



October 11, 2022

United Methodist Children's Home Attn: Shannon Rouse, Compliance Director srouse@methodistfamily.org 2002 South Fillmore Street Little Rock, Arkansas 72204

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#:

Onsite Inspection Date: September 27, 2022

# **Inspection of Care Summary**

### Facility Tour:

Upon arrival to facility, AFMC staff was promptly greeted at the locked 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 and the Corporate Compliance Specialist. AFMC staff received the completed and signed consent form listing approval for access to the AFMC portal prior to arrival for site visit.

A tour of the facility was completed with the Compliance Specialist and the Receptionist for the residential unit. All facility staff were observed wearing face mask. The facility environment was extremely clean and well-organized. Educational classes were in session. Several staff members were observed interacting calmly with clients in the classroom. Staff were 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 twelve personnel records reviewed: two (25%) professional staff and ten (27%) paraprofessional staff. During the review of the personnel records, no deficiencies were noted.

### General Observations:

SR011257 did not have evidence of a first aid card on file, however the provider was able to show evidence of a completed test and sign in sheet for the staff.

## **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. 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 conducted.

## Program Activity/Service Milieu Observation:

Staff and clients were observed throughout the facility in the in the classroom setting. Three students were also observed with staff in the dayroom attending pet therapy. Staff were calmly interacting with clients and providing a therapeutic environment for 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 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 medication nurse. An open vial of TB skin test was observed in medication refrigerator in nurse's station of girl's unit that was not labeled with date of opening and with nurse's initials.

#### 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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