



Mississippi Department of Mental Health
Provider Bulletin
Number IO-0085

Subject:

**DMH Certification
Site Visit Process**

Issue Date: March 25, 2019

Effective Date: January 1, 2019

Scope

All DMH Certified Providers of Mental Health, Intellectual and Developmental Disabilities and Substance Abuse Services

Purpose

Inform all DMH Certified Providers of the changes in DMH Certification Site Visit process.

Background

DMH Certification operates in a cycle; the current cycle is 2018 – 2020. All current Certificates of Operation are valid until the end of the cycle (December 31, 2020). In 2018, DMH visited all certified providers and conducted reviews of all programmatic and physical locations.

In years 2019 and 2020, all DMH certified providers will potentially only be reviewed once in that two year period. During the year an agency does not have an on-site certification visit, the agency will be required to complete a self-assessment and submit the results to DMH. The self-assessment will be issued to the agency with instructions for completion. At the end of 2020, new Certificates of Operation will be issued for all providers in good standing with DMH. Some providers may be issued a letter extending certification past the December 31, 2020 end of the cycle as the agency's Plan of Compliance (POC) is approved from the previous year's certification visit and subsequent Written Report of Findings (WRF.)

Subject

2018 - 2020 Certification Site Visit Process

Five working days before the Certification Visit, DMH will notify the certified provider of the upcoming visit. DMH will provide a copy of the proposed schedule for the visit and a Provider Summary of the most current information in the DMH Certification Database.

Providers are asked to review the Provider Summary and notify DMH immediately if currently listed locations have been closed or operating locations are not listed so that the schedule can be corrected. DMH

cannot issue new certificates for locations that are not reviewed by DMH staff during the 2018 - 2020 certification cycle.

An opening meeting for the visit will be scheduled at the agency's main office on the first day of the visit. The DMH certification visit's team leader will meet with the agency's available leadership staff to discuss various aspects of the review process, schedule and answer any other questions regarding the visit.

The Division of Certification's staff will be reviewing all services provided by the agency.

To assist with expediting the review process, providers must have the following information available to the DMH Review Team at the opening meeting:

- Most recent version of the agency's policy and procedure manual
- Staff training/continuing education plan
- List of vehicles used to transport the people receiving services by tag or other identification number and the location to be reviewed
- List of staff with following information:
 - Date of Hire
 - Current Position
 - Service Area
- List of Supervisors of Service Areas
- List of On-site Program/Service Supervisors/Coordinators
- List of individuals receiving services by service, service location (if the agency has multiple service locations) and the date they began received services from your agency.

DMH Reviewers may request additional information on-site during the review visit. All additional information is due within one (1) hour of the request.

Please note, Peer Ambassadors may be participating in the 2019 - 2020 certification reviews for all DMH/C and DMH/P providers. Peer Ambassadors will meet with agency leadership staff, review Peer Support Services and review the agency's development as a Recovery Oriented System of Care.

During the visit DMH staff will review the following:

- Implementation and continued compliance of the most recent approved Plan of Compliance
- Personnel records requested by DMH from the provided list
- Health and Safety review of all physical locations including transportation
- Individual service records requested by DMH from the provided list

All DMH certified providers of ID/DD Waiver community living programs and day programs will also be reviewed based on requirements as a community-based setting as defined by the HCBS Final Rule. DMH Bureau of Intellectual/Developmental Disabilities (BIDD) staff may be reviewing programs, interviewing agency staff and individuals to assess compliance with the Final Rule. This may require an increased number of BIDD staff to participate in the visit or may require additional time spent in the ID/DD Waiver Community Living Programs or ID/DD Waiver Day Programs.

An exit meeting with program staff will be scheduled at the conclusion of the visit. The exit meeting is not optional. However, the number of agency staff participating in the exit meeting with DMH is at the provider's discretion. During the exit meeting, DMH will identify strengths and positive aspects of the programs as well as identify opportunities for DMH to provide technical assistance or program development in the future.

Issues presented in the exit meeting are considered preliminary deficiencies. Only the Written Report of Findings, sent to the provider by DMH, is binding and must be addressed in the provider's Plan of Compliance.

Following the Certification Visit, DMH will have 30 days to provide a Written Report of Findings to the Provider. Providers will have 30 days to return a Plan of Compliance on the required DMH POC form located in the DMH Record Guide, Section K.

Deficiencies related to Chapter 13, 28, 29, 30 and/or 31 of the DMH Operational Standards must be corrected within 30 days of the date of the signature on the WRF. Plans of Compliance must include evidence of implementation of the corrective action. DMH may request additional documentation, information or evidence, if needed, to approve the submitted Plan of Compliance.

End of Provider Bulletin