Recertification Report - CARF Accredited Organization

Provider Name			Provider Number	Begin Cert Date	End Cert Date
FAMILIES FIRST			113362400	9/30/2008	9/30/2009
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)	Recommendation (Focused)	2 of 2 staff met qualifications for the services they are providing. 2 of 2 staff files reviewed also included current 1st Aid Certification, CPI certification, current background screenings, and participant specific training. 1 of 2 staff files had a CPR card with no expiration date.	Yes	10/9/2008
	Emergency Drills (CARF 1.E.)	Suggestion	2 of 2 locations reviewed had documentation of completed emergency drills. Drill documentation also included a variety of drills run on each shift, concerns identified when appropriate and follow-up on those concerns. It is suggested that the provider consistently document the date follow up is completed per the provider's form.	No	
	Emergency Procedures during Transportation (CARF 1.E.)	In-compliance	2 of 2 vehicle's observed contained emergency procedures during transport.	No	
	Internal Inspections (CARF 1.E.)	In-compliance	2 of 2 locations reviewed had documentation of internal inspections. Documentation also contained concerns identified when appropriate and follow-up to those concerns.	No	
	External Inspections (CARF 1.E.)	In-compliance	2 of 2 locations reviewed had documentation of external inspections. Documentation included concerns identified when appropriate and follow-up on those concerns.	No	
	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	

Date: 9/18/2008

Recertification Report - CARF Accredited Organization

Progress made on prior CARF Survey recommendations	Not Reviewed	The provider is working on becoming CARF accredited, the provider's CARF survey is scheduled for November 2008. The provider is encouraged to work closely with CARF to obtain the accreditation. If the provider doesn't obtain CARF accreditation the Division will begin the process of decertifying the provider.	No	
Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	Recommendation (Focused)	Reviewed the provider's policy on incident reporting and it was missing "elopement" as a category. The provider's abuse/neglect policy did not reflect the required timeframe for reporting incidents.	No	10/18/2008
Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-compliance	1 of 1 (100%) staff interviewed had functional knowledge of the Division's Notification of Incident Reporting Process.	No	
Complaint and Grievance (CARF 1.D.)	In-compliance	The provider's policy on complaints and grievance was reviewed and met applicable standards. The provider has not had any formal grievances filed within the last year.	No	
Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-compliance	Reviewed the provider's policy on participant rights and it met applicable standards.	No	
Rights of Participants (Wyoming Medicaid rules, Chapters 45, Section 26, CARF Section 1)	In-compliance	1 of 1 staff was interviewed and able to articulate functional knowledge of participant rights and restrictions.	No	
Behavior Plans (Chapter 45, Section 29)	In-compliance	Two Positive Behavior Support Plans were reviewed, and all met the applicable requirements. The provider is encouraged to continue to work with the team and the Division in the development of PBSPs.	No	

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

Note: Providers can dispute a recommendation by submitting a certified letter to the Division within ten business days of receipt of the recertification report. The letter must include the specific recommendation being disputed, information on why the provider does not agree with the recommendation, and supporting documentation.

Date: 9/18/2008

Recertification Report - CARF Accredited Organization

	Restraint standards (Chapter 45, Section28)	Recommendation (Systemic)	The provider's restraint policy was reviewed and met applicable standards. The provider does not have a system to track restraint usage, including assessment of environmental contributing factors and the history of use among personnel.	No	10/18/2008
	Transportation Requirements (CARF 1.E.9)	In-compliance	Two vehicles were observed and met applicable standards.	No	
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)	Two participant files were reviewed. One file met applicable standards. The review of the second file revealed a trend in incident reporting (e.g. behavioral and medical concerns). It is recommended the provider work with participant 1's team to address the current trends, including plans for the future.	No	10/18/2008
	Releases of Information (CARF 2.B.)	In-compliance	Two files were reviewed that contained releases of information. The releases of information found in the file were time limited, specific to the information being released, and to whom the information was being released.	No	
	Emergency Information (CARF 2.B.)	In-compliance	Two participant files were reviewed, both files contained current and thorough emergency information.	No	
	Objectives and goal tracking (Wyoming Medicaid Rules Chapter 41-43)	In-compliance	Two participant files reviewed contained documentation of tracking the progress made on objectives.	No	

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

Note: Providers can dispute a recommendation by submitting a certified letter to the Division within ten business days of receipt of the recertification report. The letter must include the specific recommendation being disputed, information on why the provider does not agree with the recommendation, and supporting documentation.

Date: 9/18/2008

Recertification Report - CARF Accredited Organization

	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	Recommendation (Focused)	Two participant files were reviewed, including documentation of service provision and billing for at least one service area in each file. The documentation and billing reviewed met applicable standards. The provider is using a Division approved schedule that is not reflective of the 24 hour service being billed. The provider should start documenting the 24 hour service immediately and work with the case manager and waiver specialist to correct the schedules.	No	10/18/2008
Residential 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 – all service settings (CARF 1.E.10 Chapter 45, Section 23)	Suggestion	Two residential sites were visited, and all showed evidence of maintaining a healthy and safe environment. It is suggested Home #1 look into putting handrails on the front and back deck if anyone with mobility issues moves into the home.	No	
	Organization meets CARF Standards on Community Housing (CARF Section 4.J)	In-compliance	Through review of documentation and observation of services the provider is meeting these standards.	No	
	The organization meets the standards in Chapter 45, section 23)	Recommendation (Focused)	The provider is planning on opening a new residential site on October 1st but did not give the Division the required 30 day notice.	No	10/18/2008

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

Note: Providers can dispute a recommendation by submitting a certified letter to the Division within ten business days of receipt of the recertification report. The letter must include the specific recommendation being disputed, information on why the provider does not agree with the recommendation, and supporting documentation.