

STATE OF VERMONT  
AGENCY OF HUMAN SERVICES  
DEPARTMENT OF CORRECTIONS

Directive: 251.03

Subject: Intensive Substance Abuse Program Clinical Files  
Effective Date: October 1, 1998 Review and Re-Issue Date:  
Supersedes: NEW APA Rule Number:

Recommended for approval by:		Authorized By:	
_____	_____	_____	_____
Signature	Date	Signature	Date

1. Authority:

1.1 Authority for this directive is derived from title 28, V.S.A. (C) (1).

2. Purpose:

2.1 To establish a statewide system for developing, maintaining and auditing clinical files for the Intensive Substance Abuse Program (ISAP).

3. Applicability/Accessibility

3.1 Anyone may have a copy of this directive.

4. Directive

4.1 Implementation

4.1.1 Effective October 1, 1998, the Department of Corrections shall implement the use of a standardized ISAP clinical file statewide. All staff and relevant service providers are expected to adhere to this directive.

4.2 Section Definition

Section 1:

Consent to participate  
Rules for Participates  
Grievance Procedure

## **Directive 251.03 Intensive Substance Abuse Program Clinical Files**

Participant's Bill of Rights  
Confidentiality of Alcohol and Drug Abuse Patient Records ~  
Liability Release  
Consent for the Release of Confidential Information: Criminal  
Justice System Referral  
Group Rules  
Release of Information  
Aftercare Follow-Up Release Form  
Global Assessment of Functioning Scale  
Brief psychiatric Rating Scale  
Addiction Severity Index  
DSM-IV Substance Use Criteria.  
Initial Individualized Treatment Plan  
Treatment Plan  
Clinical Discharge Summary

### **Section 2:**

Progress Notes  
Correspondence  
Homework Assignments  
Past Treatment Information (Including Consent Forms)

### **4.3 File Location**

**4.3.1** Files are to be kept in a locked filing cabinet within the confines of the Community Correctional Services Centers. Access shall be limited to members of the treatment team, to include the program clinical consultant(s) and management. Transfers may occur to other Department of Corrections Substance Abuse Treatment Programs. A release is needed if the information is sent to a program outside of the Department of Corrections. Each file is to be labeled with the offender's name, date of birth, and program identification (i. e., Doe, John ISAP).

### **4.4 Closed Files**

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**4.4.1** Closed files are to be kept onsite for two years and then are sent to the Department of Corrections, Central Office. All Federal and State regulations on file retention and confidentiality continue to apply.

**4.5 Local Audits**

**4.5.1** Superintendents are to ensure that quarterly audits are performed and documented. Documentation shall include the name of the auditor, date of audit, identification of the file audited, number of files audited, and, if necessary, the need for remedial action. Each file audited will contain a standard Department of Corrections form which provides the name of the auditor, date of the audit, and the need for remedial action, if any.

**4.6 The Central Office File Audit**

**4.6.1** The Quality Assurance Team/Central Office shall conduct or arrange for (with the approval of the OEMG) an annual audit at all sites. This is intended to ensure that staff are in compliance with this directive.

**4.7** Information to be kept in the Core file. A copy of an offender's clinical discharge summary and ISAP Reference Form shall be kept in his/her core file.

**5. Training Method**

**5.1**

**6. Quality Assurance Processes**

**6.1**

**7. Financial Impact:**

**7.1**

**8. References**

**9. Responsible Director and Draft Participants**

Dennis Casey and Sandra Olberg