

# Division of Provider Services and Quality Assurance



October 5, 2023

Delta Family Health and Fitness – Center for Children 815 E Saint Louis St Hamburg, AR 71646-2766

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 Age 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:

# Delta Family Health and Fitness – Center for Children Provider Medicaid ID:

Onsite Inspection Date: October 02, 2023 Onsite Inspection Time: 12:05 PM

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

# **Inspection of Care Summary**

## Facility Tour:

Upon arrival to the facility, AFMC staff was promptly greeted at the main entrance by a Delta Family Health and Fitness – Center for Children facility staff member. AFMC staff were checked in at the front desk and were taken to a conference room and met by the Assistant Administrator. AFMC staff was given the completed and signed consent form listing approval for access to the AFMC portal.

A tour of the facility was completed with the Security Officer of the residential unit. The facility was noted to be clean and free of clutter. AFMC staff observed several areas of minor damage to walls and floors on the client units, but no safety concerns were noted. Educational classes were in session. Several staff members were observed calmly interacting with clients throughout the facility.

# Facility Review – Policies and Procedures:

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

## Personnel Records – Licenses, Certifications, Training:

There was a total of eight personnel record(s) reviewed, three (30%) professional and five (26%) paraprofessional. There were no deficiencies noted during the personnel record review.

## Observations:

AFMC staff reviewed the final document request form with the Assistant Administrator, the Director of Nursing, and the Human Resource Director at the completion of the on-site Inspection of Care. The provider signed the acknowledgement of manual requirements that were made available in the provider's policy and procedures. AFMC staff explained that these findings were preliminary and there was still an off-site portion to be completed.

## **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 were no active FFS Medicaid clients currently admitted at the time of IOC. Therefore, no client interviews were conducted.

## Program Activity/Service Milieu Observation:

AFMC staff reviewed the final document request form with the Chief Executive Office, the Chief Operations Officer, and the Risk Manager at the completion of the on-site Inspection of Care. The provider signed the acknowledgement of manual requirements that were made available in the provider's policy and procedures. AFMC staff explained that these findings were preliminary and there was still an off-site portion to be completed.

#### **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 compliant 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.

Facility nurse was able to verbalize the step-by-step process of medication delivery including the demonstration of the five rights of medication administration, documentation of medication delivery, verification of client taking medication including mouth/cheek checks, and how clients are educated about each medication. Facility nurses also verbalized the process utilized when a client refuses medications. The tour of the medication room was completed and secure storage of medications including narcotics was the only issue noted.

AFMC staff did note that the facility's medication policy titled MP5 did state, "All controlled substances are kept double locked in the medication room or in medication cart stored medication room." AFMC staff did discuss with facility administration regarding this policy is not being followed in the practice of the security of narcotics. Currently, the facility houses the medication cart in the centrally located unlocked workstation where unauthorized staff and clients may have access to the medication cart. AFMC staff noted several staff members who are not authorized to have access to medications gaining access into the unlocked workstation during the inspection to complete various work-related tasks. AFMC staff voiced concern that even though the cart was locked during inspection if nurse failed to lock the medication cart and walked away that all medications including narcotics would be unsecure. The facility does have a medication room next to the open nurses' station but currently the only medications that are stored in the medication room are refrigerated medications.

## Clinical Record Review Deficiencies:

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

Respectfully,

Inspection of Care Team InspectionTeam@afmc.org





# CAP-0007429

Close WindowPrint This PageExpand All | Collapse All

Corrective Action	Plan Details		
CAP Number	CAP-0007429	Provider Response Due	
Inspection	DPSQA-0007429	AFMC Response Due	
Status	Approved	Due Date Override	
Cancellation Reason			
Date Requested	10/13/2023		
CAP Approval Pro	cess		
Submitted Date	12/5/2023	Submitted By	
CAP Returned Date/Time			
Approved Date	12/5/2023	Approved By	
Request for Recor	nsideration		
Recon Submitted Date		Recon Submitted By	
Recon Reviewed Date/Time		Recon Reviewed By	
Revised Report Sent		Recon Review Results	
Notes			
Provider Overdue			
AFMC Overdue			
CAP Response Notes	For this CAP: Of the 2 deficiency areas submitted: 2 plan(s) have been approved as submitted 0 were rejected and will need changes  Outcome: This CAP was Approved.  Overall Feedback: Thank you for your response.		
Timeliness Notes			
Next Step:	Your CAP has been accepted by AFMC. AFMC recommends you download a copy of your accepted CAP for your records by selecting the Printable View button in the top right-hand corner.		
Followup			
Require Followup  Followup Date			

**System Information** 

Created By

10/13/2023 9:09 AM

Last Modified By

12/5/2023 3:45 PM

# **Deficiency Areas**

## Med Pass/Administration

Origin Survey

Regulation

Instances 1

On 10-02-2023 the policy MP-5 was revised to state "all controlled substances are kept in a locked Corrective Action container in med cart providing a double locked medication cart."

Person Responsible

Director of Nursing

Completion Date 10/2/2023

#### **Med Pass/Administration**

Origin Survey

Regulation

Instances 1

All nursing staff were inserviced regarding policy MP-5 "Controlled Substances/Prescription Corrective Action

Administration"

Person Responsible Director of Nursing

Completion Date 10/2/2023

## **Deficiencies** DEF-0089140

Status Accepted

Related To SURVEY-0006799

Regulation

Deficiency Statement Controlled medications are not properly stored to limit access and/or facilitate reconciliation.

AFMC staff did note that the facility's medication policy titled MP5 did state, "All controlled substances are kept double locked in the medication room or in medication cart stored medication room." AFMC staff did discuss with facility administration regarding this policy is not being followed in the practice of the security of narcotics. Currently, the facility houses the medication cart in the centrally located unlocked workstation where unauthorized staff and clients may have access to the medication cart.

Service Details AFMC staff noted several staff members who are not authorized to have access to medications gaining access into the unlocked workstation during the inspection to complete various related work related tasks, AFMC staff voiced concern that even though the cart was locked during inspection if nurse failed to lock the medication cart and walked away that all medications including narcotics would be unsecure. Facility does have a medication room next to the open nurses' station but currently the only medications that are stored in the medication room are refrigerated medications.

## DEF-0089141

Status Accepted

Related To SURVEY-0006799

Regulation

Deficiency Statement Medications and biologicals are accessible to more than just authorized staff and/or not secured.

Service Details

# **CAP History**

## 12/5/2023 3:45 PM

Usei

Changed Next Step:. Changed Record Type from Submitted to Completed. Changed CAP Response Notes. Changed Approved Date to 12/5/2023. Changed Approved By to Changed Status from Submitted to Approved.

#### 12/5/2023 2:52 PM

User

Changed Submitted Date to 12/5/2023. Changed Submitted By to Changed Next Step:. Changed Record Action Type from Requested to Submitted. Changed Status from Requested to Submitted.

## 10/13/2023 9:11 AM

User

Action Changed Next Step:. Changed Record Type from New to Requested. Changed Date Requested to 10/13/2023. Changed Status from New to Requested.

# 10/13/2023 9:09 AM

User Action Created.

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