Compliance Summary Report

Compliance Summary Report of Andre j Pratt - CUYA - 2023

County Name: CUYA Reviewer: Ljiljana Bobinac

Facility: Lead Reviewer:

Review Type: Regular Group Manager: Jennifer Krzynowek

Review Date: 2/16/2024 Onsite Review

Cite #1

Question	Explanation
Does the waiver service delivery documentation for all waiver billing codes include scope? 5123-9-06; 5123-9-40; 5123-9-39; 5123-9-37	At the time of the review, no services were listed in HPC service delivery documentation, therefore there was no scope of services included. Summary of services provided was completed by the provider, on the second page of HPC documentation, but no scope included.
Plan of Correction	Status
My HPC service delivery documentation I will be developing following the ISP and include scope of services starting March 2, 2024. I understand that scope of services must be documented for the outcome and for all services I am providing, all the time. Knowing that, this mistake will not be happening in the future.	Approved

Cite #2

Question	Explanation
Did the provider maintain a log that contains the unusual incidents defined in rule with the following elements: Name of individual, Description of incident, Identification of injuries, Time/date of incident, Coation of incident, Preventative measures.	At the time of the review, the provider did not maintain a log that contains unusual incidents as defined per rule.
Plan of Correction	Status

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I was not aware that I was supposed to have a monthly UIR log where I need to document incidents if the happen. There was no unusual incidents report thus far with my client so I though that I do not need to maintain this form. Now I know it, and effective March this year I will have this form completed for every month, to comply with the rule.	Approved

Cite #3

Question	Explanation
Is the service plan and/or plan of care being implemented as written? 5123-2-09; 5123-9-39; 5123-9-37	At the time of the review, service delivery documentation was not developed following IDs Plan, there were missing services from the HPC documentation and there was no record of IDs outcome being documented. It was shared with the provider that all services must be listed on the HPC documentation that provider is listed as being responsible for in the ISP.
Plan of Correction	Status
My plan of correction is to read all the isp documents correctly and to make sure that service delivery documentation reflects services delivered as written in the Plan. I will provide and document services correctly as written in the Plan, to prevent future mistakes, I will implement this starting February 17,2024	Approved

Cite #4

Question		Explanation
incidents ensure a		At the time of the review, there is no evidence that the provider reviewed all unusual incidents as necessary but no less than monthly, as required.
Plan of C	orrection	Status

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I was not aware of rule to maintain and review monthly incident reports. I have learned during my review that I must complete monthly log even if no incidents happen. Starting March 2,2024 I will maintain UIR logs and will keep doing in every month, no matter what (with or without incidents).	Approved

Cite #5

Question	Explanation
Did the provider share the record of restrictive measures that were implemented with the individual or the individual's guardian, as applicable, and the individual's team whenever the individual's behavioral support strategy is being reviewed or reconsidered?	At the time of the review, the provider did not present the records of restrictive measures documentation. The provider shared that behavioral data sheets were kept at the house with the IDs mother. As of now, the provider is aware that provider must maintain this documentation.
Plan of Correction	Status
I am aware of that I need to track data monthly. I have the documents and data sheets in my possession. I Started tracking data on February 17, 2024. Also, I will be submitting behavior data data sheets every 90 days to Support Administrator.	Approved