 325.14923	Training documentation, written plan		
R 325.14924	Control register and client records		
R 325.14925 (1)	Physician written agreement required		
R 325.14925 (2)	Physician on call 24/7		
R 325.14925 (3)	Staffing requirements 24/7		
R 325.14925 (4)	Physician review and countersign records every 72 hours		
R 325.14926	Triage written description required		
R 325.14927	Medical exam/SUD history records required		
R 325.14928 (1,2,3)	Discharge documentation		
R 325.14302 (6) (e)	Recipient Rights Brochure given and signed by recipient		
	INPATIENT HOSPITALIZATION Applicable Not applicable		
R 325.14802	Medical director required		
R 325.14802	Counselor required		
R 325.14805	Treatment plan required		
R 325.14806	10 hours of activity available with 2 hours of counseling		
R 325.14807	Support and rehab services available		
R 325.14302 (6) (e)	Recipient Rights Brochure given and signed by recipient		
	CAIT Applicable Not applicable		



Code/Rules	Part 1 General Provisions	Compl iant	Non- compli ant
R 325.14501	Records requirement		
R 325.14302 (6) (e)	Recipient Rights Brochure given and signed by recipient		
	SARF Applicable Not applicable		
R 325.14601 (1) (2)	Referral Resources required		
R 325.14601 (3)	Maintain written referral agreements		
R 325.14601 (4)	Monthly log of source of referrals		
R 325.14602	Develop written policies		
R 325.14302 (6) (e)	Recipient Rights Brochure given and signed by recipient		
R 325.14603	Client records		