

INSPECTION REPORT

Region

SUBSTANCE ABUSE AND MENTAL HEALTH PROGRAM OFFICE
SUBSTANCE ABUSE LICENSURE SITE VISIT REPORT

PROVIDER INFORMATION

Inspection ID: INSP-00011054

Service Provider

Street/Suite: 3000 41st Street, Ocean test

City/State/Zip Code: Marathon, FL 33050

Email: maureen.dunleavy@westcare.com

Owner: N/A

Chief Executive Officer: Frank C. Rabbito

Chief Financial Officer: Kristen Chaffee

Clinical Director: Maureen Dunleavy

Authorized Agents:

Inspection Dates: 6/10/2019 to 6/14/2019

Inspection Type: Substance Abuse Provider

SITES INSPECTED

	Site Name	Physical Address
View	2	5525 College Rd
View	3	1205 Fourth Street

View	5	99198 Overseas Hwy. Suite 5
View	4	3000 41st Street Ocean

SUBSTANCE ABUSE COMPONENTS INSPECTED

- Addictions Receiving Facility
- Inpatient Detoxification
- Outpatient Detoxification
- Inpatient Methadone Detoxification
- Outpatient Methadone Detoxification
- Intensive Inpatient Treatment
- Residential Level 1
- Residential Level 2
- Residential Level 3
- Residential Level 4
- Residential Level 5
- Level 1 Prevention
- Level 2 Prevention
- Day or Night Treatment Programs with Community Housing
- Day or Night Treatment
- Intensive Outpatient Treatment
- Outpatient Treatment
- Aftercare
- Case Management
- General Intervention
- Employee Assistance Program
- Treatment Alternatives for Safer Communities
- Medication & Methadone Maintenance Treatment
- Satellite Maintenance

Purpose of Inspection: The purpose of this on-site licensure inspection was to review programmatic and operational capability in order to ensure compliance with the statutory and regulatory requirements of Chapter 397, F.S. and Chapter 65D-30, F.A.C.

Report Prepared By: **Rose Fernandez, LCSW & Yaumara Ro**

Other Participants: N/A

Introduction/Administration:
 Guidance/Care Center, Inc. is a publicly funded, not-for-profit corporation with four facilities throughout the Keys. Located in Key Largo, Marathon and Key West the Guidance Care Center offers a comprehensive continuum of care for mental health and substance abuse services throughout Monroe County. The G/CC currently has a staff of over 100 employees including licensed professionals, certified addiction professionals, counselors, administrators, and computer, clerical, clinical support, transportation, and maintenance staff. The array of

services G/CC offers include: outreach, prevention, transportation, crisis support, assessment, intervention, outpatient, psychosocial rehabilitation/ drop-in, residential crisis stabilization and detoxification, residential mental health treatment, residential substance abuse treatment, case management, intensive on-site, HIV pre-post counseling and testing and aftercare. G/CC is also a co-occurring welcoming facility.

Methodology:

The inspection process included a review of clinical records and a review of program administration, policies, practices, and procedures. Medical Protocols, personnel files, grievance forms, safety manuals, training manuals, menus, employee and client handbooks and background screening information.

Review Findings:

Client's perception of strengths and abilities related to the potential for recovery, as well as Clinical summary/recommendation of high-risk behaviors/current stressors was left blank and not properly documented on several files.

In addition, clinical notes were not individualized nor stipulated client's progress or lack of.

Client rights were not aligned with 397.501 (1)-(10) F.S.

Please be aware that there is a PLADS glitch for Personnel Records score. There is a total score of 99.46; whereas should be reflected at 100% overall.

Two clients were interviewed. Both expressed satisfaction with treatment and contentment with staff and overall agency operations.

Strengths:

They are CARF accredited and have a contract with South Florida Behavioral Health Network (SFBHN), the Managing Entity (ME) in the Southern Region.

Centrally located in different sites within the Keys.

Compliance Issues:

	Compliance Issue	Corrective Action	Responsible Pe
View	Rule: 004(14)(b)1.i. Question: Client's perception of strengths and abilities related to the potential for recovery; and Site and Site Specific Comments: 4 Client's perception of strengths and abilities was left blank in the Biopsychosocial.		
View	Rule: 004(14)(b)1.m. Question: A clinical summary, including an analysis and interpretation of the results of the assessment, as described in sub-subparagraphs a.-l. Site and Site Specific Comments: 4 Clinical summary/recommendation of high risk behaviors/current stressors was left blank in the Biopsychosocial assessment.		
View	Rule: Question: Site and Site Specific Comments: 4 Notes were not individualized stipulating client's progress or lack of progress in meeting goals/objectives.		
View	Site and Site Specific Comments: Client rights are not aligned with 397.501, F.S.(1)-(10)		
View	Statute: .004(4)(a)3. Question: The employee's annual performance appraisal; Site and Site Specific Comments:2		

General Recommendations:

Train all clinical staff on being more client centered and individualize progress notes.

OVERALL SCORES

Patient Records (avg of all components):	99.94
Licensing Standards (avg of all components):	99.75
Quality Assurance:	0
Personnel Records:	99.46
Staff Development:	100.00
Background Screening:	100.00
Avg of all monitoring tools:	99.86

COMPONENT SPECIFIC LICENSURE STATUS SCORES

Click Update Scores to populate the component specific scores. Also calculated upon approval.

SITE-00000154 Component: Level 2 Prevention
Patient Charts Score: 100.00
Overall Component Score: 100.00 (Projected status: Regular)
SITE-00000154 Component: Level 1 Prevention
Patient Charts Score: 100.00
Overall Component Score: 100.00 (Projected status: Regular)
SITE-00000154 Component: Case Management
Patient Charts Score: 100.00
Overall Component Score: 100.00 (Projected status: Regular)
SITE-00000154 Component: General Intervention
Patient Charts Score: 100.00

Provider ID: PROV-001267

Site ID: SITE-00000154

Component ID: