

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROV DER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 1118	(X2) MULT PLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/13/2016
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NAME OF PROVIDER OR SUPPLIER BURKWOOD TREATMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 615 OLD MILL ROAD HUDSON, WI 54016
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X 000	<p>Initial Comments</p> <p>Surveyor: 15414</p> <p>On 2/29/16, Burkwood Treatment Center submitted renewal application materials and a fee of \$800, via check #3827001197, to the Division of Quality Assurance for recertification.</p> <p>On 4/13/16, a routine onsite recertification survey was conducted at Burkwood Treatment Center for the recertification period of 5/1/16 through 4/30/18.</p> <p>Approved services:</p> <ol style="list-style-type: none"> 1. Substance abuse medically monitored treatment service under Wisconsin Administrative Code DHS 75.11. 2. Substance abuse day treatment service under Wisconsin Administrative Code DHS 75.12. <p>Number of citations issued: 4 Clinical record sample size: 5 Personnel record sample size: 6</p>	X 000		
X1369	<p>DHS 75.03(13)(a) Treatment Plan Basis and Signatures</p> <p>A service shall develop a treatment plan for each patient. A patient's treatment plan shall be based on the assessment under sub. (12) and a discussion with the patient to ensure that the plan is tailored to the individual patient's needs. The treatment plan shall be developed in collaboration with other professional staff, the patient and, when feasible, the patient's family or another person who is important to the patient, and shall address culture, gender, disability, if any, and age-responsive treatment needs related to substance use disorders, mental disorders and trauma. The patient's participation in the</p>	X1369		

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X1369	<p>Continued From page 1</p> <p>development of the treatment plan shall be documented. The treatment plan shall be reviewed and signed first by the clinical supervisor and the counselor and secondly reviewed and signed by the patient and the consulting physician.</p> <p>This Rule is not met as evidenced by: Surveyor: 15414</p> <p>Based on record review and staff interview, it was determined the treatment plan was not reviewed and signed by the consulting physician. This was identified in each of the 5 records reviewed as evidenced by:</p> <p>The treatment plans of Clients' 1 through 5 were not signed by the consulting physician/medical director</p> <p>Chief Executive Officer (CEO) A reviewed some of the treatment plans and confirmed they were not reviewed and signed by the consulting physician. CEO A stated the facility contracted with a different consulting physician in 2015, and Physician B may not have been made aware he was to review and sign treatment plans.</p>	X1369		
X1378	<p>DHS 75.03(14)(a) Staffing Schedule and Documentation</p> <p>Staffing shall be completed for each patient and shall be documented in the patient's case record as follows: 1. Staffing for patients in an outpatient treatment service who attend treatment sessions one day per week or less frequently shall be completed at least every 90 days. 2. Staffing for patients who attend treatment sessions more</p>	X1378		

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X1378	<p>Continued From page 2</p> <p>frequently than one day per week shall be completed at least every 30 days.</p> <p>This Rule is not met as evidenced by: Surveyor: 15414</p> <p>Based on record review and interview, it was determined the program did not assure that staffing for patients in a residential substance abuse treatment service was completed at least every 30 days for patients attending treatment services more frequently than one day per week. This was identified in 5 of 5 substance abuse treatment records of patients involved in residential treatment over 30 days as evidenced by:</p> <ol style="list-style-type: none"> 1. Patient 1 was admitted on 10/30/15, and was discharged on 1/9/16. No 30 day staffing reviews signed by the counselor, clinical supervisor and the medical director were evident. 2. Patient 2 was admitted on 12/22/15, and was discharged on 2/5/16. No 30 day staffing reviews signed by the counselor, clinical supervisor and the medical director were evident. 3. Patient 3 was admitted on 7/15/15, and was discharged on 9/11/15. No 30 day staffing reviews signed by the counselor, clinical supervisor and the medical director were evident. 4. Patient 4 was admitted on 8/5/15, and was discharged on 9/15/15. No 30 day staffing reviews signed by the counselor, clinical supervisor and the medical director were evident. 5. Patient 5 was admitted on 7/23/15, and was discharged on 9/9/15. No 30 day staffing reviews 	X1378		

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X1378	<p>Continued From page 3</p> <p>signed by the counselor, clinical supervisor and the medical director were evident.</p> <p>Chief Executive Officer (CEO) A and Clinical Supervisor C reviewed some of the records and confirmed that 30 day staffing reviews were not included in the records. Clinical Supervisor C stated she was not aware that all clients receiving residential substance abuse treatment services would need to be reviewed at least every 30 days. Clinical Supervisor C stated she would review with the consulting physician patients receiving medications prescribed by the consulting physician, but that no staffing notes signed by the counselor, clinical supervisor and the medical director were generated or retained.</p> <p>Five of 5 records of patients receiving treatment sessions seven days per week did not include documentation of staffing at assessment or every 30 days with the counselor, the clinical supervisor, and a physician knowledgeable in the practice of addiction medicine.</p>	X1378		
X1382	<p>DHS 75.03(14)(e) Staffing Report Signatures</p> <p>A staffing report shall be signed by the primary counselor and the clinical supervisor, and by a mental health professional if the patient is dually diagnosed. The consulting physician shall review and sign the staffing report.</p> <p>This Rule is not met as evidenced by: Surveyor: 15414</p> <p>Based on record review and interview, it was determined the facility did not complete staffing reports every 30 days with required signatures. It</p>	X1382		

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X1382	<p>Continued From page 4</p> <p>was also determined that Counselor C who is a clinical supervisor, did not review client progress at least every 30 days with the counselor or the medical director. This was identified 5 of 5 client records involved in services over 30 days as evidenced by:</p> <p>Refer to Tag X1378 for additional information.</p> <p>Counselor C is certified as a Clinical Substance Abuse Counselor and Clinical Supervisor. Counselor C stated she was not aware that all clients receiving services more than 30 days would need to be staff with treatment team and medical director.</p> <p>Clinical Supervisor C confirmed patients had not been staffed and that the records contained no staffing reports signed by the primary counselor and the clinical supervisor, and by a mental health professional if the patient was dually diagnosed. As no staffing reports were generated, the consulting physician did not review and sign the staffing reports.</p>	X1382		
X1391	<p>DHS 75.03(17)(c) Discharge Summary</p> <p>The discharge summary shall include all of the following: 1. Recommendations regarding care after discharge. 2. A description of the reasons for discharge. 3. The patient's treatment status and condition at discharge. 4. A final evaluation of the patient's progress toward the goals set forth in the treatment plan. 5. The signature of the patient, the counselor, the clinical supervisor and, if the patient is dually diagnosed, the mental health professional, with the signature of the consulting physician included within 30 days after the discharge date.</p>	X1391		

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X1391	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by: Surveyor: 15414</p> <p>Based on record review and interview, it was determined the program did not assure that the discharge summaries of patients receiving substance abuse treatment services were signed by the consulting physician within 30 days following discharge. This was identified in 5 of 5 discharge summaries reviewed as evidenced by:</p> <ol style="list-style-type: none"> 1. Patient 1 was discharged on 1/9/16. The discharge summary was not signed by the consulting physician. 2. Patient 2 was discharged on 2/5/16. The discharge summary was not signed by the consulting physician. 3. Patient 3 was discharged on 9/11/15. The discharge summary was not signed by the consulting physician. 4. Patient 4 was discharged on 9/15/15. The discharge summary was not signed by the consulting physician. 5. Patient 5 was discharged on 9/9/15. The discharge summary was not signed by the consulting physician. <p>The program did not assure that the discharge summaries of patients receiving substance abuse treatment services were signed within 30 days following discharge by the service physician knowledgeable in the practice of addiction medicine.</p>	X1391		

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X 000	<p>Initial Comments</p> <p>On 4/10/2018, a routine onsite recertification survey was conducted at Burkwood Treatment Center for the recertification period of 5/1/2018 through 4/30/2020.</p> <p>Approved services: 1. Substance abuse medically monitored treatment service under Wisconsin Administrative Code DHS 75.11. 2. Substance abuse day treatment service under Wisconsin Administrative Code DHS 75.12.</p> <p>Number of citations issued: 2 Clinical record sample size: 10 Personnel record sample size: 4</p>	X 000		
X1378	<p>DHS 75.03(14)(a) Staffing Schedule and Documentation</p> <p>Staffing shall be completed for each patient and shall be documented in the patient's case record as follows: 1. Staffing for patients in an outpatient treatment service who attend treatment sessions one day per week or less frequently shall be completed at least every 90 days. 2. Staffing for patients who attend treatment sessions more frequently than one day per week shall be completed at least every 30 days.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews with staff, the program did not complete staffing at least every 30 days in a sample of 4 of 7 clients having been involved in treatment for more than 30 days.</p> <p>Clients 1, 2, 3, and 4 did not have staffings completed after stays greater than 30 days in the program.</p>	X1378		

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X1378	<p>Continued From page 1</p> <p>Findings include:</p> <p>Per record review, Client 1 was admitted to the program on 12/12/2017 and was discharged on 1/31/2018 with no staffing completed at least every 30 days.</p> <p>Per record review, Client 2 was admitted to the program on 12/13/2017 and was discharged on 1/25/2018 with no staffing completed at least every 30 days.</p> <p>Per record review, Client 3 was admitted to the program on 11/27/2017 and was discharged on 1/8/2018 with no staffing completed at least every 30 days.</p> <p>Per record review, Client 4 was admitted to the program on 12/8/2017 and was discharged on 1/19/2018 with no staffing completed at least every 30 days.</p> <p>Executive Director-A was interviewed on 4/10/18 at approximately 4:00pm and indicated that in 2017 there was a change in the Clinical Director position which would have been responsible for assuring the clinical pieces for client staffings was completed as required.</p>	X1378		
X2729	<p>DHS 75.11 (5)(a) Clinical Supervision - Medically monitored</p> <p>(a) A medically monitored treatment service shall provide for ongoing clinical supervision of the counseling staff. Ongoing clinical supervision shall be provided as required in s. SPS 162.01.</p> <p>Note: Section SPS 162.01(1) states that a clinical</p>	X2729		

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X2729	<p>Continued From page 2</p> <p>supervisor shall provide a minimum of:</p> <ol style="list-style-type: none"> 1. Two hours of clinical supervision for every 40 hours of work performed by a substance abuse counselor-in-training. 2. Two hours of clinical supervision for every 40 hours of counseling provided by a substance abuse counselor. 3. One hour of clinical supervision for every 40 hours of counseling provided by a clinical substance abuse counselor. 4. One in person meeting each calendar month with a substance abuse counselor-in-training, substance abuse counselor, or clinical substance abuse counselor. This meeting may fulfill a part of the requirements above. <p>This Rule is not met as evidenced by: Based on record reviews and interviews with staff, the agency did not provide ongoing clinical supervision of the counseling staff for 3 of 3 counseling staff which required clinical supervision.</p> <p>Counselors-C, D, and E did not receive clinical supervision hours as required by a qualified clinical supervisor.</p> <p>Findings include:</p> <p>According to SPS 162.02(1), clinical supervision may be provided by a clinical supervisor in-training, an intermediate or independent clinical supervisor, a physician knowledgeable in addiction treatment, or a psychologist knowledgeable in psychopharmacology and addiction treatment.</p> <p>On 4/10/2018, Clinical Director-B's clinical supervision logs were reviewed for Counselors-C, D, and E. Counselor-C was identified as a CSAC</p>	X2729		

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X2729	<p>Continued From page 3</p> <p>(Clinical Substance Abuse Counselor) and CS-IT (Clinical Supervisor- In-Training) which requires 1 hour of clinical supervision per 40 hours worked. Counselor-D was identified as a SAC (Substance Abuse Counselor) which requires 2 hours of clinical supervision per 40 hours of counseling. Counselor-E was identified as a SAC-IT (Substance Abuse Counselor- In-Training) which requires 2 hours of clinical supervision per 40 hours worked.</p> <p>According to record reviews of clinical supervision logs, Clinical Director- B was providing clinical supervision to Counselors- C, D, and E from November/December 2017 to current date of onsite survey 4/10/2018. According to DSPS (Department of Safety and Professional Services), Clinical Director-B is credentialed as a Licensed Professional Counselor (LPC) with a speciality in Substance Use Disorder and is not credentialed as a clinical supervisor and is not qualified to provide clinical supervision to Counselors- C, D, and E.</p> <p>On 4/10/2018 at 12:45pm, Clinical Director-B was interviewed and verified that s/he was providing clinical supervision hours to Counselors- C, D, and E as a Licensed Professional Counselor.</p>	X2729		