

Survey Findings/Facility Response

Facility : COPPER CANYON ACADEMY

Survey Date - 8/27/2010 - Citation9

Survey Findings

A review of client records and an interview with staff revealed the licensee did not ensure a behavioral health professional, or a behavioral health technician, under the supervision of a behavioral health professional, initiates an assessment of a client before treatment is initiated.

Findings include:

A review of eight client records revealed two of the eight records reviewed contained documentation of the client's initiation to treatment before the initiation of the client's assessment. Specifically:

The record for client #2, with an admission date of July 12, 2010, did not contain documentation an assessment had been completed. However, the record for client #5 did contain a treatment plan dated July 18, 2010.

The record for client #5, with an admission date of November 21, 2009, did not contain documentation an assessment had been completed. However, the record for client #6 did contain a treatment plan dated January 22, 2010.

In an interview, the HR Director stated she did not have access to the counselors' office to see if the assessments were there.

The requirement for a licensee to ensure a behavioral health professional or a behavioral health technician, under the supervision of a behavioral health professional, initiates an assessment of a client before treatment is initiated was discussed with the Executive Director during the exit conference.

This citation is unrelated to the allegations.

Rule/Statute

R9-20-211. Client Records

D. A licensee shall ensure that a client record contains the following, if applicable:

10. The assessment information and updates to the assessment information, as required in R9-20-209(E) and (F);

Facility Response

The date (02/28/2011) 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.