## **Compliance Summary Report**

Compliance Summary Report of Just Like Home, LLC - CUYA - 2024

County Name: CUYA Reviewer: Ljiljana Bobinac

Facility: Lead Reviewer:

Review Type: Special Group Manager: Jennifer Krzynowek

Review Date: 3/26/2024 Desk Review

## Cite #1 **Explanation** Question Is the provider/facility following all applicable local, state "The provider failed to evidence they had successfully and federal rules and regulations? implemented the written plan of improvement for an QARN within sixty days as required by OAC 5123-6-07 (D)(11)(b)" Explanation: Medication Administration and Health Related Activities Quality Assessment Findings Summary was issued on 10/17/2023. POI was due 11/16/2023, submitted and accepted on 12/07/2023. Due date for plan of improvement implementation/POII was 02/05/2024. QARN reached out to the provider on 1/30/2024 (CEO, Associate Director, and the nurse were included in the correspondence). It was communicated back to QARN that supporting documentation will not be submitted on time. QARN reached out again to the provider on 3/18/2024 with the reminder. At the time of writing this report on 3/26/2024, evidence of Plan of improvement Implementation hasn't been received. **Plan of Correction Status** Just Like Home hired a nurse in December who had Approved agreed to complete the QARN implementation. That was not completed as agreed. I am currently working on compiling the documentation needed to support the written plan of correction for the QARN and will submit it by April 30, 2024. I understand the rules of compliance for QARN and that we are not currently in compliance. JLH will continue to implement an ongoing system of compliance management to prevent this from happening in the future. This plan will involve ongoing monitoring by the Program Manager of each home.