

# Compliance Summary Report

Compliance Summary Report of William Jones - CUYA - 2023

**County Name:** CUYA

**Reviewer:** Ljiljana Bobinac

**Facility:**

**Lead Reviewer:**

**Review Type:** Regular

**Group Manager:** Jennifer Krzynowek

**Review Date:** 5/6/2024

**Onsite Review**

## Cite #1

Question	Explanation
Beginning in 2022, did the provider annually complete: <ul style="list-style-type: none"> <li>• Two hours of training provided by the Department or by an entity using department-provided curriculum</li> <li>• Six hours of training on topics selected by the provider that are relevant to services provided and people served in the areas of components of quality care, positive behavior support, or health and safety?</li> </ul> 5123-2-09	During the review, the provider presented training certificates completed in 2023. Trainings were completed at DODD website and certificates were issued for 6.08 hrs of training. It was shared with the provider that it is required to complete eight hours of training provided by the Department or by an entity using department-provided curriculum, every calendar year.
Plan of Correction	Status
The full required training hours (8) for the year of 2024 will be completed by the end of May. I shall complete them earlier this year to avoid non-compliance. Completion certificates will be submitted to compliance officers if necessary and on file at DODD website. I'll make sure to complete the training yearly.	Approved

## Cite #2

Question	Explanation
If the provider is responsible for providing any type of transportation, do vehicles used to transport individuals appear safe? 5123-2-09	At the time of the review, the vehicle provider is using to transport individuals ID1 and ID2 ( Kia Sedona 2017) has a cracked windshield ( horizontal from one to another side).
Plan of Correction	Status
Window estimates have been taken. Crack in windshield will be fixed by June 1, 2024. In the future I'll make sure to complete repairs in a timely manner.	Approved

## Cite #3

Question	Explanation

## Compliance Summary Report

<p>Is there evidence that the provider conducted an in-depth review and analysis of MUI trends and patterns during the preceding calendar year, compiled an annual report containing required elements, and submitted it to the County Board for all programs in the county by the deadline? 5123-17-02</p>	<p>At the time of the review, there is no evidence that the provider conducted in-depth review and analysis of MUI trends and patterns for 2023, and submitted it to the County Board before the end of February of 2024.</p>
<b>Plan of Correction</b>	<b>Status</b>
<p>I am aware that I have to complete annual MUI trends and pattern report and send it to uir@cuyahogabdd.org no later than at the end of February. I will complete report for 2024, and send it to County Board before the end of February 2025.</p>	<p>Approved</p>

**Cite #4**

<b>Question</b>	<b>Explanation</b>
<p>Does provider staff have:  <ul style="list-style-type: none"> <li>• Current CPR certification and</li> <li>• Current first aid certification?</li> </ul>                     5123-2-09</p>	<p>At the time of the review, the provider admitted that his current First Aid/CPR did not include an in-person skills demonstration. It was shared with the provider that on-line training does not meet the requirements. During the review, the provider submitted POC and scheduled new training with Red Cross on 5/11/2024 with in-person skills demonstration. The provider in meantime, emailed proof of training upon completion.</p>
<b>Plan of Correction</b>	<b>Status</b>
<p>First AID/CPR class were completed on 5/11/24. Certificate was submitted to compliance officer.</p>	<p>Approved</p>