

October 11, 2022

Centers for Youth and Families, Inc.
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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:

Centers for Youth and Families, Inc.
Provider ID#: [REDACTED]
Onsite Inspection Date: September 27, 2022

Inspection of Care Summary

Facility Tour:

Upon arrival to facility, AFMC staff was promptly greeted at the entrance by a Centers for Youth and Families staff member. AFMC was immediately taken to a conference room where they were met by the Program Director and the Regulatory Affairs Director. AFMC staff were given the completed and signed consent form listing approval for access to the AFMC portal.

A tour of the facility was completed with the Program Director. Several staff members were observed interacting calmly with clients in groups on the units and outside. Staff were able to answer questions regarding the facility. The following is a list of observations noted during the facility tour:

- Excessive trash including candy wrappers and partially eaten food throughout the facility.
- A space heater was on and unattended with electrical cords stretched across room in the common area of Dorm One.
- Several dorm rooms with three beds were observed to have one bed at the doorway that was blocking the pathway of the other two beds. The placement of the doorway bed would cause the clients in the other two beds to walk around a small 2-2.5-foot pathway or jump across a bed to exit the room in the event of an emergency.

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 thirteen personnel records reviewed: two (25%) professional staff and eleven (25%) paraprofessional staff. During the review of the personnel records, no deficiencies were noted.

General Observations:

It was noted that on the Child Maltreatment registry for SR011283, the date of birth differed from what was listed on the staff's driver's licenses. However, the last four of the social matched therefore, it was passed. Secondly, the provider did not upload an active professional license for SR011281, but AFMC was able to verify the staff's professional licenses with the Arkansas State Board of Nursing.

Clinical Summary

As a part of the Quality of Care survey of the IOC, an active Fee for Service (FFS) Medicaid client list was requested. The following is a summary of findings and noted deficiencies.

Client/Guardian Interviews:

No active FFS Medicaid clients were 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 common areas of the dorm and outside participating in groups. Staff were calmly interacting with clients and providing a therapeutic environment that was conducive to learning.

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 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 medication nurse and no discrepancies with medication storage, cleanliness of medication room, and knowledge of medication dispensing found. AFMC staff observed that facility nursing staff had left a personal food item in the medication refrigerator. This item was reported to have been removed by the Director of Nursing while AFMC staff was still onsite.

Clinical Record Review Deficiencies:

No active FFS Medicaid clients were currently admitted at the time of IOC. Therefore, there were no clinical records reviews conducted.

**For more details on the individual related deficiencies, please log into the portal.*

Respectfully,

AFMC Inspection Team
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