



September 25, 2023

United Methodist Childrens Home 211 Church St Bono, AR 72416-9578

The Division of Provider Services and Quality Assurance (DPSQA) 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 Services for Under 21. The Medicaid Manual for Inpatient Psychiatric Services for Under 21 was used in the completion of this report.

Observations and any deficiencies noted are listed below for the inspection conducted at the following service site on the following date:

United Methodist Childrens Home Provider Medicaid ID: Onsite Inspection Date: September 19, 2023 Onsite Inspection Time: 7:49a.m.

A summary of the inspection and any deficiencies noted are outlined below.

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. AFMC was immediately taken to a conference room where they were met by the Program Director and Compliance Director. 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 Program Director for the residential unit. The facility environment was extremely clean and well-organized. Therapeutic 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 was a total of ten personnel records reviewed; two (29%) professional staff and eight (25%) paraprofessional staff. During the review of the personnel records, no deficiencies were noted.

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, 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, no client interviews were conducted.

Clinical Record Review Deficiencies:

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

Program Activity/Service Milieu Observation:

All clients were observed in educational classrooms on the second floor of the facility. Staff and clients were calmly interacting and engaged in classroom learning. Staff were providing a therapeutic environment conducive to learning.

Medication Pass:

No active FFS Medicaid clients received medications during a medication pass while AFMC staff was onsite. 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 facility 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 no discrepancies with medication storage, cleanliness of medication room, and knowledge of medication dispensing found.

Respectfully,

Inspection of Care Team InspectionTeam@afmc.org

