



State of Louisiana

**OFFICE OF  
STATE INSPECTOR GENERAL**

**DEPARTMENT OF HEALTH AND HOSPITALS**

**ON-CALL PAYMENTS**

**Report by**

**Inspector General Bill Lynch**

**Prepared for**

**Governor M. J. "Mike" Foster, Jr.**

**December 11, 2001**

**File No. 1-01-0066**



State of Louisiana

OFFICE OF  
STATE INSPECTOR GENERAL

Department of Health and Hospitals

On-Call Payments

Report by

BL Inspector General Bill Lynch

Approved by

M Governor M.J. "Mike" Foster, Jr.

December 5, 2001

File No. 1-01-0066

# Department of Health and Hospitals

## On-Call Payments

A former DHH employee was allowed to receive on-call pay for two and a half years while often unable to work a regular 40-hour shift because of illness. From June, 1998, until January, 2001, the employee earned at least \$35,800 for on-call pay.

While the practice of allowing an employee to be on leave and in on-call status during the same work day is not a violation of civil service rules or department policy, the manner in which this was allowed, while seemingly compassionate, defied common sense management and was not in the best interest of the agency.

Civil Service rules and agency policy were violated at least 127 times when part of the on-call compensation was for hours the employee was simultaneously on leave and in on-call duty status. Additionally, the employee was compensated for more than 24 hours in one day at least 113 days.

## Background

---

The former employee worked as a Social Services Counselor 2 at Fontainebleau Treatment Center in Mandeville, LA. Responsibilities included screening of referrals and admissions to the facility. The position does not require any special certification and duties could be performed by other Social Services counselors at Fontainebleau.

Fontainebleau is a 66-bed inpatient facility for the treatment of male patients with alcohol, drug and/or gambling addictions. Admission calls into the center are taken 24 hours a day. Fontainebleau is an agency within the Department of Health and Hospitals Office of Addictive Disorders—Region IX that includes the parishes of St. Helena, Livingston, St. Tammany, Tangipahoa, and Washington.

## On-Call Duty Status

---

In 1990, the Office of Addictive Disorders issued its policy for on-call duty status. According to the policy, on-call duty was implemented for situations when an employee is needed after normal working hours to provide necessary, emergency, or crisis intervention services. An employee on-call must be available for immediate verbal consultation by phone or other methods of telecommunication for callback to duty. On-call status begins at the end of the regularly scheduled eight-hour tour of duty and continues until the employee has returned to his/her workstation for the next scheduled shift. If the employee is contacted for consultations, procedures require the employee to revert to active duty status.

According to civil service rules, on-call compensation is for hours worked in excess of regularly scheduled hours of duty and shall not be granted to an employee for his/her regularly scheduled hours.

After the implementation of on-call duty status at Fontainebleau, the employee earned on-call pay at a rate of \$2.15 per hour for weekdays and \$2.25 per hour on weekends.

## On-Call Pay

---

From June 29, 1998, until Jan. 28, 2001, the former employee received \$4,787 for 2,206.5 hours of on-call duty during weeks that the employee failed to work a 40-hour work schedule. The job classification for this position is a generic one and does not specify the employee was the only employee who could perform the duties. In fact, other employees performed those duties while the former employee was on leave as much as 40 hours in a week.

During the same period of time, the employee was absent 1,564 hours from the regularly scheduled work hours, or 32% of the time. According to available records, the majority of those absences, whether the employee took annual, sick or compensatory leave, were due to illness.

According to the administration at Fontainebleau, the job entails receiving calls for admission, gathering relevant patient information, and determining if a bed is available. In most cases, if the patient is admitted, the employee is required to be at the facility.

However, Fontainebleau has a waiting list and most “call in” patients are put on this list unless there is a special circumstance, such as a judicial order.

The former employee claims to have been called out on several occasions. However, available records do not indicate any call outs. Additionally, there are no records indicating a change of duty pay from on-call to active duty for any call-outs made to the employee. DHH has discontinued the on-call status for this facility.

## On-Call While on Leave

---

Records reflect that at least 127 times the employee took paid and unpaid leave from the regularly scheduled 40-hour shift and simultaneously received on-call pay for a total of 415 hours. The employee received \$899 for this on-call pay. The former director of Fontainebleau approved these payments.

For example, on Tuesday, Jan. 26, 1999, records show the employee took 8 hours of paid leave and received 24 hours on-call pay.

Civil Service rules state: “On-call compensation shall not be granted to an employee for his/her regularly scheduled shift.”

## Payments in Excess of 24 Hours

---

There were 113 days when the employee was compensated for more than 24 hours in one day. The number of hours paid in excess of 24 hours a day totaled 350.2 hours. The overpayments were approved by the former director and amounted to at least \$753.

In these situations, the employee worked part of the day, took paid or unpaid leave, and was in on-call status part of the day, but the total hours exceeded 24 hours.

For example, on Wednesday, Nov. 24, 1999, the employee worked 5 hours, took 3 hours paid leave and was also compensated for 18.5 hours on-call time. Compensation totaled 26.5 hours for that day.

*Agency Actions:*

---

1. As of June, 2001, the director of Fontainebleau Treatment Center discontinued the on-call duty status due to the reduction of beds in June, 2000.
2. As of Aug. 2, 2001, the employee is no longer employed by DHH.

*Conclusions:*

---

1. Management at Fontainebleau Treatment Center allowed a former employee to receive compensatory pay for on-call status while on leave.
2. Management at Fontainebleau Treatment Center allowed the employee, on numerous occasions, to be paid for more than 24-hours in one day.

*Recommendation:*

---

1. DHH should ensure compensation is calculated in accordance with all agency and civil service rules and policies.

*Management Response:*

---

See Attached.

*IG Comment:*

---

In its responses, DHH attempts to trivialize what occurred by asserting there were only a few instances of violations, when, in fact, there were 127 times the employee took leave and was on call simultaneously and there were 113 days when the employee was compensated for more than 24 hours. This is obviously more than a “few” and leads to the conclusion, contrary to the DHH response, the actions were done knowingly and intentionally. It is also noteworthy that for all of the on-call assignments, there is no record of the person being called back for duty.

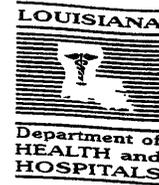
BL/AB/rp

1-01-0066



J. "Mike" Foster, Jr.  
GOVERNOR

STATE OF LOUISIANA  
DEPARTMENT OF HEALTH AND HOSPITALS



David W. Hood  
SECRETARY

December 3, 2001

Mr. Bill Lynch  
State Inspector General  
P. O. Box 94095  
Baton Rouge, LA 70804

Re: Your File No. 1-01-0066  
Fontainebleau Treatment Center

Dear Mr. Lynch:

This will acknowledge receipt on November 20, 2001 of your letter dated November 19, 2001 and enclosed draft of the proposed report for our review and comment.

I thank you for the opportunity to review/comment and for agreeing to an extension of time to respond until December 7, 2001 per Frank H. Perez's phone conversation with Alicia L. Birch on Wednesday, November 21, 2001.

The Department of Health and Hospitals (DHH)/Office for Addictive Disorders (OAD) policy 002-90 in effect at all pertinent times herein clearly provides in Section C (1) (c) that "no employee shall be considered to be in on-call pay status at the same time that he/she is in either duty or leave status. Accordingly, the only two issues in question are 1) whether the former employee was allowed to be in "on call-status" at the same time that she was in either duty or leave status and 2) whether the employee was compensated for more than 24 hours in one day.

The fact that the former employee was allowed to receive on-call pay while often unable to work a regular 40 hour shift because of illness is not a violation of the policy, civil service rules, or any state/federal law. This issue has been discussed with and explained to your staff several times during face to face meetings. On at least one of these occasions, your legal counsel was present. It was my impression that he understood and agreed with the DHH General Counsel's interpretation of the applicable policies, rules and law. Consistent with Mr. Perez's interpretation, I believe that the first statement in the opening paragraph of the report serves no useful purpose. Indeed, it might tend to mislead, or even inflame or prejudice the reader. In addition, it might allow the reader to conclude that DHH knowingly and willingly "allowed" an employee to be compensated in an impermissible manner. Although DHH will certainly assume responsibility for any mistakes it may have made, nothing elsewhere in the report suggests that DHH was guilty of any knowing or wilful act or failure.

OFFICE FOR ADDICTIVE DISORDERS  
1201 CAPITOL ACCESS ROAD • P.O. BOX 2790 • BATON ROUGE, LOUISIANA 70821-2790  
PHONE #: 225/342-6717 • FAX #: 225/342-3875  
"AN EQUAL OPPORTUNITY EMPLOYER"

The former employee should not have been in on-call pay status while in on duty or leave status (i.e., 8:00 a.m. to 4:30 p.m.). However, the policy specifically allows for the employee to be in on call pay status after 4:30 p.m. until 8:00 a.m. the next day. Therefore, even if she was on sick leave status from 8:00 a.m. to 4:30 p.m., she could be in on call pay status after 4:30 p.m..

There are only two allegations in the entire draft report that contain sufficient detail and specificity to allow the appointing authority to respond: 1) the Thursday, January 26, 1999 allegation that she took eight hours of leave and received 24 hours on call pay and 2) the Wednesday, November 24, 1999 allegation that she worked five hours took three hours of leave and was compensated for 18.5 hours of on call time.

The former employee was paid as detailed in the examples provided in the report. There may be other similar instances in the records. Let me say that I believe these instances to be few and I am convinced that they were not wilful or knowing. The instances were simply the result of a failure to perceive what should have been seen and rejected. As we look at it now, it seems painfully obvious, but at the time no one "caught" the mistake. Just as I am sure the draft of your report was checked time and time again, just as I know that all the allegations and facts were read and verified, it is nonetheless true that January 26, 1999 was a Tuesday not a Thursday. I use this example merely to illustrate that there are just those times when the obvious is not obvious and there are those times when that which is not obvious, nevertheless should be. I am grateful for the fact that your staff understood this to be a mistake and not something more sinister. It was certainly not the policy of DHH to allow compensation to employees under such circumstances as are documented in the report.

I would like to point out that the compensation formula used to calculate the amount of payment to the employee was 4:1. That is, the employee was paid at the rate of one (1) hour for every four (4) hours of "on call" time worked in accordance with Section F of the policy. I add this not to minimize the importance of our mistake, but merely to clarify the fiscal picture.

The former employee was removed from her position as Social Services Counselor 2 with Fontainebleau effective October 31, 2001 pursuant to Civil Service Rule 12.6.<sup>1</sup> Copies of the

---

<sup>1</sup> The former employee in question had over ten (10) years as a classified civil servant and was diagnosed, among other ills, with a medical condition that can most charitably be described as one causing excessive intestinal gas and an embarrassing lack of bowel control. While these medical conditions kept her from her duty station, they did not impair her ability to be in on call status.

Mr. Bill Lynch  
December 3, 2001  
Page 3

removal letter and Civil Service Rule 12.6 are attached hereto and made a part of this response as Exhibits A and B respectively. The former employee was a Board Certified Substance Abuse Counselor. Also enclosed as Exhibits C and D are copies of her SF-3 job description and the certification law respectively.

Sincerely,

A handwritten signature in black ink that reads "Michael Duffy / BML". The signature is written in a cursive, flowing style.

Michael Duffy

MD/FHP/br

enclosures



STATE OF LOUISIANA  
DEPARTMENT OF HEALTH AND HOSPITALS



"Mike" Foster, Jr.  
GOVERNOR

David W. Hood  
SECRETARY

October 29 , 2001

Dear

Pursuant to Civil Service Rule 12.7 you were given written notice on 09/14/01 of the Appointing Authority's proposed action.

You did not respond to the proposed action. The Appointing Authority has decided to proceed with the proposed action. Accordingly you are hereby notified that pursuant to the authority contained in Civil Service Rule 12.6 you are hereby removed from your position effective October 31, 2001 at 4:30 p.m.

The reason for your removal is that as of 09/03/01 you have exhausted your sick leave and you are not able to return to duty/perform the essential functions of the position for which you are employed. Your duties can no longer go unperformed. This action is a non-disciplinary separation which will not affect your eligibility for Worker's Compensation or reemployment should you wish to again seek employment at a later date.

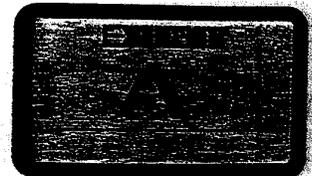
You have the right to appeal this action to the State Civil Service Commission. The time limits and procedure for appealing are contained in Chapter 13 of the Civil Service Rules. A copy of Chapter 13 of the Civil Service Rules can be found at the Appeals Section of the Department of Civil Service located at 1201 Capitol Access Road, Baton Rouge, Louisiana 70804, phone (225) 342-8070 and fax (225) 342-8058.

Sincerely,

Beth McLain  
Acting Deputy Assistant Secretary

BM:ci

10-30-01 3:30 PM  
date time



witness 10/30/01  
date/time 3:30 PM

witness 10/30/01  
date/time 3:30 PM

## 12.6 Non-disciplinary Removals.

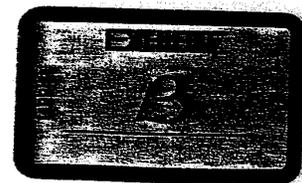
(a) An employee may be non-disciplinarily removed under the following circumstances:

1. when, on the effective date of removal, the employee is unable to perform the essential functions of his job due to illness or medical disability and has no usable sick leave to his credit and the employee's job must be performed without further interruption;

2. when the employee holds more than one position in the state service and the multiple employment causes an employing agency to be liable for overtime payments under the Fair Labor Standards Act and, after having been provided an opportunity to do so, the employee has refused to resign from one of the positions.

(b) When the cause for a dismissal is not the employee's fault or when the employee fails to obtain or loses, as a result of conduct that was not work related, a license, commission, certificate or other accreditation that is legally required for his job, the appointing authority shall designate the dismissal as a non-disciplinary removal under this Rule.

(c) When an employee is removed under this Rule, the adverse consequences of Rules 6.5(c); 7.5(a)7; 8.9(c); 8.13(a)7; 8.15(d); 8.18(d); and (e); 11.18(b) and 17.25(e)4 shall not apply.



# POSITION DESCRIPTION

CHIEF OF CLASSIFICATION & PAY  
DEPARTMENT OF CIVIL SERVICE  
P. O. BOX 94111-CAPITOL STATION  
BATON ROUGE, LA 70804-9111

<b>CIVIL SERVICE AGENCY USE ONLY</b>		<input type="checkbox"/> AFFIRMED <input type="checkbox"/> JOB CORRECTION <input type="checkbox"/> RETURNED W/O ACTION			<input type="checkbox"/> NEW POSITION <input checked="" type="checkbox"/> REALLOCATED    Up    Down    Lateral			APPROVED AS:    YES    NO MASTER <input type="checkbox"/> <input checked="" type="checkbox"/> TRAINING <input checked="" type="checkbox"/> <input type="checkbox"/>		LOG NUMBER - CIVIL SERVICE	
OFFICIAL ALLOCATION				ATTACHMENTS				OFFICIAL JOB CODE			
Social Service Community Prgm Spec				<input type="checkbox"/> OLD SF 3 <input type="checkbox"/> MEMOS <input type="checkbox"/> NAR AUDIT REP <input type="checkbox"/> LETTERS <input type="checkbox"/> OTHER REF <input type="checkbox"/> BASIC AUDIT REP				1-59960			
EFFECTIVE DATE		CONSULTANT	SUPERVISOR		COMMENTS			ASSIGNED CONSULTANT / AGENCY			
6-10-00		DK	CFL		To place in higher level of training series - Delegated Authority			J.H.H. - 7/25/00			

<input type="checkbox"/> NEW POSITION ESTABLISHED <input checked="" type="checkbox"/> AGENCY APPEAL <input type="checkbox"/> UPDATE <input type="checkbox"/> MASTER				<b>2 CODE NUMBERS</b>	
<input type="checkbox"/> EMPLOYEE APPEAL <input type="checkbox"/> 5.3 APPEAL <input type="checkbox"/> REVIEW <input checked="" type="checkbox"/> TRAINING SERIES				SF20 REQUEST NO. 162298	
CURRENT OFFICIAL JOB TITLE				POSITION NO. 134426	
SOCIAL SERVICES COUNSELOR 2				CURRENT OFFICIAL JOB CODE 106770	
REQUESTED OFFICIAL JOB TITLE				REQUEST OFFICIAL JOB CODE	
SOCIAL SERVICES COUNSELOR/OPRADA				106990	
				EMPLOYEE QUALIFIES FOR JOB <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

### 3 GENERAL INFORMATION

EMPLOYEE'S NAME-LAST, FIRST, MIDDLE		SOCIAL SECURITY NUMBER		AREA CODE-OFFICE TELEPHONE	
				504/624-4100	
DEPARTMENT-OFFICE-DIVISION/BUILDING-CITY-PARISH			ORGANIZATION ID/DIVISION UNIT NUMBER		
DHH-OADA-FTC-MANDEVILLE-ST. TAMMANY			090735100/09952/000		
DIRECT SUPERVISOR'S NAME		OFFICIAL JOB TITLE OF SUPERVISOR		PERSONNEL OFFICE TELEPHONE	
ARTHUR HYDE		ADMINISTRATIVE DIRECTOR 4		(504) 624-4100	

### 4 SUPERVISORY ELEMENTS

If supervisory level or higher, check all elements that apply to this position. List only official Job Title(s) of position(s) DIRECTLY supervised. After each Job Title, note the number of positions supervised in parenthesis. Example - Clerk 2 (2) etc.

**NUMBER OF**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> DETERMINES WORK ASSIGNMENTS | <input type="checkbox"/> RECOMMENDS HIRING/PROMOTIONS | <input type="checkbox"/> TRAINS STAFF   |
| <input type="checkbox"/> REVIEWS AND APPROVES WORK   | <input type="checkbox"/> EVALUATES PERFORMANCE        | <input type="checkbox"/> APPROVES LEAVE |

0	DIRECTLY SUPERVISED
0	INDIRECTLY SUPERVISED
0	TOTAL SUPERVISED

### 5 EQUIPMENT

List the machines, equipment, tools most frequently used.

% TIME USED	MACHINES/EQUIPMENT/TOOLS	MAKE	MODEL NUMBER	TONNAGE/HORSEPOWER	MAJOR PURPOSE
5%	COPIER/FAX	TOSHIBA/PANAFAX			COPY/FAX MATERIALS FOR GROUPS, MODULES & COUNSELING INFORMATION
10%	COMPUTER	DELL			DATA BASE/REPORTS/MISCELLANEOUS

### 6 SIGNATURES

### 7 CONCURRENCE

Complete this section only AFTER this SF-3 has been reviewed and signed by BOTH Direct Supervisor and Appointing Authority.

EMPLOYEE	DATE	Employee concurs with all comments made in Section 10. EMPLOYEE, DO NOT COMPLETE THIS SECTION IF SECTION 10 IS BLANK.	<input type="checkbox"/> YES <input type="checkbox"/> NO INITIALS
DIRECT SUPERVISOR	1-25-00	Supervisor concurs with all statements made on this SF-3, including comments of Appointing Authority/Designee/Other in Section 10.	<input type="checkbox"/> YES <input type="checkbox"/> NO INITIALS
APPOINTING AUTHORITY/DESIGNEE INDICATE TITLE	1/25/00	Appointing Authority/Designee concurs with all statements made on this SF-3, including comments of supervisor/Other in Section 10.	<input type="checkbox"/> YES <input type="checkbox"/> NO INITIALS



State specifically the change(s) that have occurred to this position or other reason(s) for appealing. Give approximate date(s) that duties changed or were added. List most important change(s) first.

REASON(S)

**9 COMPARATIVE POSITIONS**

List positions that have similar or identical duties to this position. If none, put N/A in space below.

INCUMBENT NAME	POSITION NUMBER	OFFICIAL JOB TITLE
a MICHAEL METZ	134437	SOCIAL SERVICES COUNSELOR/OPRADA
b JANICE RUSHING	133311	SOCIAL SERVICES COUNSELOR/OPRADA
c MAUREEN BRADSHAW	177376	SOCIAL SERVICES COUNSELOR/OPRADA

**10 COMMENTS OF:**

If making comments about Section 12, check appropriate box, initial and date after comments. If checking "other" box, sign and indicate title in space provided. IF COMMENTS ARE MADE, EMPLOYEE MUST COMPLETE SECTION 7 AND MAY ALSO RESPOND IN THIS SECTION. Attach additional paper if necessary.

<input type="checkbox"/>	SUPERVISOR	
<input type="checkbox"/>	APPOINTING AUTH./DESIGNEE	
<input type="checkbox"/>	EMPLOYEE	
<input type="checkbox"/>	OTHER	OTHER'S SIGNATURE AND TITLE

**11 ORGANIZATIONAL CHART**

All employees MUST complete this section. Indicate subject position's subordinate(s) if applicable. List only those subordinates DIRECTLY supervised. Other types of supervision should be explained in Section 12. In each box indicate Name, Position Number and Official Job Title. Position Numbers and Job Codes should be provided by the Agency Personnel Office.

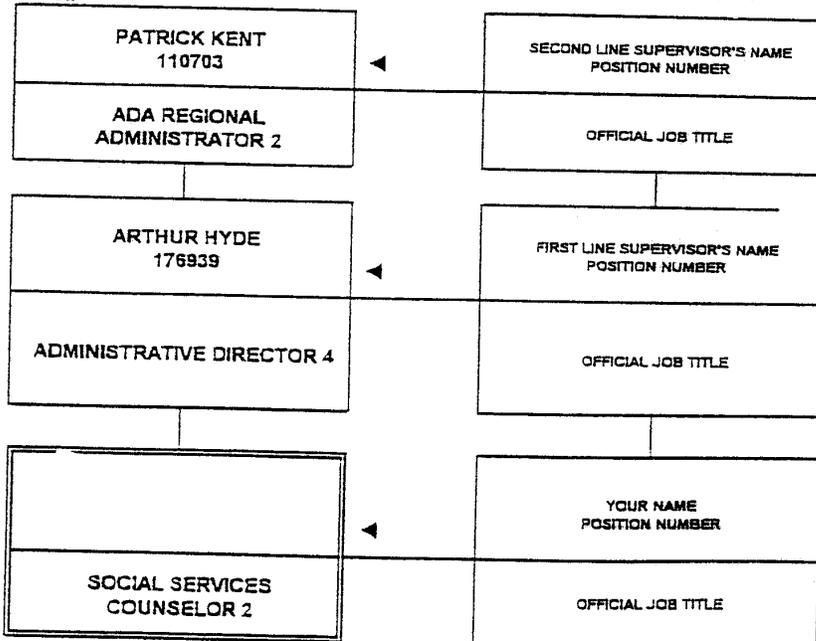
ORGANIZATION CHART MUST AGREE WITH NUMBER OF STAFF SUPERVISED IN SECTION 4

1) If you directly supervise EIGHT OR LESS employees, you must complete the organizational chart on this page.

2) If you directly supervise NINE OR MORE employees, DO NOT complete the org. chart on this page. Complete and attach your chart to this SF-3 and check box below.

3) In addition to the org. chart required in this section, you may also submit a more comprehensive org. chart showing indirect subordinates, etc. This additional chart must include employees' names, position numbers and job titles. If an additional chart is submitted, check box below.

Organizational chart attached.




... describing the function of work or reason why the position exists. List duties indicating the percent of time spent for ... area of responsibility. When applicable, describe the physical demands and/or unavoidable hazards which occur while performing the duties listed below. Attach additional pages if necessary.

## RESPONSIBILITIES

If duty(s) is/are short-term/temporary and nonrecurring, note beginning and ending dates and percent of time required to perform the duty(s). Begin the writing of your short-term duty statement(s) as follows: (SHORT TERM-beginning and ending dates.)-Example: (SHORT TERM-1/1/88 thru 1/6/88) | count...

% MUST TOTAL 100%	LIST DUTIES IN DECREASING ORDER OF IMPORTANCE/COMPLEXITY, THE NEED FOR SPECIAL LICENSE, POLICE COMMISSION, KNOWLEDGE OR TRAINING MUST BE INDICATED BELOW, IF APPLICABLE.
-------------------	--

## POSITION #134426, SOCIAL SERVICES COUNSELOR 2 FONTAINEBLEAU TREATMENT CENTER

### Occupational Summary:

Provides professional assessment and initial screening interviews with all referrals to a 66-bed OAD residential treatment center.

### Essential Functions:

- 75% Assesses and directs service needs of referrals regarding appropriate levels of treatment, including alternate community treatment services.
- Completes psycho-social assessment based upon client interview and other available admission data, identifying clients strengths, weaknesses, and treatment needs.
  - Works closely with an inter-disciplinary team of professionals to determine client needs based upon psychiatric, medical and other indicators.
  - Develops treatment plans with emergency admits and provides crisis counseling and intervention as needed.
  - Provides group therapy and individual counseling as needed. Revises treatment plans as needed.
- 20% Provides didactic lectures and client education to enhance knowledge and skills in the areas of self-esteem, assertion training, relapse prevention, co-dependency, problem solving, anger management emotions, grief, stress reduction, and the twelve step program.
- Provides education to clients and families on the disease concept of chemical dependency.
  - Provides support group referrals to families as needed.
  - Assists in training new counselors.
- 3% Compiles information and provides statistical reports to director, regional headquarters, and states office. Maintains client database for facility.
- 2% Attends meetings, workshops and seminars to continue educational needs.

## Degree of Physical demands (Strength)

**Sedentary Work:** Exerting up to 10 pounds of force occasionally and/or a negligible amount of force frequently or constantly to lift, carry, push, pull, or otherwise move objects, including the human body. Sedentary work involves sitting most of the time, but may involve walking or standing for brief periods of time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.

## Types of Physical Demands

**Seeing:** The ability to perceive the nature of objects by the eye. The important aspects of vision are:

- a. Acuity, far - Clarity of vision at 20 feet or more.
- b. Acuity, near - Clarity of vision at 20 inches or less.
- c. Field of Vision - Observing an area that can be seen up and in a given point. This factor is important when job performance requires seeing a large area while keeping the eyes fixed.

**Talking:** Expressing or exchanging ideas by means of the spoken word. Talking is important for those activities in which workers must impart oral information to clients or to the public, and in those activities in which they must convey detailed or important spoken instructions to other workers accurately, loudly, or quickly.

**Hearing:** Perceiving the nature of sounds. Hearing is important for those activities which require ability to receive detailed information through oral communication, and to make fine discriminations in sound, such as when making fine adjustments on running engines.

**Listed below are the typical Working Conditions generally associated with this type of work:**

The Worker is Subject to Inside Environmental Conditions: Protection from weather conditions but not necessarily from temperature changes.

**Listed below are the typical Environmental Conditions (Hazards) generally associated with this type of work:**

Potential exposure to infectious diseases.

Exposure to potentially violent and aggressive clients.

**Machines, Tools, Equipment, and Work Aids which may be representative but not all inclusive, of those commonly associated with this type of work.**

Camera, electronic equipment, tape recorder, charts, diagrams, federal and state statute books, reference books, arts and crafts materials, manuals.

f. interfere with department reviews, inspections, investigations, hearings, or related activity. This includes taking action to discourage or prevent someone else from cooperating with the activity.

B. General

1. Referrals. Facility personnel shall report violations of laws, rules, and professional and ethical codes of conduct to HSS and to appropriate licensing board when applicable. The facility shall maintain records and have written policies governing staff conduct and reporting procedures that comply with this §7419.

2. Staffing. A facility shall employ sufficient and qualified staff to meet the requirements and responsibilities required by licensure as well as the needs of each client being served.

3. Qualifying Experience. Any experience used to qualify for any position must be counted by using one year equals 12 months of full-time work. At no time will any professional staff be considered full time at two facilities.

4. Caseloads. All counselors (including full time, part time, and those who also have other duties) must have caseloads appropriate to available time, which shall be determined by the needs of the active clients and the level of treatment being provided.

5. Multiple Positions. A person may hold more than one position within the facility if that person is qualified to function in both capacities, and the required hours for each job are separate and apart for each position.

6. Credential Verification. Facility administration is responsible for assuring that all credentials are from accredited institutions, legal, and verified to deter the fraudulent use of credentials.

7. Clinical Services Director. A qualified professional supervisor or qualified professional counselor shall be designated, in writing, as responsible for supervising all treatment services and programs.

8. Contract Staff Services. Formal written agreements with professionals or other entities to provide services which may or may not be directly offered by facility staff are required for contract services. Both parties shall review and document review of each agreement annually.

C. Training

1. Orientation. Each employee shall complete at least eight hours of orientation prior to providing direct client care/contact. The content of the basic orientation provided to all employees at the time of employment with annual review shall include the following:

- a. policies/procedures and objectives of the facility;
- b. duties and responsibilities of the employee;
- c. organizational/reporting relationships;
- d. ethics and confidentiality;
- e. client's rights;
- f. standards of conduct required by the facility;
- g. information on the disease process and expected behaviors of clients;
- h. emergency procedures including disaster plan, evacuation;
- i. principals and practices of maintaining a clean, healthy and safe environment;
- j. additional information as appropriate including duties, type of client, etc;
- k. universal precautions;

- l. violent behavior in the workplace;
- m. abuse/neglect;
- n. overview of Louisiana licensing standards;
- o. prevention overview; and
- p. basic emergency care of ill or injured clients until trained personnel can arrive.

2. In-Service. This educational offering shall assist the direct care/contact workers to provide current treatment modalities, and serve as refresher for subjects covered in orientation. Documentation of attendance for at least three hours per quarter is required. Additional educational programs are encouraged.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1458 (July 2000).

§7421. Personnel Qualifications/Responsibilities

A. Qualified Professional Supervisor (QPS)

1. Qualifications

a. The following professionals who are currently registered with their respective Louisiana board:

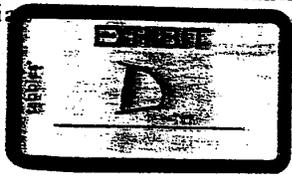
- i. licensed psychologist;
- ii. licensed clinical social worker;
- iii. licensed professional counselor.

b. The following professionals who are currently registered with their respective Louisiana boards and who can demonstrate two years of professional level counseling experience, and one year of professional level substance abuse counseling, or 90 clock hours (six semester hours) of substance abuse training post-certification, including the twelve core functions from an accredited college or university, or an educational provider approved by DHH may function as QPS. Documentation shall be available from the facility upon request. The professionals eligible to become QPS's are listed below:

- i. board certified substance abuse counselor (BCSAC);
- ii. licensed physician (MD);
- iii. registered nurse (RN);
- iv. board-certified compulsive gambling counselor (BCCGC);
- v. Masters-prepared social worker/counselor;
- vi. Masters-prepared counselor under the supervision of a licensed psychologist, licensed professional counselor (LPC), or licensed clinical social worker (LCSW).

2. Responsibilities. The QPS shall:

- a. provide direct client care utilizing the twelve core functions of the substance abuse counseling and/or specific functions related to professional license;
- b. serve as resource person for other professionals counseling substance abuse clients;
- c. attend and participate in care conferences, treatment planning activities, and discharge planning related to any caseload and/or clients of professionals being supervised;



d. provide on-site and direct professional supervision of treatment and any counselor-in-training, including but not limited to, activities such as individual/group counseling, or educational presentations;

e. provide oversight and supervision of such activities as recreation, art/music, or vocational education, to assure compliance with accepted standards of practice;

f. function as patient advocate in all treatment decisions affecting the client;

g. be designated as the clinical services supervisor unless other QPS's are employed and available at the facility) and/or actively supervise QPC if program does not require full-time supervisor;

h. assure that facility adheres to rules and regulations regarding all substance abuse treatment, e.g., group size, caseload, referrals, etc.;

i. provide only those services which are appropriate to their profession.

#### B. Qualified Professional Counselor (QPC)

1. Qualifications. A QPC is a professional who is employed in the treatment of abuse/addiction disorders and who is currently licensed/certified by the appropriate Louisiana board as one of the following professionals:

a. board certified substance abuse counselor (BCSAC);

b. Licensed clinical social worker (LCSW);

c. licensed professional counselor (LPC);

d. licensed psychologist;

e. licensed physician (MD);

f. registered nurse (RN);

g. board-certified compulsive gambling counselor (BCCGC);

h. Masters-prepared social worker/counselor;

i. Masters-prepared counselor under the supervision of a licensed psychologist, licensed professional counselor (LPC), or licensed clinical social worker (LCSW).

2. Responsibilities. The QPC shall:

a. provide direct care to clients utilizing the 12 core functions of substance abuse counseling and may serve as primary counselor to specified caseload;

b. serve as resource person for other professionals and paraprofessionals in their specific area of expertise;

c. attend and participate in client care conferences, treatment planning activities, and discharge planning;

d. provide on-site and direct professional supervision of any paraprofessional or inexperienced professional;

e. function as the patient advocate in all treatment decisions affecting the client;

f. prepare and write notes/other documents related to client recovery, e.g. assessment, progress notes, treatment plans, etc.; and

g. provide only those services that are appropriate to their profession.

#### C. Board Certified Prevention Specialist (BCPS)

1. Qualifications. Prevention Specialists shall be certified in accordance with requirements promulgated by the LSBSCAC.

2. Responsibilities. Duties include:

a. program coordination;

b. education and training;

c. community organization;

d. public policy;

e. planning and evaluation; and

f. professional responsibility.

#### D. Counselor in Training (CIT)

1. Qualifications:

a. registered with the professional licensing board and in good standing at all times;

b. actively pursuing certification at all times; and

c. designated in writing as CIT by the facility and performing according to a written training plan under the auspices of the facility.

2. Responsibilities. The CIT shall:

a. provide direct client care utilizing the core functions of substance abuse counseling only under the on-site supervision of facility employed QPS/QPC;

b. not identify nor represent himself/herself as counselor;

c. not perform any duties of counselor independently, without on-site supervision of facility employed QPS/QPC;

d. never identify themselves as a consultant to any substance abuse facility.

3. Exceptions. CITs who have documented evidence of at least 40 hours of training (including orientation and the 12 core functions of substance abuse counseling) and 120 hours of direct supervision by QPS/QPC may perform counseling functions when the QPS/QPC is on duty or on-call and available for immediate assistance if needed.

E. Personnel in Training. Includes all students, persons working toward professional level licensing or certification in any profession listed in §7421 B, C, D, or F.

1. Qualifications:

a. current registration with appropriate LA Board when required, and in good standing at all times;

b. actively pursuing professional level preparations at all times; and

c. designated in writing by facility, and performing in accordance with a written training plan under the auspices of the facility.

2. Responsibilities. Duties include:

a. providing direct client care utilizing the standards developed by the professional board, and only under the direct supervision of the appropriate QPC or QPS;

b. providing only those services in which the student has been properly trained and deemed competent to perform by the supervising QPC or QPS.

F. Support Professional Staff. Support professional staff includes employees, consultants, contract employees, or volunteers who provide services in the capacity of their profession, including but not limited to, pharmacists, dietitians, physicians, nurses, social workers, teachers, counselors, or psychologists.

1. Qualifications:

a. currently unencumbered license/registration with appropriate Louisiana Board (may be approved specifically by licensing Board, if encumbered); and

b. a professional as recognized by the certifying entity, rather than assistant, aide, technician, associate, etc.

2. Responsibilities. Duties include:

a. those within their respective board's delineated scope of practice only.

b. in-service, staff training, consultation to paraprofessionals and professionals and direct supervision, as needed to improve the overall quality of care being provided.

#### G. Volunteer

##### 1. Qualifications. Volunteers must be:

- a. appropriately screened and supervised to protect clients and staff;
- b. oriented to facility, job duties, other pertinent information;
- c. appropriately trained to meet requirements of duties assigned;
- d. given a job description or written agreement; and
- e. identified as volunteers.

##### 2. Responsibilities. Duties include:

- a. direct care activities only when qualified facility personnel present;
- b. errands, recreational activities;
- c. individual assistance to support services; and
- d. other appropriately assigned duties.

H. Medical Director. Every facility licensed shall have a designated medical director. Primary prevention programs are not required to designate a medical director.

1. Qualifications. The medical director shall have a current, valid license to practice medicine in Louisiana.

##### 2. Responsibilities. Medical director shall:

- a. provide services required by facility to meet the Standards;
- b. provide oversight for facility policy/procedure and staff regarding the medical needs of the clients being served in accordance with the current standards of medical practice; and
- c. retain ultimate responsibility for directing the specific course of medical treatment for all clients.

AUTHORITY NOTE: Promulgated in accordance with R.S. 40:1057.1-9, redesignated R.S. 40:1058.1-9.

HISTORICAL NOTE: Promulgated by Health and Human Resources Administration, LR 2:154 (May 1976), amended by the Department of Health and Human Resources, Office of Hospitals, Bureau of Substance Abuse, LR 3:16 (January 1977), amended by the Department of Health and Human Resources, Office of the Secretary, Division of Licensing and Certification, LR 12:26 (January 1986), amended by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 26:1459 (July 2000).

### §7423. Health and Safety

#### A. Infection Control

1. Facility shall protect staff, clients, and visitors from the potential/actual harm of infectious disease by the following policies and procedures.

- a. Universal Precautions. Education, practice, and implementation shall be applied.
- b. Infection control program to report, evaluate, and maintain documentation pertaining to the spread of infectious disease, including data collection and analysis, corrective actions, and assignment of responsibility to designated medical staff person.
- c. Strict adherence to all sanitation requirements.

2. Facility shall establish and maintain a clean and neat environment by the implementation of the following housekeeping policies and procedures.

- a. Supplies/equipment shall be available to staff/clients.

b. Consistent and constant monitoring and cleaning of all areas of the facility shall be practiced.

c. Facility may contract for services necessary to maintain a clean and neat environment.

d. Directions shall be posted for sanitizing both kitchen and bathroom areas.

##### 3. Domestic animals shall be:

- a. properly vaccinated; and
- b. managed in a way consistent with the goals of the program and the needs of the client, including those with allergies.

#### B. Sanitation

1. Food and waste shall be stored, handled, and removed in a way that will not spread disease, cause odor, or provide a breeding place for pests.

2. If there is evidence of pests, the facility shall contract for pest control.

3. Poisonous, toxic and flammable materials shall be labeled, stored, and used safely.

#### C. Safety

##### 1. Environmental

a. The entire facility, including grounds, buildings, furniture, appliances, and equipment, shall be structurally sound, in good repair, clean, and free from health and safety hazards.

b. The facility shall comply with Americans with Disabilities Act (ADA).

c. The environment shall enhance client dignity and confidentiality.

d. The facility shall have adequate space, furniture, and supplies for the services described in the program description, including:

- i. an adequate number of accessible drinking units;
- ii. an adequate number of sanitized non-disposable or disposable hot/cold cups;
- iii. clean, comfortable and appropriately furnished areas for various activities.

e. The facility shall have private counseling space. Staff shall have office space that is not required for other simultaneous activities.

f. The facility shall prohibit weapons of any kind on-site.

2. Evacuation/First Aid. The facility shall respond effectively during a fire or other emergency. Every program shall:

- a. have emergency evacuation procedures that include provisions for the handicapped;
- b. hold fire drills on each shift at least quarterly and correct identified problems promptly;
- c. be able to clear the building safely and in a timely manner at all times;
- d. post exit diagrams conspicuously throughout the program site;
- e. post emergency numbers by all phones; and
- f. have adequate first aid supplies that are visible and easy to access at all times.

3. Facility shall take all precautions possible to protect the staff, clients and visitors from accidents of any nature.

4. Facility shall have a written facility specific disaster plan, and staff shall be familiar with the contents of the plan as well as the location.