ARKANSAS DEPARTMENT OF HUMAN SERVICES
Division of Provider Services and Quality Assurance

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April 13, 2022

United Methodist Children's Home
Attn: Shannon Rouse, Compliance Director
srouse@methodistfamily.org
211 Church Street
Bono, Arkansas 72416

The Division of Provider Services and Quality Assurance of the Arkansas Department of Human Services has contracted with Arkansas Foundation for Medical Care (AFMC) to perform Inspections of Care (IOC) for Inpatient Psychiatric for Under 21. The Medicaid Manual for Inpatient Psychiatric Services for Under Age 21 was used in the completion of this report.

No deficiencies were noted during the Inpatient Psychiatric Inspection of Care (IOC) conducted at the following service site on the specified dates:

United Methodist Children's Home
Provider ID#: [redacted]
Onsite Inspection Date: March 29, 2022

Inspection of Care Summary

Facility Tour:

Upon arrival to facility, AFMC staff was promptly greeted at the entrance by a United Methodist Children's Home staff member and a COVID-19 screening was conducted. AFMC was immediately taken to a conference room where they were met by the Compliance Director.

A tour of the facility was completed with the Compliance Director for the residential unit. All facility staff were observed wearing face mask. The facility environment was extremely clean and well-organized. Therapeutic groups and educational classes were in session. Several staff members were observed interacting calmly with clients throughout the facility. Staff were able to answer questions regarding the facility. There were no concerns found during the facility tour.

Facility Review-Policies and Procedures:

Upon review of the site's policies and procedures, there were no deficiencies noted.

Personnel Records- Licenses, Certifications, Training:

There were 25% of personnel records reviewed, two (33%) professional staff and six (26%) paraprofessional staff. During the review of the personnel records, no deficiencies were noted.

General Observations:

- Provider failed to provide evidence of staff driver's licenses or state identification for all staff, due to not having a regulation stating that it is a requirement.

Clinical Summary

As a part of the Quality of Care survey of the IOC, an active Medicaid fee for service (FFS) client list was requested.

Client/Guardian Interviews:

Provider reported no active FFS Medicaid clients currently admitted at the time of IOC. Therefore, there were no client interviews conducted.

Program Activity/Service Milieu Observation:

During the facility tour, two classrooms with six to eight residents and two staff members per class were observed in a classroom setting during school. Staff were calmly interacting and engaged in classroom learning with residents.

Medication Pass:

No FFS Medicaid clients received medications during medication pass. Due to the observation of non-Medicaid clients not being complaint with the HIPAA minimal necessary rule, no medication pass was observed. AFMC RN visited with the United Methodist Children's Home medication nurse who was able to show AFMC RN the facility policies and procedures regarding medication administration, narcotic count/reconciliation/handling, and medication discrepancies. Tour of medication room completed with the United Methodist Children's Home medication nurse and no discrepancies with medication storage, cleanliness of medication room, and knowledge of medication dispensing found.

Clinical Record Review Deficiencies:

Provider reported no active FFS Medicaid clients currently admitted at the time of IOC. Therefore, there were no clinical records reviewed.

Respectfully,

AFMC Inspection Team
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