

July 6, 2022

Neurorestorative Timber Ridge
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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:

Neurorestorative Timber Ridge
Provider ID #: [REDACTED]
Onsite Inspection Date: June 21, 2022

A summary of the inspection is outlined below.

Inspection of Care Summary

Facility Tour:

Upon arrival to facility, AFMC staff was promptly greeted at the entrance by a Neurorestorative Timber Ridge staff member and a COVID-19 screening was conducted and temperatures noted. AFMC was immediately taken to a conference room where they were met by the Program Director.

A tour of the facility was completed with the Program Director. The facility environment was extremely clean, well-organized, and appeared to be in good repair. Staff were observed calmly interacting with clients in the classroom setting. There were no immediate issues noted during the facility tour. Staff were hospitable and able to answer questions regarding the facility.

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 was a total of eight personnel records reviewed: three (25%) professional staff and five (25%) paraprofessional staff. During the review of the personnel records, no deficiencies were noted.

General Observations:

- SR010941 was hired June 3, 2022, and the state background check has not been cleared at the time of the inspection. The provider noted that the staff is not working independently with clients at this time due to training and the pending background check.

Quality of Care Summary

As a part of the Quality of Care survey of the IOC, an active Fee for Service (FFS) Medicaid client list was requested, client and/or guardian interviews were conducted, and a clinical record review was completed. The following is a summary of findings and noted deficiencies.

Client/Guardian Interviews:

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

Program Activity/Service Milieu Observation:

Staff and clients were observed in the classroom setting. Staff were calmly interacting with clients and providing a therapeutic environment that was conducive for learning and treatment therapies.

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 staff medication nurse who was able to discuss with the AFMC RN the facility policies and procedures regarding medication administration, narcotic count/reconciliation/handling, and medication discrepancies. Tour of medication room completed with the medication nurse and no discrepancies with medication storage, cleanliness of medication room, and knowledge of medication dispensing found.

Clinical Record Review Deficiencies:

There was 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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