Recertification Report - CARF Accredited Organization

Provider Name			Provider Number	Begin Cert Date	End Cert Date
LOVE, CARE & DIGNITY, INC.		1235279498	1/30/2009	1/30/2010	
Organizational Practices	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	In-compliance	3 of 3 staff (100%) files reviewed contained results of background screenings, CPR/1st Aid Certification, CPI certification, and met qualifications for the services being provided.		
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Recommendation (Systemic)	3 of 3 staff (100%) files reviewed had documentation of participant specific training. The participant specific training form did not include how staff was trained (i.e. hands on, shawdowing, read/review, etc), in addition the name, signature, and title of trainer was not present. The category of skin integrity as it relates to positioning was not listed on the form and side effects were not always listed for medications.	No	2/27/2009
	Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Recommendation (Systemic)	The organization provides CPR/1st Aid training within 90 days of the date of hire. The organization reports that there is only one overnight staff at each residence and that this could be a staff who has not received the training. Therefore, the provider is not ensuring immediate access to CPR/1st Aid.	Yes	2/19/2009

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Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Recommendation (Systemic)	3 of 3 staff (100%) files reviewed had documentation of required Division general training on Abuse, Neglect, and Exploitation and Incident Reporting. The organization did not have documentation of staff training on billing and documentation, releases of information/confidentiality, or complaints/grievances as required by the Division. The form also did not include the name, signature, and title of the trainer.	No	2/27/2009
Staff Qualifications and Training (Wyoming Medicaid rules Chapter 45 Section 26)	Recommendation (Systemic)	2 of 4 staff interviewed (50%) were able to articulate functional knowledge of participant specific information for a participant for whom the staff is providing care.	No	2/27/2009
Emergency Drills (CARF 1.E.)	Recommendation (Systemic)	Emergency drill documentation of 3 locations was reviewed, and 3 of 3 (100%) locations had documentation of a variety of emergency drills being completed, had concerns identified when appropriate and follow-up to concerns documented as needed. The documentation did not indicate that drills were being run on all shifts, there was no documentation that drills were being run during hours of sleep.	No	2/27/2009
Emergency Procedures during Transportation (CARF 1.E.)	In-compliance	2 of 2 (100%) of vehicles observed had emergency procedures during transportation.	No	
Internal Inspections (CARF 1.E.)	In-compliance	3 of 3 locations (100%) reviewed had documentation of internal inspections, with concerns identified when appropriate, and follow-up to concerns documented as appropriate.	No	
External Inspections (CARF 1.E.)	In-compliance	3 of 3 locations reviewed (100%) had documentation of external inspections, with concerns identified when appropriate and follow-up to concerns documented as appropriate.	No	

Survey/Certification Staff Name: Yvonne Adekale, Program Integrity QMRP

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Progress made on prior DDD Survey recommendations	In-compliance	With the exception of the issues readdressed in this survey, the provider continues to make progress on recommendations from the previous survey.	No	
Progress made on prior CARF Survey recommendations	In-compliance	With the exception of the issues readdressed in this survey, the provider continues to make progress on recommendations from the previous survey.	No	
Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	Recommendation (Focused)	The provider's policy included what categories of incidents need to be reported, who the incidents needed to be reported to; however, did not have the required timeframe for reporting critical incidents.	No	2/27/2009
Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	Recommendation (Systemic)	1 of 4 staff (25%) interviewed was able to articulate functional knowledge of the Division's Notification of Incident Reporting Process.	No	2/27/2009
Complaint and Grievance (CARF 1.D.)	Recommendation (Focused)	The provider's policy was reviewed and the policy did not include that the complainant would receive in writing how their complaint is being addressed within a specific timeframe. In addition, the provider had one grievance filed in the past year but did not have documentation showing that the organization's policy was followed.	No	2/27/2009
Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-compliance	The provider's policy on rights was reviewed and met applicable standards.	No	
Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-compliance	4 of 4 staff (100%) interviewed were able to articulate participant specific rights and restrictions.	No	
Behavior Plans (Chapter 45, Section 29)	In-compliance	3 Positive Behavior Support Plans were reviewed, and all met the applicable requirements. The provider is encouraged to continue to work with the team and Division staff in the development of PBSPs.	No	

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	Restraint standards (Chapter 45, Section28)	Recommendation (Focused)	The provider's policy on restraints was reviewed and met applicable standards. The provider did not have a tracking system in place to track restraint usage, and the provider reports that the internal "Restraint Tracking Form" has not been used consistently.	No	2/27/2009
	Transportation Requirements (CARF 1.E.9)	Recommendation (Focused)	2 vehicles were observed and on the white van there was a cracked windshield that presented an integrity issue, and the van was kept unlocked with confidential information present.	Yes	2/19/2009
Participant Specific Reviews	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Implementation of Individual Plan of Care (Wyoming Medicaid rules Chapters 41, 42 and 43, Section 8)	Recommendation (Focused)	2 of 3 files (67%) reviewed the provider documentation indicated the plans of care were being implemented appropriately. The implementation of Participant 1's objective did not indicate actual progress made in accomplishing the objective.	No	2/27/2009
	Releases of Information (CARF 2.B.)	Recommendation (Systemic)	3 of 3 files (100%) reviewed contained releases that did not include specific information being released or to whom information was being released.	No	2/27/2009
	Emergency Information (CARF 2.B.)	In-compliance	3 of 3 participant files (100%) reviewed, all contained current and thorough emergency information.	No	
	Objectives and goal tracking (Wyoming Medicaid Rules Chapter 41-43)	In-compliance	3 of 3 participant files (100%) reviewed did consistently and accurately track progress made on objectives.	No	
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	In-compliance	Six months billing and documentation was reviewed for one service for each of the 3 participant files reviewed, and met applicable standards.	No	

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Residential Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date O	ΣIP
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-compliance	2 of 2 sites (100%) observed provided evidence of maintaining a healthy and safe environment.	No		
	Organization meets CARF Standards on Community Housing (CARF Section 4.J)	In-compliance	Through observation of services, interviews with participants, and review of provider documentation, the organization provided evidence of meeting the standards on community housing.	No		
	The organization meets the standards in Chapter 45, section 23)	In-compliance	Through observation of services, interviews with participants, and review of provider documentation, the organization provided evidence of meeting the standards in Chapter 45, Section 23.	No		
Day Habilitiation, Employment Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date C	ΣIP
	The organization meets the standards for Community Integration (CARF 4.E)	In-compliance	The organization meets the standards, as evidenced by documentation review and service observation.	No		
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	In-compliance	The organization provided evidence of maintaining a healthy and safe environment.	No		
	Organization meets the standards for the service provided (CARF Standards and Medicaid rules)	Recommendation (Systemic)	Through documentation review and service observation the provider did not provide evidence of meeting the definition of the service being provided by not demonstrating on-going and increasing levels of habilitation training to assist participants to receive services in the most independent setting.	No	2/27/20	09

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the recommendation, and supporting documentation.

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Other Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Health, Safety, or Rights Issue?	Date QIP Due
	Organization maintains a healthy and safe environment (CARF 1.E.10 and WMR Chapter 45, Section 23)	In-compliance	1 location was observed provided evidence of maintaining a healthly and safe environment.	No	
	Organization meets the standards for the service provided (CARF Standards and WMR Chapter 41-45)	In-compliance	Through a review of documentation and observation of services, the provider is meeting the applicable standards.	No	

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