

Survey Findings/Facility Response

Facility : GATEHOUSE THERAPEUTIC HEALTH SERVICES

Survey Date - 10/8/2010 - Citation1

Survey Findings

An onsite inspection, review of documentation and an interview with staff revealed the licensee did not ensure compliance with applicable state law, specifically A.R.S. § 36-407.A.

Findings include:

A.R.S. § 36-407.A. states a person shall not establish, conduct or maintain in this state a health care institution or any class or subclass of health care institution unless that person holds a current and valid license issued by the department specifying the class or subclass of health care institution the person is establishing, conducting or maintaining. The license is valid only for the establishment, operation and maintenance of the class or subclass of health care institution, the type of services and, except for emergency admissions as prescribed by the director by rule, the licensed capacity specified by the license.

The licensee is licensed as an outpatient clinic authorized to provide counseling, medication services and assistance in the self-administration of medication. An onsite inspection revealed the licensee was providing services to clients who were in potential detoxification. Additionally, the licensee was providing residential services at a branch office identified as the Hassayampa River Ranch.

In a telephonic conference held on August 19, 2010, the licensee entered in an agreement with the Department to ensure the health, safety and welfare of clients identified to be in potential detoxification. The licensee also agreed to suspend all admissions and transfer the clients from the Hassayampa River Ranch.

The requirement for a licensee to ensure compliance with applicable state law, specifically ARS § 36-407.A. was discussed with the Director of Operations during the telephonic conference.

Rule/Statute

R9-20-201. Administration

A. A licensee is responsible for the organization and management of an agency. A licensee shall:

1. Ensure compliance with:

a. This Chapter and applicable federal, state, and local law;

Facility Response

The date (12/22/2010) 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.