



Provider Forum Meeting Minutes

Date January 19, 2017

Meeting Called By	Network Operations
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AGENDA

1. Agenda topic: Welcome
Presenter(s):

Discussion	<ul style="list-style-type: none"> • Newsbreak 66 1/14/17: Clinical Communication from IDD Care Coordination, please review to ensure that you are up to date on current requirements and changes • Listening Session/Public Forums for the DHHS proposed research based behavioral health treatment for youth on the Autism Spectrum: For information and to request the presentation please contact Kenneth Bausell at Kenneth.bausell@dhhs.nc.gov • Changes to CCP 8C regarding Nurse Practitioner Credentialing. The changes have not been posted to CCP 8C, please keep checking and ensure you review. Summary: The deadline of July 2017 for NP's to become certified as a Psychiatric MHNP is being removed and there will be specific requirements for what a NP will need to document. Trillium is currently working on a plan to review the changes and determine qualifications for NP's to continue to provide services to psychiatric population. Trillium will keep you informed as the plan for this is developed. • Nash County Transition: There is a Nash County page on Trillium's website with information on the transition. Please review for information. • Newsbreak 67 1/17/17: ICD-10 Diagnosis Codes. Please review this important information related to billing. • January News brief 22 1/10/17: Please review. This contains important information for Providers. • SAMHSA News Release 1/13/17 regarding changes to 42CFR. Please go to the SAMHSA website and review this information
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2. Agenda topic: Committee Updates
Presenter(s): Kristy Reed

Discussion	<ul style="list-style-type: none"> ○ Clinical Advisor Committee (CAC) no update for this meeting. The CAC will meet again on 2/7/17 ○ Provider Council: The Council is continuing to discuss how providers can more effectively utilize interpretation services within their practices. The Council received an update on the Provider LME Leadership Forum and is interested in working on tasks that this advocacy group may be involved with.
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3. Agenda topic: Provider Spotlight
Presenter(s):

Discussion	<ul style="list-style-type: none"> • Coastal Horizons • GHA - Port City Academy <ul style="list-style-type: none"> ○ Currently have openings
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4. Agenda topic: Quality Management
Presenter(s): Wylanda Jones



Discussion	<ul style="list-style-type: none"> As a reminder, IRIS report should be completed in its entirety. Even though some fields are not mandatory, they are still required including but not limited to NPI#, MH License#, CAHBA#, date of birth and gender. Make sure that the provider contact information is correct, especially the email address and telephone number in the event additional information is needed. Be mindful of response times when additional information is needed as we have to reporting timeframes also in order to maintain compliance. IRIS reporting timeframes are as followed. IRIS reports are due with 72 clock hours from the date that the agency learns about an incident. Allegations need to be reported within 24 hours of learned date to DSHR. Then within 72 clock hours from the learned date, the incident needs to be entered into IRIS. The 5 day report needs to be updated in IRIS within 5 working days of the learned date. In the event an individual elopes, the time that the individual was absent needs to be documented within the IRIS report. If it is less than 3 hours but requires police contact, the category that should be selected is consumer absence of more than 3 hours or that requires police contact. Please refrain from using other unless there is absolutely no other category that identifies with the type of incident. Also, the IRIS report needs to be updated and resubmitted through the supervisor section once the individual has been located. Back up staffing: Forms are due every 2 weeks. The technical guide states that the form is due within a week. Reports will be considered late after the 7th day after the 15th and the last day of the month. Ex(1st-15th) and (16-end of month) . If hours are missed because of staff, a form needs to be submitted. (ex. Staff out sick and parent declines worker) <p>We are requesting that each agency ensure that staff are using the updated state form. Be sure to include Individual's first and last name along with the date of birth. This information was sent out in the Newsbreak 64.</p> <p>If you have any questions contact Wylanda Jones or Julie McCall. Email address is incidentreporting@trilliumnc.org</p>
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5. Agenda topic: Network Development

Presenter(s): Kathy Mathis

Discussion	<ul style="list-style-type: none"> Introduced myself as the new Network Development Manager. Spoke about the 2017 Gaps & Needs Assessment Stakeholder Surveys - shared how they can be accessed electronically through our website and through the QR code reader on the flier that came out in the Network News Break. Emphasized the importance of having as many stakeholders and consumers/families complete these surveys as it helps us identify and address the service gaps in our catchment. Provided my email address for providers to contact me regarding any questions about surveys or if they would like to have hard copies of surveys.
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6. Agenda topic: Network Routine Monitoring Mini-Training

Presenter(s): Adrienne Beatty

Discussion	<ul style="list-style-type: none"> overview- routine monitoring review tool network department agenda purpose/use of provider monitoring tools.
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- types of tools & where to find them
- how to find the guidelines
- helpful hints for successful monitoring
- nc dhhs: provider monitoring tools
- provider monitoring tools are used across the state to ensure compliance with state and federal regulations.
- located on the nc dhhs website- www.ncdhhs.gov/document/provider-monitoring-tools
- nc dhhs provides free webinars and detailed trainings for each type of monitoring- <http://www.ncdhhs.gov/providers/provider-info/mental-health/provider-monitoring>
- overview and instructions
- 4 types of provider monitoring tools
 - agency monitoring tool
 - lip monitoring tool
 - unlicensed afl tool
 - new unlicensed site tool
- overview and instructions
- routine monitoring consists of a routine review and a post-payment review.
- for licensed independent professionals (lips) that includes the lip review tool and the lip post-payment review tool.
- for provider agencies, the selection of tools is determined by the type of services provided.
 - the routine monitoring tool is used except when the agency provides unlicensed afl services, in which case the unlicensed afl review tool is used.
 - the specific post-payment review tool(s) to be used is based on the combination of services included in the sample.
 - for those services that dhsr-mhl surveys on an annual basis (i.e., residential services and opioid treatment services), only a post-payment review is done.
- overview and instructions
- all 4 tools are in an excel spreadsheet format with multiple tabs for different areas/categories of monitoring.
- overview and instructions
- each tool has specific guidelines, which are embedded in the tool as a pdf file.
- the guidelines- what will be reviewed?
- the review tool guidelines:
 - specify which tool/tabs will be used for each service reviewed.
 - provide detailed requirements including the applicable law or statute related to the review question.
 - specify how to meet each requirement .
 - specify how the reviewer must score each item on the tool.
- the guidelines- example- tool question #1
- the guidelines- example- tool question #2
- helpful hints
- review the guidelines carefully and ensure that documentation

	<p>meets the requirements.</p> <ul style="list-style-type: none"> • communicate with the lead of the review for questions, needed accommodations, etc. • tab files, both personnel and clinical, to ensure all items are found and the review goes smoothly. • emrs do not have to be printed for a review. you can give guest usernames/passwords to allow reviewers to review on your system.
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7. Agenda topic: Network Operations Updates

Presenter(s): Kristy Reed

Discussion	<ul style="list-style-type: none"> • News Brief Review • Reference to new ADSM 45-1 • Review of no co-pays allowed • Quarterly Provider Maintenance
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Meeting Adjourned

Next Meeting Date: March 16, 2017

(All meetings convene from)

Supporting Document/Attachment for Minutes:



Intensive Family Preservation Services

Serving all of Region 9:

Bladen, Brunswick, Columbus, Duplin, New Hanover, Pender, Robeson, Sampson

Coastal Horizons Center's Intensive Family Preservation Services is a short term, intensive (4-6 weeks) therapeutic family approach intended to empower and equip families with the resources and skills necessary to maintain in-home placement for youth ages birth-17 years.

Intensive Family Preservation Services include: Crisis management, intensive case management, individual and/or family therapy, skills training, behavioral supports and other rehabilitative supports. These services are provided in the home with the family as well as within the community to prevent the need for out-of-home placements, prevent further abuse and neglect, and enhance social development.

- Flexible scheduling options available
- Services are provided by an experienced and trained Family Preservation Specialist
- 24/7/365 on-call availability for crisis situations
- Services can begin within 48 hours of referral, with no assessment needed, contingent on availability
- Services are individualized and designed to be unique to your family's needs and abilities
- Specialist maintains relationships with and works closely with Schools, Juvenile Justice, DSS, and other community agencies
- Services are available regardless of insurance status

Contact:

Ryan Estes, Program Director
910-259-0668

E-mail: restes@coastalhorizons.org

-OR-

Lisa Burriss, Program Supervisor
910-515-0493

E-mail: lburriss@coastalhorizons.org

Coastal Horizons Center
New Hanover County Office
609 Shipyard Blvd
Suite 102
Wilmington, NC 28412

Telephone: (910) 202-3155
Crisis: 1-800-672-2903
Fax: (910) 202-5772



**Coastal
Horizons**

"Promoting choices for healthier lives and safer communities"



Coastal Horizons Center, Inc.

PROMOTING CHOICES FOR HEALTHIER LIVES AND SAFER COMMUNITIES

A CRITICAL ACCESS BEHAVIORAL HEALTH AGENCY

Intensive In-Home (IIH) Services

Coastal Horizons utilizes a team approach designed to address the identified needs of children and adolescents, who due to serious and chronic symptoms of emotional, behavioral, and/or substance use disorders, are unstable in the home and community without intensive interventions.

Our IIH services include: Crisis Management, Intensive Case Management, Individual and/or Family Therapy, Substance Abuse Counseling, Skills Training, and Supports to prevent the need for or assist with returning from out-of-home placements.

- Flexible scheduling options available
- Services are provided by teams of three professionals with extensive experience working with children, adolescents and families.
- 24/7/365 on-call availability for crisis situations
- Trauma Informed agency
- Services are individualized and designed to be unique to each family's needs and abilities
- The IIH Team maintains relationships and works closely with Schools, Juvenile Justice, DSS, and other community agencies to offer a complete level of care.
- Seven Challenges Model available for treating Substance Use Disorders
- Child Psychiatrist available on staff

Now Serving Residents of Pender, Brunswick, New Hanover, Onslow, Duplin, Bladen, & Columbus Counties!

Referral Contact Information...

Call our Program Manager or any one of our Intensive In-Home Team Leaders directly:

* Stephen Rieman, Program Manager (910) 202-3155

We can also accept referrals by Fax: (910) 202-3172

Hablamos Español



"Promoting choices for healthier lives and safer communities"

New Hanover County
615 Shipyard Blvd.
Wilmington NC 28412
(910) 343-0145

Pender County
803 S Walker St.
Burgaw NC 28425
(910) 259-0668

Brunswick County
120 Coastal Horizons Drive
Shallotte, NC 28470
(910) 754-4515

The Incredible Years[®]



Parents, teachers, and children training series

Serving New Hanover County and Pender County

The Incredible Years Parenting Program is a research-based program that encourages healthy development in children ages 6-12 by strengthening parenting skills and developing positive methods for managing children's challenging behaviors.

Parents learn how to:

- Play with their children
- Offer praise and rewards
- Create household rules and set limits
- Use positive discipline methods
- Partner with teachers so that they can promote children's academic, social, and emotional skills.

Program Goals:

- Promote social, emotional, and academic skill in children
- Promote parental skill and strengthen families
- Promote a stronger connection between school and home
- Prevent and reduce behavioral problems in children

Need to know:

- FREE Childcare
- FREE Family Dinner every week
- Incredible Years is for parents with children ages 6-12.
- Parents and/or caregivers attend weekly group sessions for 16 weeks.
- Money and prize incentives for participating in and completing the program

Contact:

Nicole Malnar, Lead Facilitator

910-523-3016

E-mail: nmalnar@coastalhorizons.org

-OR-

Andrea Bowens, Co-Facilitator

910-202-0840

E-mail: abowens@coastalhorizons.org

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New Hanover County Office
615 Shipyard Blvd.
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Telephone: (910) 790-0187
Crisis: 1-844-709-4097
Fax: (910) 790-0189



Coastal
Horizons

Promoting Choices for Healthier Lives
and Safer Communities



Child First was evaluated with a randomized, controlled trial with strong positive outcomes. (Child Development, January/February 2011)

CHILD FIRST DEMONSTRATED:



CONTACT

Darcy Lowell, MD, CEO, Child First, Inc.

info@childfirst.com
203.538.5222

917 Bridgeport Avenue, Shelton, Connecticut 06484

www.childfirst.com

Child First is an evidence-based, intensive, early childhood model that works with the most vulnerable young children and their families, helping them heal from the devastating effects of stress and trauma. Our two-generation approach builds strong, nurturing, caregiver-child relationships, promotes adult capacity, and connects families with needed services. This home-based intervention increases emotional health and learning success, and prevents child abuse and neglect.

The Challenge

Scientific research in brain development clearly shows that **high-risk environments** (e.g., where there is maternal depression, domestic violence, substance abuse, or homelessness) lead to levels of stress that can be **"toxic"** to the **young, developing brain**. Without the buffer of strong, nurturing relationships, the results are **long-term damage with significant emotional/behavioral, learning, and health problems**.

The Child First Response

Child First is an intensive, home-based model for children (prenatal through age five years) and their families, utilizing a professional team of a Master's level Mental Health/Developmental Clinician and a Care Coordinator. Key model components include:

- 1. Psychotherapeutic, two-generation intervention**, which helps build a nurturing, responsive, parent-child relationship. This protects the child's developing brain from the damage of chronic stress, heals the effects of trauma and adversity for both child and parent, and promotes strong emotional health and cognitive growth.
- 2. Care coordination** provides hands-on connection to broad community-based services and supports for all family members, leading to family stabilization, decreased stress, and utilization of growth-enhancing community resources.
- 3. Facilitation of executive functioning** and self-regulation capacity is promoted for both parent and child, including memory, attention, planning, organization, and reflection.

Child First Accomplishments and Impact

- Child First has been designated by HHS as "evidence-based" under the federal Maternal, Infant, and Early Childhood Home Visiting Program.
- Child First now has 15 sites throughout CT, showing the same strong, evidence-based outcomes, and will begin national replication in 2015.
- Child First's cost effective intervention is projected to prevent the need for physical and psychiatric hospitalization, foster care, special education, and incarceration.
- Child First has been recognized by the Coalition for Evidence-Based Policy, Social Impact Exchange, Harvard Center on the Developing Child, Pew Home Visiting Campaign, Zero to Three, National Conference of State Legislators, and Connecticut and American Hospital Associations.



Coastal
Horizons

Services for Children & Young Adults

At Coastal Horizons Center

Presented by Lauren Ballard MSW LCSW-A

Coastal Horizons Center, Inc.

Child Mental Health & Community Based Services

Child First
(Prenatal-6 years)

Parent-Child Interaction Therapy
(Birth-6 years)

Intensive Family Preservation Services
(Birth-17 years)

Intensive In-Home Services
(3-20 years)

Incredible Years
(6-12 years)

Open House Youth Shelter & Residential Services
(6-18 years)

School-Based Mental & Behavioral Health
(K-12th grade)

Rape Crisis Center
(all ages)

For information about any of these services or to refer a child or teen, please call 910-343-0145 or visit www.CoastalHorizons.org

Substance Abuse & Mental Health

- Outpatient Mental Health Treatment
 - Individual, family, and group counseling services for children, teens, and adults
 - Psychiatric Evaluation and Medication Management
- Clinica Latina
 - Counseling Services (Children, Adolescents, and Adults)
 - Teen Groups
 - Social Skills & Esteem-Building
 - Rape Crisis Services (En Español)

Referrals/More Info.: 910-343-0145

Open House Youth Shelter & Residential Services

24hr-Access Emergency Shelter (up to 21 days)

Residential Services (more than 22 days)

24hr hotline for youth in crisis

Ages 6-18 (until 19th Birthday)

Youth may refer themselves



24hr Hotline
1-800-672-2903

Referrals/ More Info.
910-392-7408

Rape Crisis Center

- Services for victims of sexual assault (of all ages)
- 24hr Crisis Response
 - Hotline
 - Hospital Response
- Individual / Group Counseling
- Court / LE Advocacy
- Information & Referrals
- Services in Spanish

NHC: 910-392-7460

Brunswick: 910-754-7949



Community Based Family Services

- Intensive In-Home Services
 - Ages: 3 - 20
 - New Hanover, Brunswick, New Hanover, Onslow, Duplin, Bladen, and Columbus
- Intensive Family Preservation Services
 - Ages: Birth - 17
 - Regions 7, 9, & 11
- Child First
 - Ages: Prenatal - 6
 - Pender, Brunswick, & New Hanover
 - No exclusion criteria
- Incredible Years
 - Ages: 6 - 12
 - New Hanover & Pender
- Referrals/More Info: Call 910-202-3155



Intensive In Home Services

- Provides crisis management, intensive case management, individual and/or family therapy, substance use counseling, skills training, and supports to prevent out-of-home placement
- Team of 3 professionals (Licensed/provisionally licensed therapist and 2 qualified professionals)
- Trauma informed therapy
- Seven Challenges model available for treatment Substance Use Disorders

Intensive Family Preservation Services

- Provides crisis management, intensive case management, individual and/or family therapy, skills training, behavioral supports, and other rehabilitative supports
- Services are provided in the home or community to prevent the need for out of home placements, prevent further abuse and neglect, and enhance social development
- DSS referrals only
- 4-6 weeks/quick stabilization
- \$500 Flex funding for each family

Child First

- Services are provided in the home with the child, parents, and other primary caregivers
- Team approach designed to assist children with very challenging behaviors or delays in their environment or learning
- Helps the family manage stressors such as drug use, homelessness, fighting in the home, and financial problems

Incredible Years

- Research-based parenting program that encourages healthy development by strengthening parenting skills
- Teaches positive methods to manage children's challenging behaviors
- Weekly group sessions for 16 weeks
- Free childcare
- Free family dinner
- Money and prize incentives for participating in and completing the program

Cognitive Behavioral Intervention for Trauma in Schools

- School-based group and individual intervention
- Designed to Reduce Symptoms of PTSD, depression, behavioral problems, improve school functioning, grades, and attendance
- Provides peer and parenting support
- Teaches coping skills

School-Based Health Services

- Kindergarten - 12th Grade
- New Hanover, Brunswick & Pender
 - PATH in Pender
 - WHAT in New Hanover
 - Aggression Replacement Training (ART) in Brunswick
- Individual, Family, & Group Counseling
- Mental Health, Substance Abuse, & Prevention Services



Prevention

Outdoor Adventure / Alpine Tower

Programs for Teens

- Unique You (6-12yrs)
- Protecting Me, Protecting You (K-5)
- Project Alert (13-17yrs)
- Strengthening Families (for 6-12yrs and 10-14yrs, plus their families)
- Towards No Drug Abuse (TND) & Towards No Tobacco (TNT)



Referrals / More Info.: 910-202-0840

Thank You & Questions

Lauren Ballard, MSW LCSW-A
Intensive In-Home Coordinator
Coastal Horizons Center
910-777-1966
lballard@coastalhorizons.org

Mission

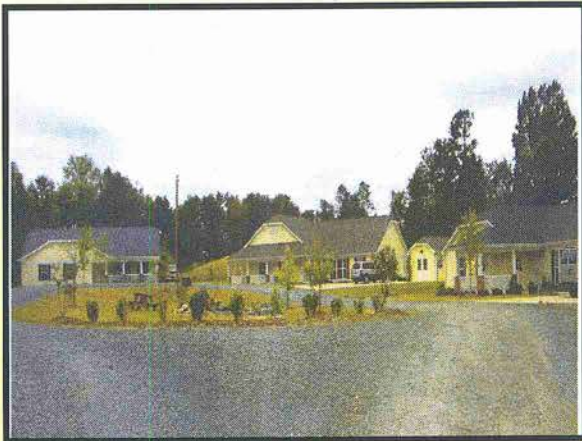
GHA Autism Supports provides quality, community services to meet the unique needs of individuals with Autism Spectrum Disorder.

Vision

Our vision is to create environments where people of all ages with Autism Spectrum Disorder are understood, valued and given opportunities to grow individually, as well as to contribute to the community.

Organizational Goals

- Each individual will meet their maximum physical, social, emotional and intellectual potential.
- Each individual will acquire the skills necessary for them to function as independently as possible.
- Each individual will live in the least restrictive environment that is appropriate for their needs.



For additional information, please contact
(704) 982-9600

or visit www.ghautismsupports.org.

GHA Autism Supports is a 501(c)(3) non-profit charitable organization and contributions are tax deductible as allowed by law.



I would like _____ to make a contribution!

Enclosed is my contribution.

Please make checks payable to *GHA Autism Supports*.

I would like to pledge \$ _____.

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone Number: (____) _____

Please charge my donation of \$ _____

to my MasterCard Visa Discover Card AMEX

Account Number: _____

Expiration Date: _____

Name on account: _____

Signature: _____

This gift is: In Memory of In Honor of
Name: _____

Please send acknowledgement of this gift to:

My company _____ will match this donation. *(Please include form if possible).*

Please contact me regarding volunteer opportunities!

Thank you so much for your generous support!

Return this form to:
GHA Autism Supports
P. O. Box 2487



GHA Autism Supports is a 501(c)(3) non-profit organization offering residential, vocational, day and community services for residents of North Carolina with a primary diagnosis of Autism Spectrum Disorder.

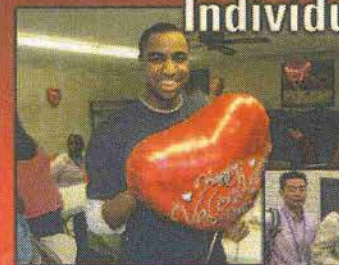
Empowering Through Choices



Recognizing Opportunities for Achieving



Individual Uniqueness



Valued Relationships

History

GHA Autism Supports is a 501(c)(3) private, non-profit organization headquartered in Albemarle, North Carolina. The agency was developed in 1978 as committed parents recognized a need for services for individuals with Autism Spectrum Disorder. The first residence became home to five children, ages 5 -12, and as they grew in age, the organization grew with them. Additional services were also developed to meet the needs of older teens and young adults.

In our over 35 year history, GHA Autism Supports has expanded from an agency serving five children to one that currently supports over ninety individuals in programs providing residential, vocational, educational, community and in-home services. These services are provided under the auspices of local management entities which include Cardinal Innovations Healthcare Solutions, a leader in developing managed behavioral healthcare services in the State of North Carolina.

What is Autism Spectrum Disorder?

Autism Spectrum Disorder (ASD) is a developmental disability that affects communication, social interaction and behavior. Individuals with ASD typically have difficulty understanding verbal and non-verbal communication, and may act inappropriately toward other people, objects and events. ASD is usually diagnosed in early childhood and occurs in approximately 1 out of every 68 births. Evidence suggests that the prevalence rate in North Carolina is even higher than the national average at 1 in 58. The severity of the disability varies from individual to individual. Mental retardation and learning disabilities may also accompany a diagnosis of Autism Spectrum Disorder.

GHA Autism Supports Services

Residential Services: The primary service offered through GHA Autism Supports is the provision of residential supports through a host of living alternatives. This includes homes for children, adults, as well as a working farm for adults eighteen and over. We also offer independent living for individuals who assume the lead in their life's plan. The focus of all services is to assist individuals in achieving their chosen personal goals, as well as to help them manage their life experiences and choices. A person-centered treatment team provides evaluation and services for individuals in the all areas of their personal life. Each individual's support plan is not only based upon their unique needs, but also on their individual strengths and interests.

Day Services: In addition to providing residential services for individuals, GHA Autism Supports provides individualized day services through a variety of settings. This includes Carolina Farms situated on 39 acres of beautiful countryside. In this environment, these individuals are learning farm operations inclusive of harvesting vegetables, caring for the animals and overseeing a Community Supported Agriculture program. Vocational services also include job skill training, as well as art, music, and sensory therapy for adolescents and adults. These services enable participants to embrace a variety of opportunities designed to increase their individual skill levels.

Supported Employment Program: For adults residing in our apartments and supervised living homes, GHA Autism Supports offers a Supported Employment Program. We provide individualized job assessment and training services. Once employed, job coaching staff provides supervision to ensure each individual's success.

Community Services: GHA Autism Supports serves adults in their community. The Community Service Program provides these individuals with access to our day, job support and community based services.

Expansion of Services: Families from the Wilmington area strongly advocated for GHA Autism Supports to provide supports for their loved ones within their home community. We began our outreach to this area in March of 2010 and have continued to expand our service array most recently with the opening of Coastal Endeavors in February, 2014, a day program for adults. We currently provide supported living services, community services, vocational and supported employment services. We remain committed to our expansion efforts as well as the opportunities to forge partnerships within the coastal area.

GHA Autism Supports strives to maintain best practices in all service areas in an effort to afford a quality life to all individuals supported. GHA Autism Supports is recognized as a model service provider for individuals with ASD and has hosted visitors from Scotland, Canada, Germany, England, Iceland, Denmark and Japan to help in supporting individuals in their countries with ASD.

GHA Autism Supports is licensed by the Division of Health Service Regulation of the North Carolina Department of Human Resources, and is recognized as a Gold Star Provider of Service by Cardinal Innovations Healthcare Solutions. In addition, GHA Autism Supports is nationally accredited by CARF. ICF/MR homes are certified by the North Carolina Division of Medical Assistance. GHA Autism Supports is affiliated with the Division TEACCH program at UNC-CH, the Autism Society of North Carolina (ASNC) and is a member of the North Carolina Association of Community-Based IID and innovations providers as well as North Carolina Providers Council.

Mission

GHA Autism Supports provides quality, community services to meet the unique needs of individuals with Autism Spectrum Disorder.

Vision

Our vision is to create environments where people of all ages with Autism Spectrum Disorder are understood, valued for their diversity and are given opportunities to grow, as well as to contribute to the community.



Organizational Goals

- Each individual will meet their maximum physical, social, emotional and intellectual potential.
- Each individual will acquire the skills necessary for them to function as independently as possible.
- Each individual will live in the least restrictive environment that is appropriate for their needs.



www.ghautismsupports.org

Administrative Office:

P. O. Box 2487

Albemarle, NC 28002

704-982-9600

Wilmington Operations:

P.O. Box 4122

Wilmington, NC 28406

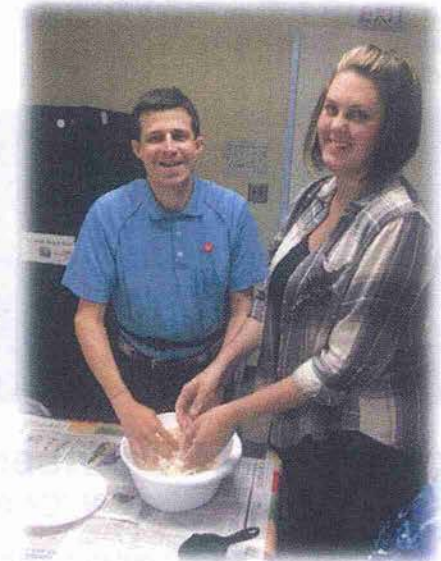
910-769-1046



*Port City Academy is located in the
Harrelson Center at
20 N. 4th Street, Suite 300B in
downtown Wilmington.*

PORT CITY ACADEMY

A Licensed Day Program
Operated by



*Providing quality, community
services to meet the unique needs
of individuals with
Autism Spectrum Disorder*

GHA Autism Supports

GHA Autism Supports is a 501(c)(3) private, non-profit organization headquartered in Albemarle, North Carolina. The agency was developed in 1978 as committed parents recognized a need for services for individuals with Autism Spectrum Disorder. The first residence became home to five children, ages 5 -12, and as they grew in age, the organization grew with them. Additional services were also developed to meet the needs of older teens and young adults. In our over 38 year history, GHA Autism Supports has expanded from an agency serving five children to one that currently supports nearly 100 individuals in programs providing residential, vocational, educational, community and in-home services. These services are provided under the auspices of local management entities, which includes Trillium Health Resources and all other State managed care organizations.



Expansion of Services

Families from the Wilmington area strongly advocated for GHA Autism Supports to provide supports for their loved ones within their home community. We began our outreach to this area in March of 2010 and have continued to expand our service array most recently with the opening of Port City Academy in the summer of 2016. We currently provide supported living services, community services, vocational and supported employment services. We remain committed to our expansion efforts, as well as the opportunities to forge partnerships within the coastal area.

Who We Are

Port City Academy, operated by GHA Autism Supports, opened in the summer of 2016. Services provided at Port City Academy include *Day Supports Individual* and *Day Supports Group*. The operating hours are Monday through Friday, 9:00 am to 3:00 pm. Port City Academy provides a team of highly qualified staff who utilize TEACCH methods to provide structured programming focusing on enhancing skills based on the individual's goals. A licensed psychologist is on staff to aid in positive behavior support.



What We Do

Port City Academy provides training with acquisition, retention, or improvement in self-help, socialization and adaptive skills. Prevocational activities, appropriate social interactions, and safety skills are the focus of teaching and learning at Port City Academy. The prevocational goals are directed at learning habitative skills such as increasing attention span, motor skills and task completion. Also included is training on communication and positive behavior management. Individuals at Port City Academy participate in a wide variety of community activities through visits to local recreational and educational environments. Currently, the program is set up in centers where daily activities are based on the needs of each individual. Additionally, self-help skills are practiced in accordance to each individual's treatment plan. Provided to the right are some examples of current activities at Port City Academy.

- *Canvas painting, drawing, arts & crafts, using wine corks to develop sellable products*
- *Sensory activities with sand, dried beans, putty, stress balls, clay, music and vibrating chair*
- *Bag assembly, packaging items according to order form and sorting*
- *Vending machine practice, purchasing groceries according to a shopping list and based on a budget and stocking and fronting shelves*
- *Folding brochures, stuffing envelopes, sorting by zip codes, weighing packages and labeling with weight*
- *Watering/pruning plants, trash take-out, vacuuming, sweeping, mopping and wiping skills*
- *Corn hole, tennis, soccer, basketball, kickball, catch and toss and golf*
- *Daily exercise and recreational team building, as well as an exercise center with an elliptical, free weights, yoga mat/ball, stretching*
- *Setting the table, measuring cup assembly, filling condiment bottles/containers, weighing food items, sorting and rolling silverware, measuring foods according to recipe or requests*
- *Hanging and folding clothes, sorting white and dark clothes, managing clothes shopping on a budget*
- *Phone and customer service skills, filing, typing, data entry, shredding paper, collating and more*

GHA Autism Supports

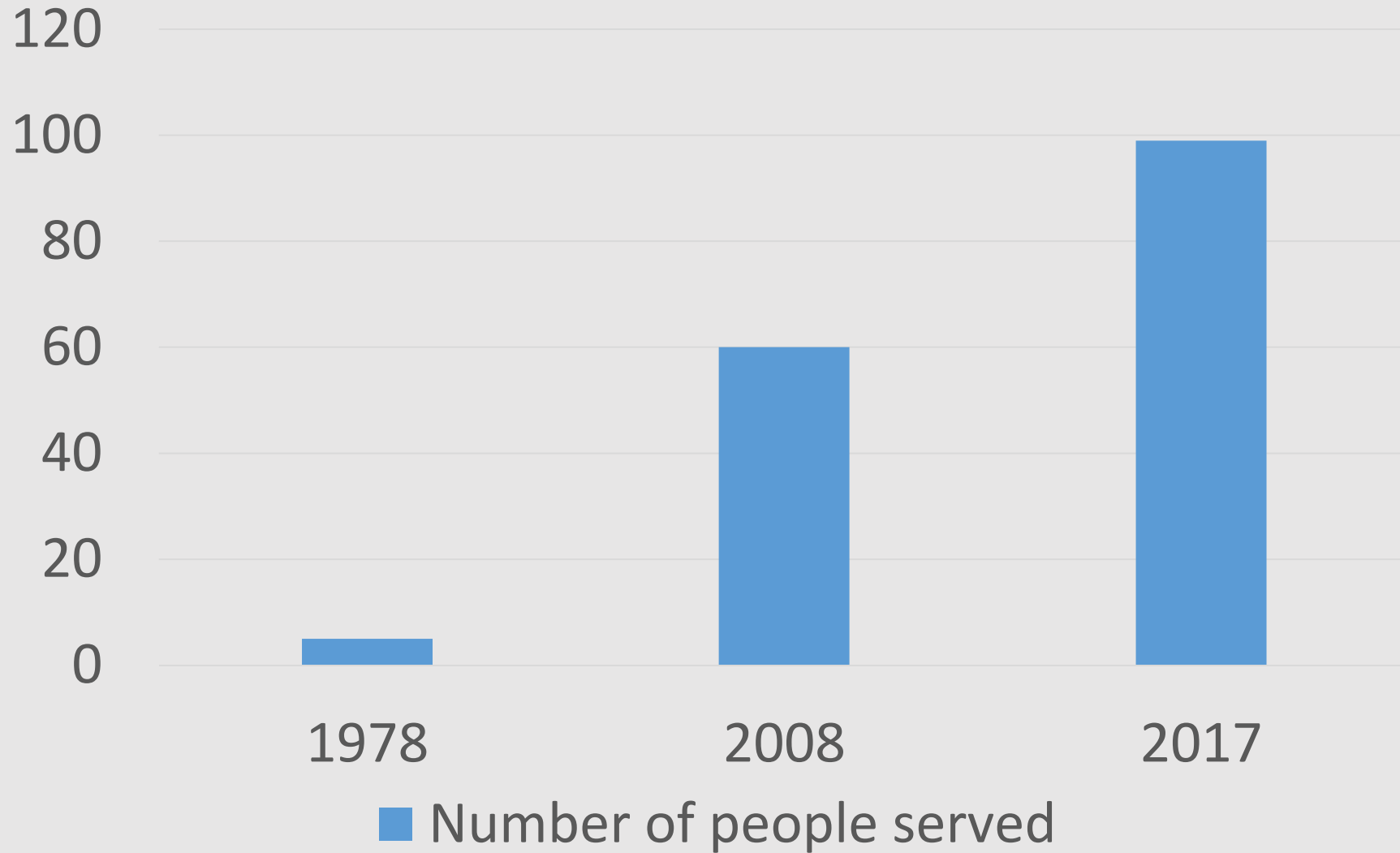
“Quality Services for Individuals with Autism”

- A private non-profit organization
- Administrative office located in Albemarle, North Carolina
- Developed in 1978



GHA Autism Supports provides quality, community services to meet the unique needs of individuals with Autism Spectrum Disorder

Agency Growth



State, National and International Trainings



Japan



Denmark



Germany

Professionals, nationally and internationally, come to learn more about services offered at GHA Autism Supports.



Canada

WILMINGTON

Families from the Wilmington area strongly advocated for GHA Autism Supports to provide supports for their loved ones within their home community.

Outreach began to this area in March 2010.

GHA Wilmington currently provides:

- Residential Services
- Supported Employment
- Community Networking
- Day Supports Individual and Group
- Specialized Consultative Services



PORT CITY ACADEMY

GHA Autism Supports day services program, Port City Academy, is located at the Harrelson Center in downtown Wilmington.



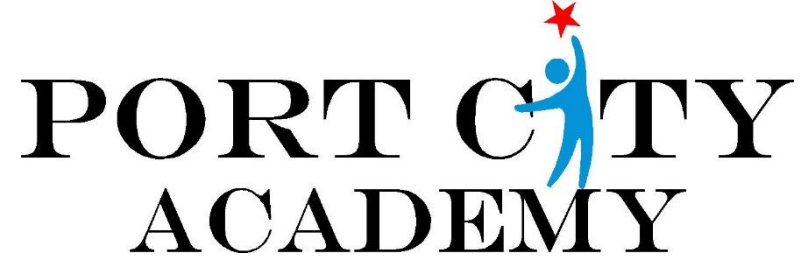
WHO WE ARE

- Services provided at Port City Academy include Day Supports Individual and Day Supports Group.
- The operating hours are Monday through Friday, 9:00 am to 3:00 pm.
- Port City Academy provides a team of highly qualified staff who utilize TEACCH methods to provide structured programming that is focused on enhancing skills based on the individual's goals.



PORT CITY
ACADEMY





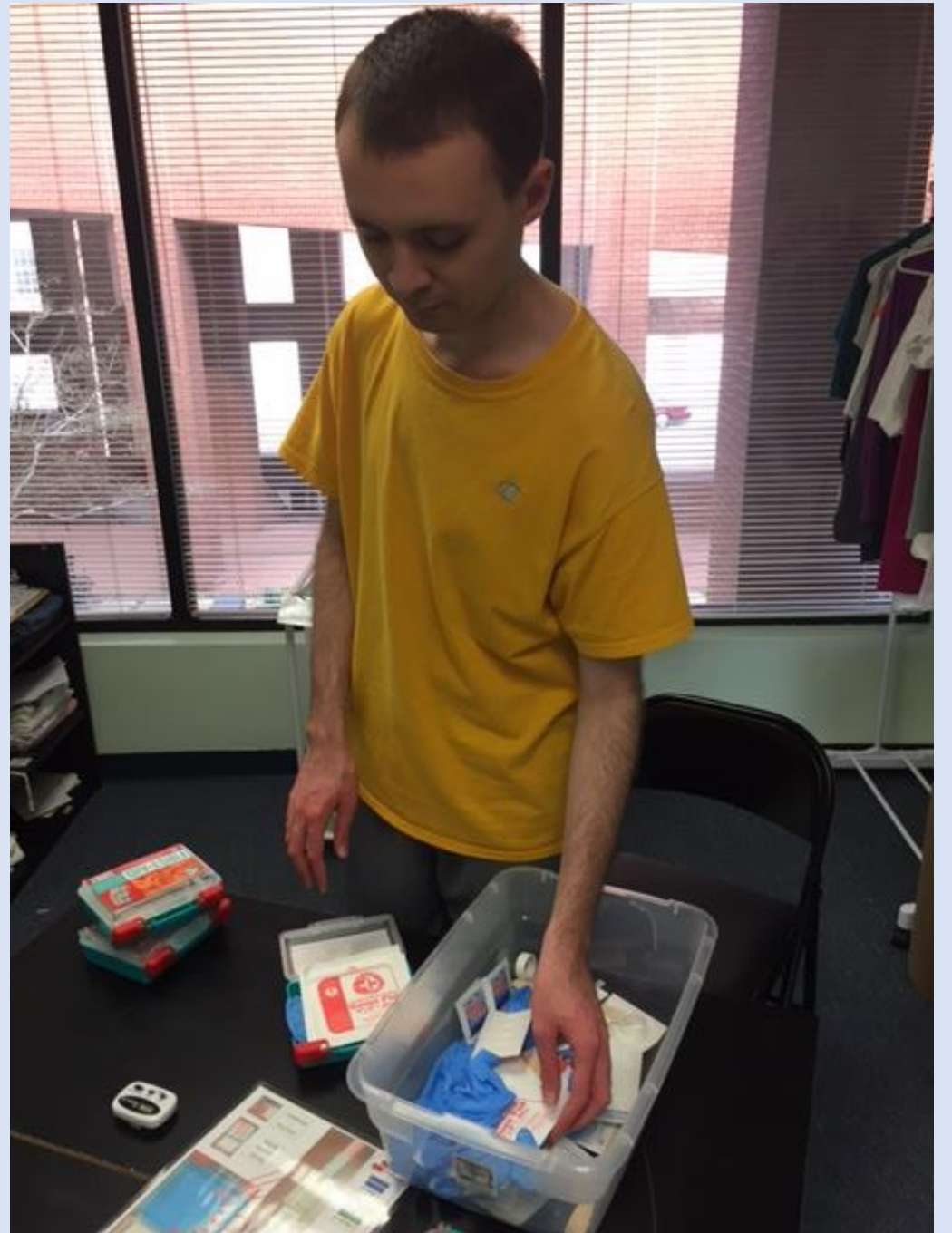
WHAT WE DO

- Port City Academy provides training with acquisition, retention, or improvement in self-help, socialization and adaptive skills. Prevocational activities, appropriate social interactions, and safety skills are the focus of teaching and learning here.
- The prevocational goals are directed at learning habilitative skills such as increasing attention span, motor skills and task completion. Also included is training on communication and positive behavior management.
- Individuals at Port City Academy participate in a wide variety of community activities through visits to local recreational and educational environments.
- Currently, the program is set up in centers where daily activities are based on the needs of each individual.













Community Networking

To promote maximum participation in community life
(volunteering, attending class of interest...)





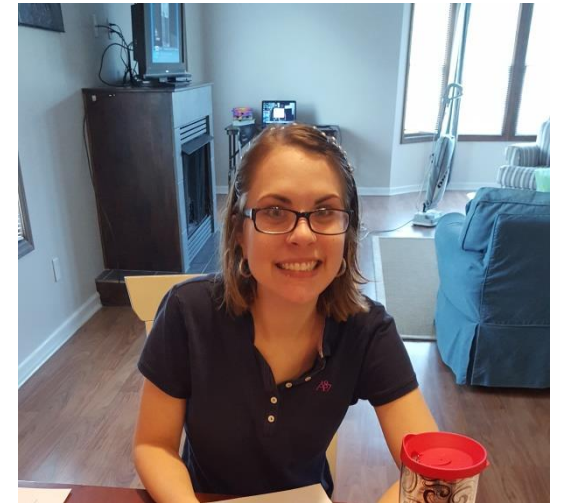
Supported Employment

Assist individuals with developing skills to seek, obtain and maintain competitive employment that they desire.



Residential Supports

Our focus is to assist individuals in achieving their personal goals, gaining independence, as well as to help them manage their life experiences and choices.

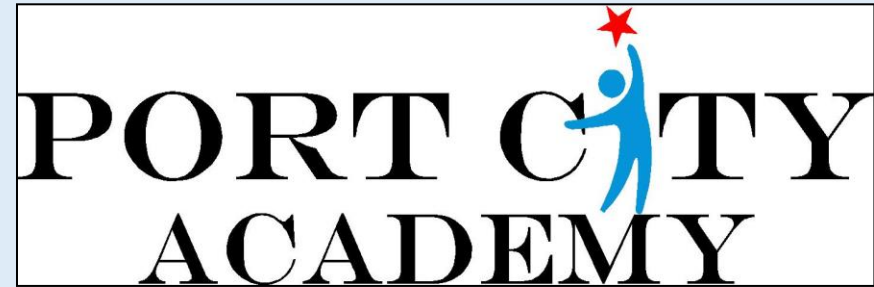






Administrative Office

P. O. Box 2487
Albemarle, NC 28002
704-982-9600



**P.O. Box 4122
Wilmington, NC 28406
910-769-1046**

***Located at
Harrelson Center
20 N. 4th Street, Suite 300B
Wilmington, NC***

www.ghautismsupports.org

OVERVIEW- ROUTINE MONITORING REVIEW TOOL

NETWORK DEPARTMENT

Transforming Lives



AGENDA

- PURPOSE/USE OF PROVIDER MONITORING TOOLS.
- TYPES OF TOOLS & WHERE TO FIND THEM
- HOW TO FIND THE GUIDELINES
- HELPFUL HINTS for SUCCESSFUL MONITORING

NC DHHS: PROVIDER MONITORING TOOLS

- Provider Monitoring Tools are used across the state to ensure compliance with state and federal regulations.
- Located on the NC DHHS Website-
www.ncdhhs.gov/document/provider-monitoring-tools
- NC DHHS provides free webinars and detailed trainings for each type of monitoring-
<http://www.ncdhhs.gov/providers/provider-info/mental-health/provider-monitoring>

OVERVIEW AND INSTRUCTIONS


- 4 TYPES OF PROVIDER MONITORING TOOLS
 - AGENCY MONITORING TOOL
 - LIP MONITORING TOOL
 - UNLICENSED AFL TOOL
 - NEW UNLICENSED SITE TOOL

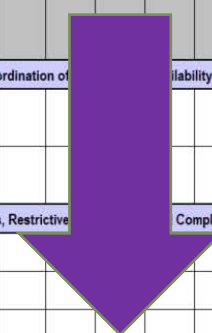
OVERVIEW AND INSTRUCTIONS

- Routine monitoring consists of a routine review and a post-payment review.
- For Licensed Independent Professionals (LIPs) that includes the LIP Review Tool and the LIP Post-Payment Review Tool.
- For provider agencies, the selection of tools is determined by the type of services provided.
 - The Routine Monitoring Tool is used except when the agency provides Unlicensed AFL services, in which case the Unlicensed AFL Review Tool is used.
 - The specific post-payment review tool(s) to be used is based on the combination of services included in the sample.
 - For those services that DH SR-MHL surveys on an annual basis (i.e., residential services and opioid treatment services), only a post-payment review is done.

OVERVIEW AND INSTRUCTIONS

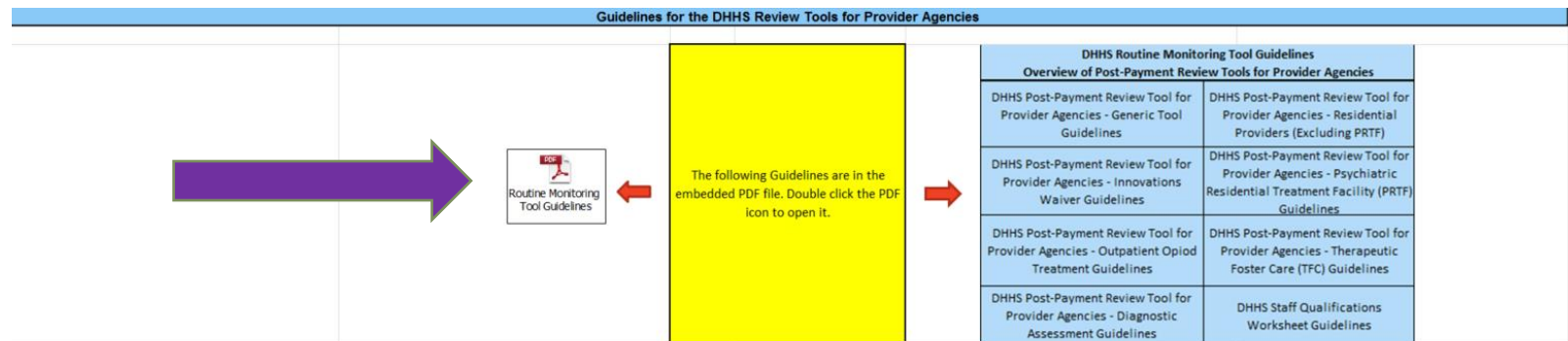
- All 4 Tools are in an Excel spreadsheet format with multiple tabs for different areas/categories of monitoring.

 PROVIDER NAME: FACILITY NAME: NAME OF REVIEWER(S): REVIEW DATE(S):	DHHS Routine Monitoring Tool										DHHS Routine Monitoring Tool										DHHS Routine Monitoring Tool						
	[Name of LME/MCO]										[Name of LME/MCO]										[Name of LME/MCO]						
	ITEM	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26
	[Requires 85% across the sample & section]	Rights Notification										Rights Notification										Rights Notification					
	1. There is evidence that the individual or legally responsible person has been informed of their rights.																										
2. The individual has been informed of the right to consent to or to refuse treatment.																											
3. The individual is informed of the right to treatment, including access to medical care and habilitation, regardless of age or degree of MH/IDD/SA disability.																											
4. The individual has been notified that release/disclosure of information may only occur with a consent unless it is an emergency or for other exceptions as detailed in the General Statutes or in 45 CFR 164.512 of HIPAA.																											
5. Authorizations to release information are specific to include the individual's name, the name of the facility releasing information, the name of the individual to whom information is being released, the specific information to be released, the purpose, the length of time the consent is valid, and the signatures of the individual/legally responsible person. [This item is automatically scored based on results from the Record Release Checklist]																											
[Requires 85% across the sample & section]	Coordination of Care/Service Availability										Coordination of Care/Service Availability										Coordination of Care/Service Availability						
6. When required by Clinical Coverage Policy or State-funded service definitions, and as authorized by the consumer, there is documentation that coordination of care is occurring between the providers involved with the individual.																											
7. There is evidence that the provider serves as the first responder or has made arrangements through a written agreement with another entity for access to 24-hour coverage for behavioral health crisis services.																											
[Requires 85% across the sample & section; #8 requires 100% across sample]	Incidents, Restrictive Interventions and Complaints										Incidents, Restrictive Interventions and Complaints										Incidents, Restrictive Interventions and Complaints						
8. All Level I incidents were reported and classified appropriately according to 10A NCAC 27G .0602 - .0604.																											
9. For all Level II and III incidents reported, follow-up was conducted and recommendations were implemented according to 10A NCAC 27G .0604.																											
10. The agency's practice of restrictive interventions is in accordance with their agency policy and administrative code.																											
11. The provider is responsive to the complaints it receives based on the timelines in the provider's policies and procedures.																											
[Requires 85% across the sample & section]	Medication Review										Medication Review										Medication Review						



OVERVIEW AND INSTRUCTIONS

- Each tool has specific GUIDELINES, which are embedded in the tool as a PDF file.




Types of Monitoring Category Definitions		Individual Workbook Use Defined	
MONITORING CATEGORIES/DEFINITION	WORKBOOK USED ON	WORKBOOK	DEFINITION
Routine – Agency/LIP tool review	Agency Monitoring LIP Monitoring Unlicensed AFL	Agency Monitoring	Two year agency review that consists of two parts for unlicensed services – the Agency Review Tool and PPR Tool. May also include PPR only for licensed services that are being reviewed.
Post Payment Review (PPR) – part of routine	Agency Monitoring LIP Monitoring Unlicensed AFL	LIP Monitoring	Two year LIP review that consists of two parts – the LIP review tool and LIP PPR. May also include PPR only.
Post Payment Review (Only) – for licensed facilities/services (i.e. residential; opioid, etc.)	Agency Monitoring LIP Monitoring	New Unlicensed Site	Review tool used for new sites or change in address/location for agencies and LIPs.
Initial – new AFL site, new licensed site or change of address/location	New Unlicensed Site Unlicensed AFL	Unlicensed AFL	Review for initial and routine review of unlicensed AFLs; If AFL is under Innovations the routine review is one year; if not then the routine review is two years.
Targeted – designate up to LME as part of continuous quality improvement; provider/service specific issue that requires medication issue with a service provider	Agency Monitoring LIP Monitoring	Data Extraction Database	Used to report all reviews competed using the Routine, LIP, New Unlicensed Site and Unlicensed AFL monitoring workbooks which provides the outcome of Provider Monitoring events per LME on a monthly basis. These reports are due to be submitted by the 20th of the month for all monitoring activities that
Investigation – designated use up to LME; various	Agency Monitoring		

THE GUIDELINES- What will be reviewed?

- The Review Tool Guidelines:
 - Specify which Tool/Tabs will be used for each service reviewed.
 - Provide detailed requirements including the applicable law or statute related to the review question.
 - Specify how to meet each requirement .
 - Specify how the reviewer must score each item on the tool.



THE GUIDELINES- Example- Tool Question #1

 DHHS Routine Monitoring Review Tool Guidelines		
ITEM:	REVIEW ITEM WITH SUPPORTING CITATIONS:	REVIEW GUIDELINES:
Rights Notification Note: There are no standardized forms to document notification of rights. Documentation formats are individualized and are likely to vary among agencies.		
	<p>There is evidence that the individual or legally responsible person has been informed of their rights.</p> <p>10A NCAC 27D .0201 (a) A written summary of client rights as specified in G.S. 122C, Article 3 shall be made available to each client and legally responsible person. (b) Each client shall be informed of his right to contact the Governor's Advocacy Council for Persons with Disabilities (GACPD)[sic] Disability Rights North Carolina, the statewide agency designated under federal and State law to protect and advocate the rights of persons with disabilities. (d) In each facility, the information provided to the client or legally responsible person shall include; (1) the rules that the client is expected to follow and possible penalties for violations of the rules. (3) the procedure for obtaining a copy of the client's treatment/habilitation plan.</p>	<p>Sample is 30 service events based on paid claims.</p> <p>Evidence: Request to review a copy of the agency's documents that are given to the individual/LRP informing them of their rights. Information provided to the individual must be in writing, and include the following elements:</p> <ol style="list-style-type: none"> 1. The individual/LRP has been informed of the right to contact Disability Rights North Carolina (formerly the Governor's Advocacy Council for Persons with Disabilities); 2. Rules for the agency that the individual is expected to follow and possible penalties for violations of the rules; 3. Documentation that the individual/LRP has been informed in writing the process for obtaining a copy of his or her treatment plan. <p>(Item # (d)(2) in rule has been deleted intentionally as it is asked in another review item.)</p> <p>Information must be given within 3 visits or 72 hours, if a residential facility. Meeting of time requirement is noted through the dated signature of the LRP/individual acknowledging receipt.</p> <p>Scoring: Each record must contain the three elements listed above in order to be scored as met.</p>

FOR QUESTION 1: THERE ARE THREE REQUIRED ELEMENTS!!!

THE GUIDELINES- Example- Tool Question #2

The individual has been informed of the right to consent to or to refuse treatment.

10A NCAC 27D .0303 (c) Each voluntary client or legally responsible person has the right to consent or refuse treatment/habilitation in accordance with G.S. 122C-57(d). A voluntary client's refusal of consent shall not be used as the sole grounds for termination or threat of termination of service unless the procedure is the only viable treatment/habilitation option available at the facility. G S § 122C-57. Right to treatment and consent to treatment.(d) Each voluntarily admitted client or the client's legally responsible person (including a health care agent named pursuant to a valid health care power of attorney) has the right to consent to or refuse any treatment offered by the facility. Consent may be withdrawn at any time by the person who gave the consent. If treatment is refused, the qualified professional shall determine whether treatment in some other modality is possible. If all appropriate treatment modalities are refused, the voluntarily admitted client may be discharged. In an emergency, a voluntarily admitted client may be administered treatment or medication, other than those specified in subsection (f) of this section, despite the refusal of the client or the client's legally responsible person, even if the client's refusal is expressed in a valid advance instruction for mental health treatment. The Commission may adopt rules to provide a procedure to be followed when a voluntarily admitted client refuses treatment.

Sample is the same 30 service events as Question 1.

Evidence: Review the records in the sample to ensure a signed consent to treat is in place. Consent should include the following elements or reference the receipt or review of the agency's policy/handout which includes the following elements:

1. Clients have the right to refuse treatment as described in the statute without threat or termination of services except as outlined in the statute.
2. Consent for treatment may be withdrawn at any time.

Scoring: Signed consent to treat, which includes the required elements, or references receipt or review of documentation, which includes the required elements, must be present in the record in order for this item to be scored as met.

FOR QUESTION 2: THERE ARE TWO REQUIRED ELEMENTS!!!

HELPFUL HINTS

- Review the Guidelines carefully and ensure that documentation meets the requirements.
- Communicate with the lead of the review for questions, needed accommodations, etc.
- Tab files, both personnel and clinical, to ensure all items are found and the review goes smoothly.
- EMRs do not have to be printed for a review. You can give guest usernames/passwords to allow reviewers to review on your system.