

**AODA PREVENTION SERVICES RECERTIFICATION APPLICATION
 DHS 75.04**

- This application is to verify that the AODA prevention service complies with DHS 75.04, Wisconsin Administrative Code. By completing and submitting this form, the clinic indicates that it is in compliance with the program standards as required by state statutes.
- Applicants affirm compliance with each "YES" answer. A response of "NO" indicates likely non-compliant practices.
- **Attach additional narrative or plans for improvement for every "NO" answer.**
- To provide the opportunity to begin self-corrections for improved program quality and to mitigate non-compliance citations, applicants may attach explanatory narratives or plans for improvement for negative responses.

Name - Facility					Certification Number			
Address - Physical			City	State	Zip Code	County		
Telephone Number ()			E-mail Address <input type="checkbox"/> <i>May be published in Provider Directory.</i>					
Fax Number ()			Internet Address <input type="checkbox"/> <i>May be published in Provider Directory.</i>					
Name - Contact Person			Telephone Number ()	E-mail Address <input type="checkbox"/> <i>May be published in Provider Directory.</i>				
Name - Person Who Completed this Form			Telephone Number ()	E-mail Address <input type="checkbox"/> <i>May be published in Provider Directory.</i>				
I hereby attest that all statements made in this application and any attachments are correct to the best of my knowledge and that I will comply with all laws, rules, and regulations governing alcohol and other drug abuse intervention services.								
SIGNATURE - Director			Date Signed	Full Name - Director (<i>Print or type.</i>)				

- YES NO **1. DHS 75.04(1) Service Description**
 This AODA prevention service is equivalent to the service description in DHS 75.
- YES NO **2. DHS 75.04(2) General Requirements**
 This service complies with requirements in DHS 75.03 that apply to prevention services.
- YES NO **3. DHS 75.04(3) Required Personnel**
 This service has personnel arrangements sufficient to meet its functional responsibilities.
- YES NO a. Professionals meet the required competencies established by the Department of Regulations and Licensing.
- YES NO b. Paraprofessionals meet the required competencies established by the Department of Regulations and Licensing.
- YES NO c. Staff without previous AODA experience have received in-service training and are supervised in performing work activities by a professional qualified under par.(a).
- 4. DHS 75.04(4) Operation of the Prevention Service**
- YES NO a. This service utilizes all required strategies as described in DHS 75.04(4)(a)1 and 2:
1. Information dissemination
 2. Education
 3. Promotion for health activities
 4. Problem identification and referral
 5. Environmental
 6. Community-based process
- YES NO b. This service has written operational goals and objectives.
- YES NO c. This service has written documentation of service coordination correspondences.
- YES NO d. This service maintains and retains records as required by DHS 75.04
- 5. DHS 75.04(5) Prevention Service Evaluation**
- YES NO a. This service has an evaluation process to measure outcomes of provided services.
- YES NO b. This service evaluates the views of consumers about the provided services and adjusts goals/objectives accordingly.
- YES NO c. This service has a written policy and defined process for feedback of provided services.