

Sample Confirmation Letter to be Typed on Agency Letterhead

This to confirm my appointment with your program on (date) at (time), for an Independent Peer Review. The purpose of the review is to identify innovations and best practices in alcoholism and substance programs, share resources and ideas to help improve the field, and to help meet Federal Block Grant requirements. As you know, the Alcoholism and Substance Abuse Providers of New York State (ASAP) through a contract with the New York State Office of Alcoholism and Substance Abuse Services is coordinating the Independent Peer Review process.

In order to make use of the limited time I will be at your agency it may be helpful to familiarize myself with your agency prior to the review. Any information or materials such as program brochures, blank forms, program materials, or information on the program's structure that you feel would help orientate me for the review could be sent to me prior to the review.

Also, it would be helpful at our initial meeting to include any staff that will participate in the review process and, for treatment programs, to have the identified case records to be reviewed identified and available.

As part of the Peer Review process, programs have the opportunity to identify Quality Improvement Practices (QUIP). Attached is the QUIP that you may wish to complete prior the review so that we may discuss anything you have identified. You must fill out this form in order for the practice to be nominated. The form is also available on the ASAP website in the Peer Review section at www.asapnys.org.

I look forward to learning more about your agency's practices and to share information and ideas on how to better improve the field.

Sincerely,
