



NATIONAL AUTHORITY FOR THE CAMPAIGN AGAINST ALCOHOL AND DRUG ABUSE

INSPECTION AND MONITORING CHECKLIST FOR TREATMENT AND REHABILITATION CENTRES IN KENYA: LEVEL 3

SECTION I		Date		
Full Name of the treatment facility				
Registration Number				
Year of registration		Name of Registering bodies		
NACADA Accreditation Number		NHIF Number		
Location	County	Sub-County		Physical
Postal Address				
Institutional telephone number				Treatment Period
Website				Cost per Month
Institutional e-mail				
Name of the Proprietor and contact (include , relevant training and period of service)			Qualifications	Period of service at the facility
Name of Centre Administrator (Contact and relevant training and period of service)				

Registered as? (tick where applicable)	1. Public Health facility <input type="checkbox"/> 2. Private health facility <input type="checkbox"/> 3. Business - <input type="checkbox"/> 4. Non-Governmental Organization (NGO) <input type="checkbox"/> 5. Faith Based Organization (FBO) <input type="checkbox"/> 6. Charitable Trust <input type="checkbox"/> 7. Other (Specify) <input type="checkbox"/>			
	Do you have a Valid Tax Compliance Certificate YES <input type="checkbox"/> NO <input type="checkbox"/>			
Clients	Current	M	F	Total
	Total Clients treated in the last one year	M	F	Total
	Youngest		Oldest	
Common substance(s) of abuse				
Business Permit Number		Total number of full-time staff		
Does the facility submit Quarterly reports to NACADA? (10 marks)	1 Quarter Report= 2.5 Marks 2 Quarters Reports= 5 Marks 3 Quarters Report = 7.5 Marks 4 Quarters Reports= 10 Marks			
Levels of care offered	Level 1: Prevention, Community Outreach, and Early Intervention			
	Level 2: Intensive outpatient treatment (non-residential treatment) Targets clients with AUDs and SUDs diagnosis and their treatment need can be met at the outpatient level as described in ASAM criteria.			
	Level 3 Residential/Inpatient Services - Includes residential, clinically managed residential and medically managed residential services as described in ASAM level III services and medically managed intensive inpatient services described in ASAM Level IV services			
	Level 4: Recovery Management - Includes follow up outpatient services, halfway houses, transitional houses, community/significant others support, re-integration services and self-help programmes			

PUBLIC HEALTH SECTION

Standard statement	Criteria	Compliance	
		Yes	No
Water, Sanitation and Hygiene Requirements	Do you have a certificate of change of user from residential to business?		
	What is the source of your water? (Piped, borehole, hand-dug, well, river, spring or rain)		
	Is it suitable for human consumption? If yes, how do you treat the water		
	Do you have sufficient water storage?		
	Are there adequate water points in the premises i.e. stand pipes, wash hand basins, sinks, bathrooms?		
	Is there provision for safe disposal of waste water?		
	Is there provision for separate (male and female) toilets/bathrooms with water and soap for hand washing?		
	If yes to the above, are they adequate i.e., at least 1 toilet/latrine for up to 25 males' residents and 15 female residents?		
	Is there provision for sanitary bins in every toilet for females?		
	Is there provision for cleansing materials (tissue papers or water containers) in every toilet?		
	Are there adequate bathrooms i.e., at least 1 bathroom for up to 25 residents?		
Ventilation and lighting requirement	Is the height of all living rooms e.g., sitting, dining, bedroom at least 10 feet?		
	Are there windows in every room?		
	Are the windows openable to the outside, at least 10% openable window area to the floor area ratio?		
	Are all doors openable to the outside?		
	Are all rooms adequately lit through natural light?		
	Is there 1.5 by 1.5 m per person floor area, per occupant of all rooms including bed spacing?		
Vector and vermin control requirements.	Are the premises protected against access to disease vectors and vermin?		
	If so, is there: <ul style="list-style-type: none"> ▪ Adequate rat proofing including traps, rubbers, wire mesh? ▪ Adequate protection against mosquitoes? 		

	<p>Is there evidence that?</p> <ul style="list-style-type: none"> ▪ All water storage tanks, reservoirs and receptacles are covered? ▪ Discarded containers, broken bottles, broken pots, discarded coconut shells, tires are properly disposed of? ▪ All septic tanks, manholes, cesspits etc. are covered? ▪ There is control of overgrown vegetation? ▪ That fumigation is done every three months? 		
Structural requirement	<p>Are the premises constructed of permanent and semi-permanent building materials? If not permanent, are the floors, walls and roofing durable?</p> <ul style="list-style-type: none"> ● Are there separate sleeping areas for male and female clients? ● Are windows kept well without cracks and breakages? ● Do windows have curtains or blinds ● Are cracks in the walls repaired? ● Is the ceiling well maintained to avoid sagging? ● Is there evidence of occupational safety? ● Are all the rooms labeled? 		
Beds and Beddings	<ul style="list-style-type: none"> ● Do you have stable beds, firm mattresses and clean beddings? ● Do you have adequate beddings for every client? ● Are clients prohibited from having meals and soft drinks in their bedrooms? 		
Food preparation and handling	<ul style="list-style-type: none"> ● Do you have food and hygiene policy control? ● Does the facility have a hygiene protocol? ● Is there a clearly documented duty roaster? ● Is the kitchen clean and tidy? ● Do the food handlers have appropriate attire? ● Do the food handlers have a valid medical certificate? ● Is the food cooked hygienically and according to expected standards? ● Is the food stored in accordance with public health statutory requirements? ● Are clients given a minimum of three nutritious meals a day? ● Does the centre have proof of regular inspection and certification of the kitchen and food preparation area(s) from the local Public Health Office? ● Are food handlers medically certified by the local authority every six months? 		
Solid Waste Management	<ul style="list-style-type: none"> ● Do you separate kitchen bins for degradable and non-degradable waste? ● Do you have standard operating procedures for solid waste management? ● Do you have a solid waste holding area? 		

Cleanliness	<ul style="list-style-type: none"> ● Are all walls clean, brightly painted without smudges? ● Are the floors smooth and clean? ● Are ceiling boards well cleaned and painted where applicable? ● Is their general compound clean and neat? ● Is the facility free of odour? 		
Tobacco Control	<ul style="list-style-type: none"> ● Do you have tobacco control policy and operating procedures to support, monitor tobacco cessation and treatment? ● Do you offer tobacco cessation and treatment services? ● Are your clinical staff trained on tobacco cessation? ● Do you screen clients and take history for tobacco use during admission? ● Do you have signages' that prohibit tobacco use in the facility? ● Do you have a mechanism to prevent access to tobacco products at the facility? 		
Safety and Security	<ul style="list-style-type: none"> ● Does the centre have mechanisms and procedures to regulate and monitor searching for weapons or substances in a right-sensitive manner? ● Do you have a security guard at the gate? ● Do you have fire safety equipment with updated inspection records? ● Do you have a fire alarm system? ● Do you carry out routine fire drills? ● Do you have an emergency invention policy? ● Do you have a labeled fire assembly point? ● Do you have signage for the emergency fire exit? ● Does the facility guarantee security and safety for staff ? 		
Total (Consist of 30%)			

STANDARD STATEMENT	CRITERIA	COMPLIANCE	
		YES	NO
LEVEL3: RESIDENTIAL/INPATIENT SERVICES: Includes arrange of services including: 3.1 – Clinically managed low intensity residential services 3.3 Clinically managed population-specific high intensity residential services for adults only. 3.5 Clinically managed residential services 3.7 Medically monitored residential services high intensity services.			
Relevant professionals	Do you have qualified professional staff including but not limited to? <ul style="list-style-type: none"> ● Certified addiction counselors ● Psychologist ● Nutritionist ● Nurse ● Social worker ● Clinical Officer ● Psychiatrist ● General physician 		
	Have all professionals signed the relevant professional code of ethics?		
	Do your counselors have regular clinical supervision?		
Legislation	Do you have copies of all applicable legislation (as listed in the standards document)? Have they been provided to relevant staff?		
	Have staff been given appropriate training and support that maximizes their ability to implement the relevant legislation effectively?		
Intake /Admission	Does every client receive an orientation session which includes policies and regulations rules, client's rights charter?		
	Does the center have clear, documented admission criteria that guide the admission of clients?.		
	Have you signed an agreement with guardians or sponsors showing amounts to be paid?		

	Do you seek informed written consent from all clients or next of kin prior to the onset of any treatment in accordance with the Mental Health Act		
Screening & assessment:	Do you have standard operating procedures to support, monitor and regulate the screening and assessment process?		
	Do your clients receive a comprehensive, accurate, timely assessment of their physical, psychiatric and psychosocial spiritual functioning within 72 hours of admission by a qualified and experienced professional and a specified regular review of such functioning? (Like ASI)		
	Are the results of each client's initial comprehensive assessment reviewed after (2 weeks) and are they progressively reviewed after every two weeks by the multi-disciplinary		
	Are the client's initial and progressive assessments recorded in the clients' case records?		
Treatment Planning	Does each client have an individualized treatment plan based on; <ul style="list-style-type: none"> ● The nature of their substance addiction/dependency and/ or other psychiatric or psychological conditions (symptoms, severity and history), ● Their personal preferences, strengths and characteristics, ● Their social needs and circumstances? 		
	Do your clients participate in the development and regular review of treatment plans?		
Counseling	Do your addiction counselors/professionals have the knowledge, skills and competencies to undertake the following? Evidenced by documentation <ul style="list-style-type: none"> ● Counseling (individual, group and family), ● Screening ● assessment ● Case management, ● Crisis intervention, ● Client & family education, ● Reports and record keeping, ● Consultation with other professionals and ● Referral 		
	Are all clients assigned a primary counselor who is a professional addiction profession/ counselor or psychologist?		

	Does your centre stipulate the optimum and maximum caseload for each primary counselor (e.g. 20 clients) where the ratio is 1:15 for those using TC model; 1:10 for Matrix model; and 1:7 for Minnesota model?		
Total Marks 15%			
Pharmacotherapy and medical care	Is medication and other medical care provided in a timely, accessible and professional manner in accordance with statutory requirements and client safety?		
	Is emergency medical and mental health available to clients 24 hours a day, 7 days a week?		
	Is a medication record kept in the clients' case records in accordance with statutory requirements?		
	Is medication administered by a registered professional nurse or medical practitioner according to the documented instructions of the attending doctor/psychiatrist?		
	Are clients carefully monitored by professional staff to promptly respond to adverse effects of prescribed and non-prescribed medication?		
	Are all your medicines kept in a locked storage and controlled substances in a locked box inside a locked cabinet.		
	Do you have a well-managed emergency treatment and first aid administration?		
	Are your staff skilled and equipped to use the emergency and first aid equipment?		
	Are records for medicines accurately maintained according to statutory requirements?		
	Do you have arrangements for disposal of medical waste and expired drugs?		

	<p>Does your centre have documented up-to-date policies and procedures to regulate pharmacotherapy and medical care? Do your policies and procedures on the following;</p> <ul style="list-style-type: none"> • Handling of prescription medicines and the use of over-the-counter medications • Intoxication and overdose • Detoxification and voluntary withdrawal • An up-to-date list of staff qualified and authorized to prescribe and administer drugs • Medicine administration, including timing, venues and supervision • Storage, control, accountability, inspection and documentation of medicines (according to statutory and professional requirements) • Monitoring of adverse reactions and medication errors (pharmacovigilance) • Poly-drug usage and related complications • Assessment and management of HIV/AIDS, tuberculosis and hepatitis • Emergency procedures 		
Detoxification	Does your centre have written policies and procedures on Detoxification (including voluntary withdrawal)		
	<i>Do your policy and procedures include a minimum of the following components of care:</i>		
	<ul style="list-style-type: none"> • Assessment and placement procedures • 24-hour professional nursing and easily accessible medical backup • Standardized, official, best-practice detoxification protocols • Client background information • Client participation and informed consent in detoxification decision-making process • A documented individualized detoxification treatment plan (including referral if required) based on detoxification protocols, the clients 'individual needs and preferences and the center's capacities • A safe, quiet and comfortable space for the detoxification process • Adequate medically monitored and supportive care 		
	Is there a stable bed for detoxification?		
	Is there a water dispenser and a sink with clean running water?		
	Is there adequate, well ventilated, properly lit, permanent and secure room for detoxification?		
	Is there a weighing scale in the detoxification room?		
	Is there an emergency tray stationed at the detoxification room?		
Are there colour coded waste bins?			
Does the facility have syringe disposal safety boxes?			
Is there an MOU for safe disposal of medical waste?			

	Do you have a safe disposal for medical waste? If not, do you have an MOU with a service provider?		
	Does the facility adhere to guidelines on drugs management? Pharmacotherapy (as per protocol for medicated detoxification) including adequate, individual-specific prescribed medicines, Emergency care and equipment, including referral to hospital, if required		
	Do you provide feedback and support to family and significant others if appropriate?		
Total marks 10%			
structured Programs and daily activities	Do clients participate in a structured treatment and rehabilitation program that effectively and safely addresses treatment goals and is supported by appropriate activities and routines?		
	Does the treatment and rehabilitation program describe: Structured daily and weekly activities Individual and group sessions Stages or phases of treatment Psycho education for clients and family and related goals in a time-defined program?		
	Does the structured program consist of a minimum of individual, group counseling/therapies, opportunities for individual and family therapies/counseling and organized group activities such as sport, health education, recreation and creative activities?		
	Does your treatment center provide structured ongoing Programme that provides the following: <ul style="list-style-type: none">▪ Information and practical support to maintain a healthy, alcohol and drug-free lifestyle (e.g. exercise, better nutrition, stress management)?▪ Information and practical support to prevent the onset and spread of HIV/AIDS and other sexually transmitted and infectious diseases (e.g. voluntary counseling and testing, risk reduction education regarding needle use)?▪ Access to reproductive health care and support of pregnant clients?▪ Access to nutritional support and supplements for chronic alcohol-dependent clients?		
	How often do you implement individual, group and family psycho education?		
	Are the treatment program, daily activities and expectations documented and communicated to clients, families and significant others?		

	Are there opportunities or forums existing for clients to participate in decision making on the daily activities and other issues that affect the center and client community?		
	Does the center have documented policies and procedures that it implements to regulate and guide daily activities at the center which cover the following: <ul style="list-style-type: none"> • Client waking and sleeping times • Telephone use for private conversations • Visits from families and significant others, friends, religious leaders and legal counsel • Visits and outings beyond the Centre • Conduct of clients and group norms 		
	Has the management formulated a specific program model and philosophy for their formal treatment and rehabilitation program?		
	Are these program models and philosophies regularly reviewed and updated in accordance with internationally accepted standards?		
	Are clients involved in non-exploitative work including vocational skills training activities (e.g. meal preparation, cleaning of residential facilities) as may be prescribed in the treatment program?		
	Are clients given a minimum of three nutritious meals a day?		
	If clients are allowed to participate in preparing meals, is it done according to documented client labor policies, health regulations and food hygiene?		
	Does the center have proof of regular inspection and certification of the kitchen and food preparation area(s) from the local authority or public health officer?		
	Are the food handlers medically certified by the local health authority every six months?		
Marks 15%			
Continuing Care/Aftercare program	Are all clients assessed and reviewed by the multidisciplinary team towards the end of treatment to determine their readiness for discharge and to facilitate discharge planning?		
	Are relevant referral agencies supplied on time with a signed and dated discharge summary to facilitate continuity of care for all clients leaving the centre?		
	Is a copy of this discharge report kept in the client's case record that includes a minimum of the following:		

	<ul style="list-style-type: none"> • Clients 'personal details • Personal history and family/social background • Treatment plan and progress/participation at the centre • Reason for discharge (e.g. completed programme or non-compliance) • Continuing care needs and preferences (discharge plan) 		
	Is input from the family, employers and significant others in discharge planning sought?		
	Prior to discharge, does your centre link your clients to their original referral agency and any other community resource e.g. social workers and self-help groups?		
	Is discharge information provided on discharge, expulsion or leaving against staff advice for all clients' families and significant others, as appropriate and based on the consent of the client?		
	Is re-admission to the centre for clients who have been transferred to a specialized mental health care facility only considered if directed as such by the written report of a doctor or psychiatrist?		
	Do you have policies and procedures for clients to express their grievances?		
	If yes, do clients have access to a fair investigation and hearing to determine their culpability when suspended or expelled for the violation of centre rules and regulations?		
	Are cases of absconding recorded into the occurrence book immediately upon detection?		
	Do you have an abscondee form that describes the client's physical features, mode of dressing, perceived mental status, date and time of absconding, staff on duty at the time and their designation?		
	Is the abscondee form taken to the nearest police station where the report is filed and stamped and a copy retained in the client's file?		
	Are the family or significant others informed?		
	Do you have defined and documented criteria and procedures for referring clients in need of alternative services, for example, outpatient treatment, detoxification, adverse drug reactions, attempted suicide, emergency medical care and psychosis?		
	Do mechanisms exist for clients to discharge themselves voluntarily at any stage in the treatment unless judged to be a danger to themselves or are legally committed?		
	Are the consequences of voluntary discharge clear?		

	Is a copy of the discharge plan kept in the clients' records?		
	Does the centre have policies and procedures to support the readmission of clients?		
	Are the treatment goals and programmes for readmitted clients clearly stipulated in accordance with their treatment needs?		
Marks 10%			
Recovery Management	Do you have policies and procedures on a continuing/aftercare services?		
	Are individualized aftercare needs identified?		
	Do you have an individualized aftercare plan?		
	Do clients participate in the development of the aftercare plan?		
	Do clients participate in one of the following activities during the aftercare period: <ul style="list-style-type: none"> • Outpatient follow up services (walk in or telephone follow up) • Individual or group counseling • Vocational training 		
	Do you have a structured aftercare program?		
	Does your center have evidence of family involvement in aftercare programs?		
	Does the center have qualified personnel for reintegration and aftercare programs eg recovery coaches, peer educators and social workers?		
	Does your center link clients to aftercare programs to either of the following support structures? <ul style="list-style-type: none"> • Outpatient follow up services (walk in or telephone follow up) • Individual or group counseling • Vocational training 		
	Does the center have mechanisms of detecting early relapse eg laboratory screening, toxicology and collateral information?		
	Does your center monitor and evaluate your aftercare program?		
	Does your centre document aftercare services		

	Do your aftercare personnel get supportive supervision?		
Marks-10%			
Comments			

Overall Score 100%			
Name	Designation	Signatures	Date