



## Behavioral Health Quality Review Final Assessment Report Academy for Family Empowerment, Inc.

**Location of Review:** 3205 Salem Rd SE Conyers, GA 30013

**Names of Quality Assessors:** Heather Hewett, LPC, CPCS; Helen Rohrich, RN

**Individuals Interviewed:** 4

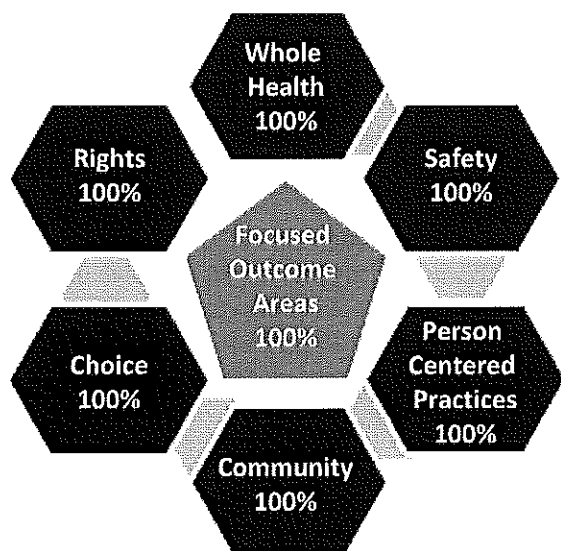
**Staff Interviewed:** 5

**Records Reviewed:** 5

**Date Range of Review:** 9/26/2017 - 9/27/2017

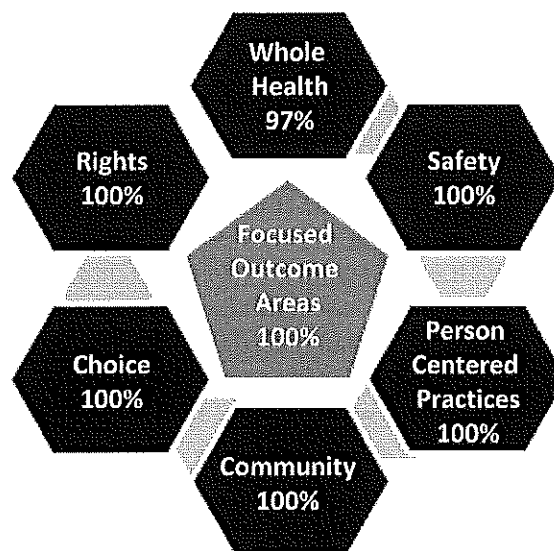
The ASO Collaborative in partnership with the Department of Behavioral Health and Developmental Disabilities (DBHDD) believes in easy access to high-quality care that leads to a life of recovery and independence for the people we serve. The Quality Division is dedicated to ensuring services provided are person-centered and include a commitment to wellness and recovery.

### Individual Interviews Conducted: 4



The Individual Interview is not calculated into the overall score.

### Staff Interviews Conducted: 5



The Staff Interview is not calculated into the overall score.

**Individual Interview Observations:**

- All interviewed guardians of individuals served reported:
  - awareness of their child's diagnosis;
  - they were treated with respect and dignity by all staff;
  - were offered choices of when services are to occur;
  - and have been supported in moving toward desired goals/dreams.
- Guardian comments included:
  - "The therapist does a great job when they come to see my daughter."
  - "They asked me what I thought about how they could help my family. I told them she needed help cleaning up after herself, so I know they helped her with that."
  - "They are helping him with his anger management. His counselor is very good. I can see an improvement in just three sessions."
  - "I can speak highly about the services she had with [staff name]. She was very proactive with my daughter. She was always open with her and always there when we needed her. She took time with us, kept up with all the [PRTF] paperwork and conference calls that were required to get my daughter the services she needed. She was great in all areas. I couldn't have asked for a better counselor."
  - "If I had a problem with [the provider], I would have left a long time ago. We had the same therapist for five years and when he left, I went straight to the CEO and said, 'It's you or nobody.' So she's been providing us with therapy ever since."

**Staff Interview Observations:**

- All staff interviewed reported:
  - they formally review individuals' progress on goals/objectives with the person;
  - they were aware of what to do if the individual/family wants to change a support or service;
  - awareness of what individuals need to feel safe;
  - awareness of how the individual is managing their personal health; and
  - awareness of the individuals' and families' right to refuse treatment, services, or supports without retaliation.
- Staff comments included:
  - "The heart of the company is to meet the individual's needs."
  - "We have good coordination with DFCS [Division of Family and Children Services] for the individuals we serve that have DFCS involvement. This allows good access to the caseworkers to coordinate services."
  - "I make sure that he sees the psychiatrist when he's supposed to, as well as taking his medication as prescribed."
  - "I recommended [an individual] to a Depression Group for Teens, so [the individual] can have extra support. I wanted them to know they are not the only one that has these challenges."
  - "In our school-based therapy program, if the child is severe enough we will refer them to our Core program, so they can get the additional outpatient services like CSI [Community Support Individual]."
  - "I enjoy working here, and it feels good to finally say that for a change!"



	Overall Score	Billing Validation	Focused Outcome Areas	Assessment & Planning	Service Guidelines
Review Date: 10/25/2016	98%	100%	98%	92%	100%
Review Date: 12/01/2015	94%	99%	94%	86%	96%
FY17 Statewide Average	84%	84%	89%	77%	88%

The overall score is calculated by averaging the four areas: Billing Validation, Focused Outcome Areas, Assessment and Planning, Compliance with Service Guidelines. Each area accounts for twenty-five percent (25%) of the overall score. Review questions are based on DBHDD Provider Manual and Medicaid Requirements.

# Billing Validation



	Medicaid	Total
Justified	\$2,619.40	\$2,619.40
Unjustified	\$0.00	\$0.00
Total	\$2,619.40	\$2,619.40

■ Justified ■ Unjustified

The Billing Validation Score is the percentage of justified billed units vs. paid/billed units for the reviewed claims. Paid dollars are calculated based on payer: Medicaid is the sum of paid claims; State Funded Services are Fee for Service and State Funded Encounters combined (State Funded Encounters is the estimated sum of the value of accepted encounters).

## Billing Validation: 100%

### Billing Validation – Strengths:

The provider scored 100% in this area. This continues to be an area of strength for this provider as they also scored 100% during their last BHQR (Behavioral Health Quality Review), and 99% during their first BHQR. Strengths identified during this BHQR included:

- All services reviewed had a corresponding order for service.
- All individuals reviewed met admission criteria for each service billed.
- All claims reviewed documented all required criteria including (but not limited to) date of service, date of entry, signature and credential of staff, time in/out, and billing code.
- The content of all notes reviewed met service definition, supported the code billed, and supported the units billed.
- Non-billable contacts were consistently documented within all records reviewed.

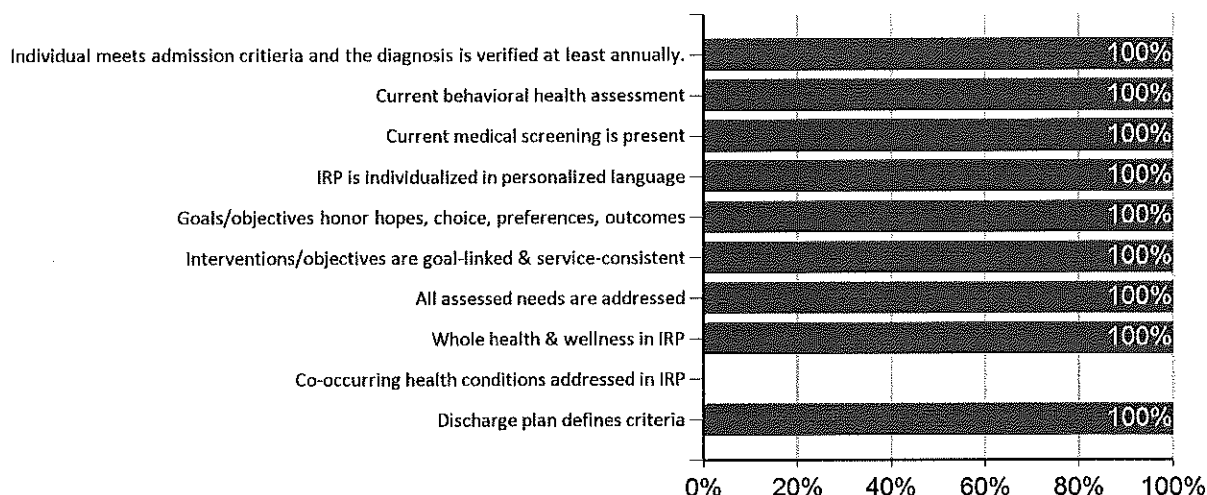
### Billing Validation – Opportunities for Improvement:

- There were no opportunities for improvement noted within this scored area during this BHQR.

**The Georgia Collaborative ASO / Beacon Health Options**

For information on appeals and post-review surveys, please visit [www.georgiacollaborative.com](http://www.georgiacollaborative.com)

# Assessment & Planning



When all responses to a question are "Not Applicable", no percentage is displayed.

## Assessment & Planning: 100%

### Assessment and Planning – Strengths:

The provider scored 100% in this area. The provider has continuously made improvements as they scored 92% during their last BHQR, and 86% during their first BHQR. Strengths identified during this BHQR included:

- All IRPs reviewed demonstrated that all assessed needs were addressed. This is an improvement from 63% scored during the last BHQR.
- All records reviewed contained a diagnosis that was verified at least annually.
- All IRPs reviewed were individualized in personalized language. One 13-year-old individual's goal documented, "I want to do all my chores so my mom won't yell at me."
- All IRPs reviewed contained goals and objectives that honored hopes, choices, preferences, and outcomes.
- Whole health and wellness was documented on all IRPs reviewed.
- Behavioral Health Assessment (BHA) templates were comprehensive as each section detailed clinically meaningful information. Examples included:
  - Name and phone number of primary care physician, speech/hearing/vision problems, immunizations, and developmental milestones were captured under Medical History.
  - Under Family History, the form detailed significant issues in immediate family relationships with rating scales, family strengths/weaknesses/supports, spiritual/cultural beliefs/practices, etc.
  - Children and adolescents were encouraged to respond to the following questions:
    - "Are you worried about any problems at home or in your family?"
    - "Do you think your parent/guardian(s) listen to you and take your feelings seriously?"
    - "Do you know at least one person you can go to and talk to about problems you may be having?"

### Assessment and Planning – Opportunities for Improvement:

- There were no opportunities for improvement noted within this scored area during this BHQR.
- The 0% label in graph above for "Co-occurring conditions addressed in IRP" represents the fact that all records were scored "NA" or not applicable for this question as none of the Individuals reviewed presented with co-occurring health or substance use issues.

## Focused Outcome Areas



**The Georgia Collaborative ASO / Beacon Health Options**

For information on appeals and post-review surveys, please visit [www.georgiacollaborative.com](http://www.georgiacollaborative.com)

## Focused Outcome Areas: 100%

### Focused Outcome Areas – Strengths:

The provider scored 100% in this area. The provider has continuously made improvements as they scored 98% during their last BHQR, and 94% during their first BHQR. Strengths identified during this BHQR included:

#### Whole Health

- Documentation within all records reviewed demonstrated ongoing assessment to determine the need for external health referrals for services, supports, and treatment when they are not available within the organization.
- Additionally, all applicable documentation demonstrated evidence of communication with external referral sources to determine the results of testing, treatment, etc. Most records contained releases of information for children's schools, primary care physicians, and previous healthcare providers. One record reviewed contained a letter written by the provider's psychiatrist to the youth's school advocating for a new school placement due to victimization of bullying.

#### Safety

- All applicable records reviewed contained documentation that the individual or legal guardian had been educated on the risks/benefits of all medications prescribed and there is a signed consent form that correlates to each medication.

#### Rights

- All records reviewed included evidence that individuals were informed about their rights and responsibilities at the onset of services and at least annually (when appropriate).

#### Choice

- All records reviewed contained evidence that individuals' preferences and differences were followed to the extent possible. One youth reviewed specifically stated preferences to work on anger and social isolation, and both preferences were documented on the IRP and addressed within service provision.

#### Person-Centered

- Documentation of all records reviewed demonstrated that the individuals and guardians were active participants in the planning and receiving of services. All IRPs reviewed contained a written statement verifying that the individual and/or guardian was involved in the development of the IRP and that they agreed to the plan created.

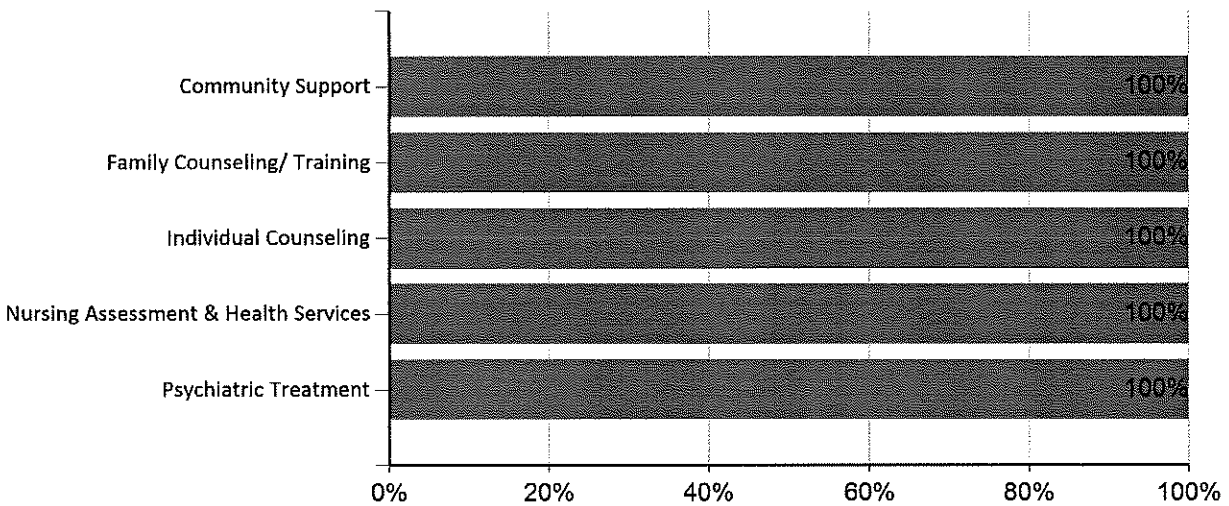
#### Community Life

- Within all applicable records reviewed, individuals were assisted with identifying specific environments of choice where they wish to live, learn, work, and/or socialize. Documentation for one individual reviewed reflected they were assisted with identifying whether public school, home school, or school within a residential setting would be most appropriate for the child's needs.

### Focused Outcome Areas – Opportunities for Improvement:

- There were no opportunities for improvement noted within this scored area during this BHQR.

## Compliance With Service Guidelines



### Compliance With Service Guidelines: 100%

#### Compliance with Service Guidelines – Strengths:

The provider scored 100%. This continues to be an area of strength for this provider as they also scored 100% during their last BHQR, and 96% during their first BHQR. Strengths identified during this BHQR included:

- All Community Support services reviewed contained evidence of skill building as well as service/resource coordination.
- All Family Counseling services reviewed were provided by appropriately licensed or credentialed clinicians.
- All Individual Counseling services reviewed included evidence that the provider was addressing specific goals defined by the individual served and specified on the IRP.
- Within the one record containing Nursing Assessment and Health Services, nursing goals and objectives were individualized and addressed health issues to include (but not limited to) medical, physical, nutritional, and behavioral needs.
- All Psychiatric Treatment services reviewed contained staff interventions reflected in the progress notes that were related to the staff interventions listed on the IRP.
- Progress notes reviewed consistently and clearly identified how the individual received the intervention and specified progress made toward identified IRP goal(s).

#### Compliance with Service Guidelines – Opportunities for Improvement:

- There were no opportunities for improvement noted within this scored area during this BHQR.



## Additional Comments on Practices

Additional strengths and concerns beyond the general scope of the review were discovered by reviewers. Additional issues/practice concerns may have the potential to impact service delivery, quality of care, or may represent a risk to the provider.

### Additional Comments on Practices - Strengths:

- The provider was located in a clean, spacious environment with private offices conducive to facilitating confidential treatment to individuals and families.
- The provider has been involved in a School-Based Therapy Program which brings therapeutic services to children, adolescents, and their families within the academic environment.
- The provider has offered a Social Skills Summer Group that gives children opportunity to "learn how to communicate with others, relax, and have fun."
- All records reviewed contained comprehensive Intake Forms completed not only at intake, but at time of re-authorization to ensure they capture any recent changes or needs including insurance, financial status, primary care physician, hospital admissions, and emergency contact information.

### Additional Comments on Practices – Opportunities for Improvement:

- No additional opportunities for improvement were identified during this BHQR.

## Recommendations

Providers are reminded of the responsibility to maintain internal processes which ensure immediate and permanent corrective actions on issues identified during the quality review process. DBHDD may request corrective action plans (CAPs) as quality review findings warrant as well as review agencies' internal documentation regarding corrective actions and ongoing quality assurance and quality improvement.

The following are recommendations given as a result of the review:

