

Inspections of Care

Taniesha Richardson-Wiley, MPH
Assistant Director, Division of Provider Services & Quality Assurance

Lynetta Dickerson
Enforcement Manager, Division of Provider Services & Quality Assurance

Sheryl Hurt
Director, AFMC

Agenda

- DHS and AFMC – A Great Collaboration
- Inspection Types and Process
- Additional Tidbits
- FAQ's

DHS and AFMC — A Great Collaboration

DPSQA, DMS, and DYS entered into an agreement with AFMC to conduct monitoring and compliance surveys as well as inspections on behalf of DHS.

AFMC's Inspection of Care contract:

- reviews providers for health and safety/on-site environmental issues
- ensures policies and procedures are meeting current standards
- identifies any concerns with Clinical Quality of Care review

Our ultimate goal is to ensure quality services are provided.

Inspection Types and Process

Inspections of Care Team

Generalists

Licensed
Mental Health
Providers

Substance
Abuse
Specialists

Registered
Nurses

Types of Inspections

- Health & Safety
 - Encompass many of the provider types that are DPSQA certified
 - Behavioral Health Acute Crisis Units*
 - Behavioral Health Agencies
 - Community Support Services Program*
 - Alcohol & Other Drug Abuse Treatment Programs*
 - Partial Hospitalization
 - Residential Community Reintegration Programs
 - Therapeutic Communities
- Quality of Care
 - Occur in BHAs that are DPSQA certified
- Inspections of Care
 - Occur in In-Patient Psych U21 facilities

*Chart Review is required

Health and Safety Inspections

- Information reviewed is directly from the certification manual specific to its provider type.
 - Behavioral Health Acute Crisis Units
 - https://humanservices.arkansas.gov/wp-content/uploads/Behavioral_Health_Acute_Crisis_Unit_Certification.pdf
 - Behavioral Health Agencies
 - https://humanservices.arkansas.gov/wp-content/uploads/Behavioral_Health_Agency_Certification_Manual_06012022.pdf
 - Community Support Services Program
 - <https://humanservices.arkansas.gov/wp-content/uploads/Community-Support-System-Provider-Certification-Manual-Clean-Final-12-8-22.pdf>
 - Alcohol and Other Drug Abuse Treatment Programs
 - https://humanservices.arkansas.gov/wp-content/uploads/Licensure_Standards_for_Alcohol_and_Other_Drug_Abuse_Treatment_Programs.pdf
 - Partial Hospitalizations
 - https://humanservices.arkansas.gov/wp-content/uploads/Partial_Hospitalization_Certification.pdf
 - Residential Community Reintegration Programs
 - https://humanservices.arkansas.gov/wp-content/uploads/Residential_Community_Reintegration_Program_Certification_4.30.20.pdf
 - Therapeutic Communities
 - https://humanservices.arkansas.gov/wp-content/uploads/DBHS_Therapeutic_Communities_Certification_-_FINAL-4.10.2020.pdf

Quality of Care

Information reviewed comes directly from Section II of the Counseling Services Medicaid manual.

Counseling Services

<https://humanservices.arkansas.gov/divisions-shared-services/medical-services/helpful-information-for-providers/manuals/cnslserv-prov/>

Scroll down and click on Section II

Documentation requirements begin in Section 252.111 and each service will have a listing that states “Minimum Documentation Requirements”. Everything that is listed here must be included in your documentation or it will be found deficient. Remember, you can have more substance to your documentation; but you cannot have less than what is minimally required.

What happens when AFMC shows up?

- Introduction
 - Generalist will need a quiet place to work privately
- Consent form
 - Who will need access?
- Document request form specific to the inspection
- Tour of facility
 - Employee and generalist/IOC team will tour facility
- List of clients
- List of current employees
 - Professional and paraprofessional
- Interviews

ASK QUESTIONS!!! Generalists are there to assist you in this process!

The Exit Summary

- Purpose
- Staff from the list you provided will be interviewed
- This is the time to discuss current findings and perhaps resolve any issues related to P&P
- Offsite desk review will continue and can include
 - Client interviews
 - Staff interviews not completed onsite
 - Staff credential review not completed onsite
 - Client Records Review

The Reports

- Health and Safety Reports
 - DPSQA sends notification with report findings to provider
 - Questions: dpsgapoc@arkansas.gov
- Quality of Care Reports
 - AFMC sends notification for CAP/Reconsideration
 - Questions: DPSQA-ProviderRelations@afmc.org
- In-Patient Reports
 - AFMC sends notification for CAP/Reconsideration
 - Questions: DPSQA-ProviderRelations@afmc.org
- DYS Reports
 - DYS sends notification to facility
 - Questions: DPSQA-ProviderRelation@afmc.org

Notification of Inspection Reports

Health and Safety Inspections:

- AFMC submits reports directly to DPSQA
- DPSQA responds to the provider by letter and directs on CAP and Reconsideration process
- Provider responds directly to DPSQA

Quality of Care and Inpatient Psychiatric Facility Inspections:

- AFMC reports are sent to DPSQA, DMS and the provider
- Reports include the CAP and Reconsideration request and directions
- Providers submit CAP/Reconsideration request through AccessPoint to AFMC for review

CAPs and Reconsiderations

Corrective Action Plan (CAP)

- Required for any deficiency on the IOC report
- Reviewed and approved or rejected for additional information
- Annual inspections ensure the CAP is implemented

Timeframe to submit a CAP

- 30 days from the *final* IOC report

Make sure to include:

- Specific deficiency being addressed
- How will change correct the deficiency and prevent further non-compliance
- Date to implement change
- Monitoring of change

Reconsiderations

- Reconsideration can only be requested once per IOC review
- Should be submitted prior to CAP submission
- CAP will be due once reconsideration determination made

Timeframe to submit reconsideration

- 30 days from date of report (stops the clock on the CAP due date once a reconsideration is submitted)

Make sure to include:

- Specific deficiency being addressed
- Reason for requesting reconsideration
- Supporting evidence/documentation

Additional Tidbits

Will we receive notification of inspection visit?

- Health & Safety: Will not receive any advance notice
- Inspection of Care and Quality of Care: Will receive no more than 48 hours advance notice
- DYS: Will not receive any advance notice

Communication is key in what we do! Please reach out to us to notify of facility closure for vacation, staff vacation, etc. at DPSQA-ProviderRelations@afmc.org so we can notify our schedulers.

Frequency of Reviews

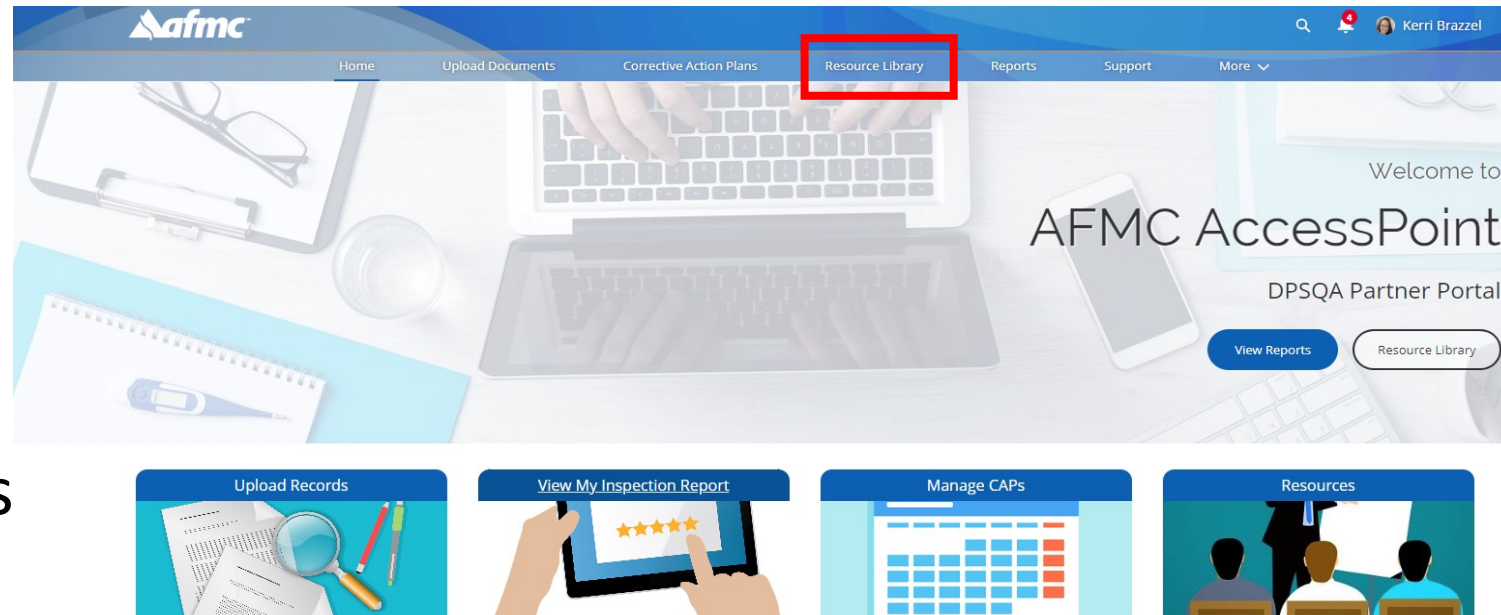
- Annual
 - ✓ Reviews conducted annually- no less than 9 months; no greater than 12.
- Semi-Annual
 - ✓ Reviews conducted between the annual reviews- no less than 5 months; no greater than 6.
- Follow-up
 - ✓ Reviews to determine if corrective action plans are implemented as approved; limited to deficiencies cited and reported in corrective action plan.
- Complaint/Additionally Ordered
 - ✓ Reviews conducted upon receipt of allegations of violations. This can happen any time.
- Random
 - ✓ Reviews conducted no more than 3 months from a recent review; no more than 3 months before an annual review.

AFMC Goals

- To be as least disruptive as possible while completing all reviews (if needed) at one time
- To ask multiple times if not finding the information requested
- To provide initial findings related to the P&P
- Explain the process and assist with questions

AccessPoint Resource Library

- Provider Communication
- Resource Guides
- Document Request Forms



My Inspections

In the list below are the Inspections you currently have access to, if any.



Frequently Asked Questions

FAQs

- How can we prepare for an inspection?
 - Have someone available – doesn't have to be CEO or Compliance officer but someone knowledgeable of the process
 - Have your P&P available to all staff
- What are our next steps after the report?
 - Wait for the letter from DPSQA (if H&S) before completing CAP/Reconsideration.
- How do I know which clients were reviewed?
 - Client listing is available after inspection to compare with report. Because there is no PHI available in the reports, providers can cross-reference the information to the actual client in AccessPoint.
- I am an Independently Licensed Provider (ILP), when do I get my inspection?
 - There was an update and ILPs are no longer certified through DPSQA. Because there is no certification, the ILP will not have an inspection from DPSQA/AFMC.
- What happens if I don't respond to the CAP/Reconsideration request?
 - If QOC or IP inspection - AFMC Provider Relations will reach out and remind you that it is due. If still no response, this information is shared with DPSQA, who may request another inspection.
 - If H&S inspection – DPSQA will reach out. If no response, DPSQA may request AFMC to inspect again.

Recent Changes/Updates

- **DYS:**
 - Clinical component of standards were updated to be specific to client type in Community Based settings
 - Staff records are reviewed at DYS secure locations
- **Change in Reporting:**
 - All reports and information gathered during inspections visits are available and reviewed by DPSQA. Reports are reviewed prior to sharing with providers.

Questions?

Contact Information



@ArkDHS



@arkansasdhs



@ARHumanServices



ARHumanServices

Contact Information

Taniesha Richardson-Wiley, MPH

Assistant Director, Office of Community Services

Taniesha.Richardson-Wiley@dhs.Arkansas.gov

501-320-6321



@afmcAR



@afmctv

Arkansas Foundation
for Medical Care



@afmc



AFMCTV

Contact Information

Sheryl Hurt

Director, Outreach Services

shurt@afmc.org

501-212-8688

We Care. We Act. We Change Lives.



humanservices.arkansas.gov