

Survey Findings/Facility Response

Facility : GATEHOUSE THERAPEUTIC HEALTH SERVICES

Survey Date - 7/17/2008 - Citation4

Survey Findings

A review of policies and procedures and an interview with Clinical Director and Administrative Assistant revealed the clinical director did not develop, implement, and comply with policies and procedures that establish the process for admitting a client.

Findings include:

A review of the agency's policies and procedures manual revealed the agency process for admitting a client to this Outpatient Clinic were not contained in the manual. Specifically:

The agency's policies and procedures did not establish the process for obtaining general and/or informed consent for treatment in accordance with R9-20-206(E) nor ensure that at the time of admission, a client is provided the following information required by R9-20-206(H):

1. A list of client rights;
2. An explanation of any fees that the client is required to pay;
3. A copy of the agency's refund policy and procedure;
4. The current telephone number and address of:
 - a. The OBHL;
 - b. The Department's Division of Behavioral Health Services;
 - c. If the client is enrolled by a regional behavioral health authority as an individual who is seriously mentally ill, the human rights advocates provided by the Department or the Department's designee;
 - d. The Arizona Department of Economic Security Office of Adult Protective Services, if applicable;
 - e. The Arizona Department of Economic Security Office of Child Protective Services, if applicable; and
 - f. The local office of the regional behavioral health authority;
5. A copy of the agency's grievance policy and procedure.

In an interview, the Clinical Director and Administrative Assistant reported being very surprised the policies and procedures manual did not contain the process for admitting a client. Policies and procedures that address this requirement were requested and were not produced at the time of the survey.

The requirement to ensure the clinical director develops, implements, and complies with policies and procedures that establish the process for admitting a client was discussed with the Clinical Director and Administrative Assistant during the exit conference.

Rule/Statute

R9-20-201. Administration

B. A licensee shall ensure that:

2. The clinical director develops, implements, and complies with policies and procedures that:

h. Establish the process for admitting a client;

Facility Response

The date (10/31/2008) represents when the facility corrected the citation and was confirmed by the Department to be back in compliance. A facility is required to submit a Plan of Correction (POC) for each citation identified during a survey. This Plan of Correction describes how the facility is going to make corrections, the facility representative responsible for making the corrections, and what systems are in place to prevent recurrence. Once the facility has submitted an acceptable Plan of Correction, the Department confirms that the citation is corrected.

For a copy of the Plan of Correction, please contact the facility or the Department of Health Services.