CARF Accreditation Report

for

Marlyn Enterprises of Jacksonville, Inc

Three-Year Accreditation

ASPIRE to Excellence®

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ACCREDITED

Contents

About CARF

CARF is an independent, nonprofit accreditor of health and human services, enhancing the lives of persons served worldwide.

The accreditation process applies CARF's internationally recognized standards during a site survey conducted by peer surveyors. Accreditation, however, is an ongoing process that distinguishes a provider's service delivery and signals to the public that the provider is committed to continuous performance improvement, responsive to feedback, and accountable to the community and its other stakeholders.

CARF accreditation promotes providers' demonstration of value and Quality Across the Lifespan® of millions of persons served through application of rigorous organizational and program standards organized around the ASPIRE to Excellence® continuous quality improvement framework. CARF accreditation has been the recognized benchmark of quality health and human services for more than 50 years.

For more information or to contact CARF, please visit www.carf.org/contact-us.

Organization

Marlyn Enterprises of Jacksonville, Inc
4063 Salisbury Road, Suite 100
Jacksonville, FL 32216

Organizational Leadership

Lynn Ulerie, COO and Vice President
Mark A. Ulerie, BS, President/CEO

Survey Number

169673

Survey Date(s)

September 11, 2023–September 12, 2023

Surveyor(s)

D. John Firestone, MSW, LADC, MBA, Administrative
Michael Fanjoy, CAADC, LPC, CCS, Program

Program(s)/Service(s) Surveyed

Case Management/Services Coordination: Mental Health (Adults)
Case Management/Services Coordination: Mental Health (Children and Adolescents)
Day Treatment: Mental Health (Adults)

Previous Survey

August 3, 2020–August 4, 2020
Three-Year Accreditation

Accreditation Decision

Three-Year Accreditation
Expiration: June 30, 2026

Executive Summary

This report contains the findings of CARF's site survey of Marlyn Enterprises of Jacksonville, Inc conducted September 11, 2023–September 12, 2023. This report includes the following information:

- Documentation of the accreditation decision and the basis for the decision as determined by CARF's consideration of the survey findings.

- Identification of the specific program(s)/service(s) and location(s) to which this accreditation decision applies.

- Identification of the CARF surveyor(s) who conducted the survey and an overview of the CARF survey process and how conformance to the standards was determined.

- Feedback on the organization's strengths and recognition of any areas where the organization demonstrated exemplary conformance to the standards.

- Documentation of the specific sections of the CARF standards that were applied on the survey.

- Recommendations for improvement in any areas where the organization did not meet the minimum requirements to demonstrate full conformance to the standards.

- Any consultative suggestions documented by the surveyor(s) to help the organization improve its program(s)/service(s) and business operations.

Accreditation Decision

On balance, Marlyn Enterprises of Jacksonville, Inc demonstrated substantial conformance to the standards. Marlyn Enterprises delivers high-quality, compassionate care to the persons served. The staff and leadership are talented, passionate, and well trained. They appear to work well together to provide services using the CARF standards. They have demonstrated excellence in their commitment, passion, and resilience by weathering both figurative and literal storms to ensure continuity of service and delivery of their mission. The staff appears talented and capable of using the CARF standards. The leadership of the organization provides resources for the staff, and the outcome is seen in positive aspects of culture and morale. There were opportunities for improvement, including technology, the policies that address the rights of persons served, consistent ongoing supervision of clinical or direct service personnel, and information and communication technology policies. It appears that the current leadership has a clear path to correcting and improving these areas and the organization's staff and leadership demonstrate a commitment to ongoing quality improvement.

Marlyn Enterprises of Jacksonville, Inc appears likely to maintain and/or improve its current method of operation and demonstrates a commitment to ongoing quality improvement. Marlyn Enterprises of Jacksonville, Inc is required to submit a post-survey Quality Improvement Plan (QIP) to CARF that addresses all recommendations identified in this report.

Marlyn Enterprises of Jacksonville, Inc has earned a Three-Year Accreditation. The leadership team and staff are complimented and congratulated for this achievement. In order to maintain this accreditation, throughout the term of accreditation, the organization is required to:

- Submit annual reporting documents and other required information to CARF, as detailed in the Accreditation Policies and Procedures section in the standards manual.

- Maintain ongoing conformance to CARF's standards, satisfy all accreditation conditions, and comply with all accreditation policies and procedures, as they are published and made effective by CARF.

Survey Details

Survey Participants

The survey of Marlyn Enterprises of Jacksonville, Inc was conducted by the following CARF surveyor(s):

- D. John Firestone, MSW, LADC, MBA, Administrative
- Michael Fanjoy, CAADC, LPC, CCS, Program

CARF considers the involvement of persons served to be vital to the survey process. As part of the accreditation survey for all organizations, CARF surveyors interact with and conduct direct, confidential interviews with consenting current and former persons served in the program(s)/service(s) for which the organization is seeking accreditation. In addition, as applicable and available, interviews may be conducted with family members and/or representatives of the persons served such as guardians, advocates, or members of their support system.

Interviews are also conducted with individuals associated with the organization, as applicable, which may include:

- The organization's leadership, such as board members, executives, owners, and managers.
- Business unit resources, such as finance and human resources.
- Personnel who serve and directly interact with persons served in the program(s)/service(s) for which the organization is seeking accreditation.
- Other stakeholders, such as referral sources, payers, insurers, and fiscal intermediaries.
- Community constituents and governmental representatives.

Survey Activities

Achieving CARF accreditation involves demonstrating conformance to the applicable CARF standards, evidenced through observable practices, verifiable results over time, and comprehensive supporting documentation. The survey of Marlyn Enterprises of Jacksonville, Inc and its program(s)/service(s) consisted of the following activities:

- Confidential interviews and direct interactions, as outlined in the previous section.
- Direct observation of the organization's operations and service delivery practices.
- Observation of the organization's location(s) where services are delivered.
- Review of organizational documents, which may include policies; plans; written procedures; promotional materials; governing documents, such as articles of incorporation and bylaws; financial statements; and other documents necessary to determine conformance to standards.
- Review of documents related to program/service design, delivery, outcomes, and improvement, such as program descriptions, records of services provided, documentation of reviews of program resources and services conducted, and program evaluations.
- Review of records of current and former persons served.

Program(s)/Service(s) Surveyed

The survey addressed by this report is specific to the following program(s)/service(s):

- Case Management/Services Coordination: Mental Health (Adults)
- Case Management/Services Coordination: Mental Health (Children and Adolescents)
- Day Treatment: Mental Health (Adults)

A list of the organization's accredited program(s)/service(s) by location is included at the end of this report.

Representations and Constraints

The accreditation decision and survey findings contained in this report are based on an on-balance consideration of the information obtained by the surveyor(s) during the site survey. Any information that was unavailable, not presented, or outside the scope of the survey was not considered and, had it been considered, may have affected the contents of this report. If at any time CARF subsequently learns or has reason to believe that the organization did not participate in the accreditation process in good faith or that any information presented was not accurate, truthful, or complete, CARF may modify the accreditation decision, up to and including revocation of accreditation.

Survey Findings

This report provides a summary of the organization's strengths and identifies the sections of the CARF standards that were applied on the survey and the findings in each area. In conjunction with its evaluation of conformance to the specific program/service standards, CARF assessed conformance to its business practice standards, referred to as Section 1. ASPIRE to Excellence, which are designed to support the delivery of the program(s)/service(s) within a sound business operating framework to promote long-term success.

The specific standards applied from each section vary based on a variety of factors, including, but not limited to, the scope(s) of the program(s)/service(s), population(s) served, location(s), methods of service delivery, and survey type. Information about the specific standards applied on each survey is included in the standards manual and other instructions that may be provided by CARF.

Areas of Strength

CARF found that Marlyn Enterprises of Jacksonville, Inc demonstrated the following strengths:

- The case managers and counselors of Marlyn Enterprises comprise clearly a compassionate team of caring individuals who not only demonstrate a professional commitment to their work, but also a personal commitment to the persons served. Even under some recent challenging conditions, the atmosphere and culture of the organization is positive and energetic.
- The case management services offered at Marlyn Enterprises seems to be benefiting the persons served and, as they reported, provides a high level of satisfaction. Persons served shared feelings of being cared for, having their needs met, and knowing that they always have a staff member available to talk to when needed.
- The additional activities offered at Marlyn Enterprises seem to benefit the persons served greatly and give them a sense of connection and emotional expression. Some of the activities observed included the affirmations jar exercise and the decompression area, utilizing poppies and fidgets.

- Marlyn Enterprises has an exceptional leadership and ownership team. The owners have passion, resilience, and commitment to the mission of the company and the persons that come to Marlyn Enterprises for help. The owners have made demonstrable efforts to ensure continuity of services, even in the face of challenges related to COVID-19. They are recognized for their commitment to the community.

- The administrative efforts are remarkable. The administrative staff members bring experience from multiple fields, and their work ethic is second to none. The quality of work is complimented by the new assistant. Together, the administrative team members provide administrative prowess that allows Marlyn Enterprises to help the persons served. From HR to billing to policy development and finally to training, the administrative team is recognized for its work and ability.

- The administrative staff members are further recognized for their specific work in health and safety. The documentation and attention to detail is excellent.

- Much of the work pertaining to policy and accreditation had been done in the past by one person who is no longer with the organization. Although she is no longer with the organization, her commitment and excellence is alive and well and still guides Marlyn Enterprises.

- The physical location of Marlyn Enterprises is clean, welcoming, and large enough to meet all their needs. Its group rooms are conducive to providing therapy, and the group participants were comfortable in this setting.

Opportunities for Quality Improvement

The CARF survey process identifies opportunities for continuous improvement, a core concept of "aspiring to excellence." This section of the report lists the sections of the CARF standards that were applied on the survey, including a description of the business practice area and/or the specific program(s)/service(s) surveyed and a summary of the key areas addressed in that section of the standards.

In this section of the report, a recommendation identifies any standard for which CARF determined that the organization did not meet the minimum requirements to demonstrate full conformance. All recommendations must be addressed in a QIP submitted to CARF.

In addition, consultation may be provided for areas of or specific standards where the surveyor(s) documented suggestions that the organization may consider to improve its business or service delivery practices. Note that consultation may be offered for areas of specific standards that do not have any recommendations. Such consultation does not indicate nonconformance to the standards; it is intended to offer ideas that the organization might find helpful in its ongoing quality improvement efforts. The organization is not required to address consultation.

When CARF surveyors visit an organization, their role is that of independent peer reviewers, and their goal is not only to gather and assess information to determine conformance to the standards, but also to engage in relevant and meaningful consultative dialogue. Not all consultation or suggestions discussed during the survey are noted in this report. The organization is encouraged to review any notes made during the survey and consider the consultation or suggestions that were discussed.

During the process of preparing for a CARF accreditation survey, an organization may conduct a detailed self-assessment and engage in deliberations and discussions within the organization as well as with external stakeholders as it considers ways to implement and use the standards to guide its quality improvement efforts. The organization is encouraged to review these discussions and deliberations as it considers ways to implement innovative changes and further advance its business and service delivery practices.

Section 1. ASPIRE to Excellence®

1.A. Leadership

Description
CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

Key Areas Addressed
■ Leadership structure and responsibilities
■ Person-centered philosophy
■ Organizational guidance
■ Leadership accessibility
■ Cultural competency and diversity
■ Corporate responsibility
■ Organizational fundraising, if applicable

Recommendations
1.A.5.b.(3)
1.A.5.b.(6)
1.A.5.b.(7)
It is recommended that Marlyn Enterprises implement a cultural competency, diversity, and inclusion plan that is based on consideration of the diversity of its stakeholders in the areas of gender, socioeconomic status, and language.

1.A.6.a.(8)
It is recommended that Marlyn Enterprises' corporate responsibility efforts include written ethical codes of conduct for human resources.

1.C. Strategic Planning

Description
CARF-accredited organizations establish a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats.

Key Areas Addressed
■ Environmental considerations
■ Strategic plan development, implementation, and periodic review

Recommendations
There are no recommendations in this area.

1.D. Input from Persons Served and Other Stakeholders

Description

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in this subsection direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

Key Areas Addressed

■ Collection of input from persons served, personnel, and other stakeholders
■ Integration of input into business practices and planning

Recommendations

There are no recommendations in this area.

1.E. Legal Requirements

Description

CARF-accredited organizations comply with all legal and regulatory requirements.

Key Areas Addressed

■ Compliance with obligations
■ Response to legal action
■ Confidentiality and security of records

Recommendations

There are no recommendations in this area.

1.F. Financial Planning and Management

Description

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

Key Areas Addressed

■ Budgets
■ Review of financial results and relevant factors
■ Fiscal policies and procedures
■ Reviews of bills for services and fee structures, if applicable
■ Review/audit of financial statements
■ Safeguarding funds of persons served, if applicable

Recommendations

There are no recommendations in this area.

1.G. Risk Management

Description

CARF-accredited organizations engage in a coordinated set of activities designed to control threats to their people, property, income, goodwill, and ability to accomplish goals.

Key Areas Addressed

■ Risk management plan implementation and periodic review
■ Adequate insurance coverage
■ Media relations and social media procedures
■ Reviews of contract services

Recommendations

There are no recommendations in this area.

1.H. Health and Safety

Description

CARF-accredited organizations maintain healthy, safe, and clean environments that support quality services and minimize risk of harm to persons served, personnel, and other stakeholders.

Key Areas Addressed

■ Healthy and safe environment
■ Competency-based training on health and safety procedures and practices
■ Emergency and evacuation procedures
■ Access to first aid and emergency information
■ Critical incidents
■ Infections and communicable diseases
■ Health and safety inspections

Recommendations

There are no recommendations in this area.

Consultation

▪ The organization may wish to include emergency procedures for drug overdose, particularly to opioid/fentanyl and the overdose reversal drug, Narcan®. This could be a separate procedure or included within the medical emergencies procedures.

1.I. Workforce Development and Management

Description

CARF-accredited organizations demonstrate that they value their human resources and focus on aligning and linking human resources processes, procedures, and initiatives with the strategic objectives of the organization. Organizational effectiveness depends on the organization's ability to develop and manage the knowledge, skills, abilities, and behavioral expectations of its workforce. The organization describes its workforce, which is often composed of a diverse blend of human resources. Effective workforce development and management promote engagement and organizational sustainability and foster an environment that promotes the provision of services that center on enhancing the lives of persons served.

Key Areas Addressed

■ Composition of workforce
■ Ongoing workforce planning
■ Verification of backgrounds/credentials/fitness for duty
■ Workforce engagement and development
■ Performance appraisals
■ Succession planning

Recommendations

There are no recommendations in this area.

1.J. Technology

Description

Guided by leadership and a shared vision, CARF-accredited organizations are committed to exploring and, within their resources, acquiring and implementing technology systems and solutions that will support and enhance:

■ Business processes and practices.
■ Privacy and security of protected information.
■ Service delivery.
■ Performance management and improvement.
■ Satisfaction of persons served, personnel, and other stakeholders.

Key Areas Addressed

■ Ongoing assessment of technology and data use, including input from stakeholders
■ Technology and system plan implementation and periodic review
■ Technology policies and procedures

Recommendations

1.J.2.b.(2)
It is recommended that Marlyn Enterprises implement a technology and system plan that includes priorities.

1.J.4.b.(5)
1.J.4.b.(6)
While Marlyn Enterprises conducts a business continuity/disaster recovery process, it is recommended that the test of the organization's procedures for business continuity/disaster recovery be analyzed for whether the actions accomplished the intended results and any necessary education and training of personnel.

1.J.5.c.(1)
1.J.5.c.(2)
It is recommended that the organization consistently provide documented initial and ongoing training on technology and cybersecurity to personnel.

1.K. Rights of Persons Served

Description

CARF-accredited organizations protect and promote the rights of all persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

Key Areas Addressed

- Policies that promote rights of persons served
- Communication of rights to persons served
- Formal complaints by persons served

Recommendations

1.K.1.d.(1)
1.K.1.e.(1)
1.K.1.e.(3)
1.K.1.e.(4)
It is recommended that the organization implement policies promoting the rights of the persons served, including access to information pertinent to the person served in sufficient time to facilitate decision making and informed consent or refusal or expression of choice and withdrawal of consent regarding service delivery, concurrent services, and composition of the service delivery team.

1.L. Accessibility

Description

CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

Key Areas Addressed

- Assessment of accessibility needs and identification of barriers
- Accessibility plan implementation and periodic review
- Requests for reasonable accommodations

Recommendations

There are no recommendations in this area.

1.M. Performance Measurement and Management

Description

CARF-accredited organizations demonstrate a culture of accountability by developing and implementing performance measurement and management plans that produce information an organization can act on to improve results for the persons served, other stakeholders, and the organization itself.

The foundation for successful performance measurement and management includes:

■ Leadership accountability and support.
■ Mission-driven measurement.
■ A focus on results achieved for the persons served.
■ Meaningful engagement of stakeholders.
■ An understanding of extenuating and influencing factors that may impact performance.
■ A workforce that is knowledgeable about and engaged in performance measurement and management.
■ An investment in resources to implement performance measurement and management.
■ Measurement and management of business functions to sustain and enhance the organization.

Key Areas Addressed

■ Leadership accountability for performance measurement and management
■ Identification of gaps and opportunities related to performance measurement and management
■ Input from stakeholders
■ Performance measurement and management plan
■ Identification of objectives and performance indicators for service delivery
■ Identification of objectives and performance indicators for priority business functions
■ Personnel training on performance measurement and management

Recommendations

There are no recommendations in this area.

1.N. Performance Improvement

Description

CARF-accredited organizations demonstrate a culture of performance improvement through their commitment to proactive and ongoing review, analysis, reflection on their results in both service delivery and business functions, and transparency. The results of performance analysis are used to identify and implement data-driven actions to improve the quality of programs and services and to inform decision making. Performance information that is accurate and understandable to the target audience is shared with persons served, personnel, and other stakeholders in accordance with their interests and needs.

Key Areas Addressed

■ Analysis of service delivery performance
■ Analysis of business function performance
■ Identification of areas needing performance improvement
■ Implementation of action plans
■ Use of performance information to improve program/service quality and make decisions
■ Communication of performance information

Recommendations

There are no recommendations in this area.

Section 2. General Program Standards

Description

For an organization to achieve quality services, the persons served are active participants in the planning, prioritization, implementation, and ongoing evaluation of the services offered. A commitment to quality and the involvement of the persons served span the entire time that the persons served are involved with the organization. The service planning process is individualized, establishing goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the persons served. The persons served have the opportunity to transition easily through a system of care.

2.A. Program/Service Structure

Description

A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

Key Areas Addressed

- Written program plan
- Crisis intervention provided
- Medical consultation
- Services relevant to diversity
- Assistance with advocacy and support groups
- Team composition/duties
- Relevant education
- Clinical supervision
- Family participation encouraged

Recommendations

2.A.12.b.(4)
It is recommended that, when applicable, Marlyn Enterprises implement written procedures that ensure that intrusive procedures are administered in a safe manner, with consideration given to the trauma history of the persons served.

2.A.20.c.
It is recommended that Marlyn Enterprises implement written procedures for crisis intervention that are sensitive to potential trauma of persons served.

2.A.26.a.
2.A.26.b.(1)
2.A.26.b.(2)
2.A.26.b.(3)
2.A.26.b.(4)
2.A.26.b.(5)
2.A.26.b.(6)
2.A.26.b.(7)
2.A.26.b.(8)
2.A.26.c.
In 2023, Marlyn Enterprises experienced an unexpected loss of the clinical director. Due to this situation, it was unable to produce any clinical supervision notes. It is recommended that ongoing supervision of clinical or direct service personnel be documented and address the accuracy of assessment and referral skills; the appropriateness of the treatment or service intervention selected relative to the specific needs of each person served; treatment/service effectiveness as reflected by the person served meeting goals identified in the person-centered plan; risk factors for suicide and other dangerous behaviors; issues of ethics, legal aspects of clinical practice, and professional standards; clinical documentation issues identified through an ongoing compliance review; cultural competency issues; and model fidelity, when implementing evidence-based practices. Ongoing supervision should provide feedback to personnel that enhances skills.

2.B. Screening and Access to Services

Description

The process of screening and assessment is designed to determine a person's eligibility for services and the organization's ability to provide those services. A person-centered assessment process helps to maximize opportunities for the persons served to gain access to the organization's programs and services. Each person served is actively involved in, and has a significant role in, the assessment process. Assessments are conducted in a manner that identifies the historical and current information of the person served as well as the person's strengths, needs, abilities, and preferences. Assessment data may be gathered through various means, including face-to-face contact, telehealth, or written material, and from various sources, including the person served, family, or significant others, or from external resources.

Key Areas Addressed

■ Screening process described in policies and procedures
■ Ineligibility for services
■ Admission criteria
■ Orientation information provided regarding rights, grievances, services, fees, etc.
■ Waiting list
■ Primary and ongoing assessments
■ Reassessments

Recommendations

2.B.13.n.(1)(a)
2.B.13.n.(1)(b)
2.B.13.n.(2)(a)
2.B.13.n.(2)(b)
Although Marlyn Enterprises collects some data associated with physical abuse and violence, it is recommended that the assessment process gather and record sufficient information about the person's history of trauma that is experienced and/or witnessed, including abuse and neglect.

2.C. Person-Centered Planning

Description

Each person served is actively involved in and has a significant role in the person-centered planning process and determining the direction of the plan. The person-centered plan contains goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the person served, as well as identified challenges and potential solutions. The planning process is person-directed and person-centered. The person-centered plan may also be referred to as an individual service plan, treatment plan, or plan of care. In a family-centered program, the plan may be for the family and identified as a family-centered plan.

Key Areas Addressed

- Person-centered planning process
- Co-occurring disabilities/disorders
- Person-centered goals and objectives
- Designated person coordinates services

Recommendations

There are no recommendations in this area.

2.D. Transition/Discharge

Description

Transition, continuing care, or discharge planning assists the persons served to move from one level of care to another within the organization or to obtain services that are needed but are not available within the organization. The transition process is planned with the active participation of each person served. Transition may include planned discharge, placement on inactive status, movement to a different level of service or intensity of contact, or a re-entry program in a criminal justice system.

The transition plan is a document developed with and for the person served and other interested participants to guide the person served in activities following transition/discharge to support the gains made during program participation. It is prepared with the active participation of the person served when transitioning to another level of care, after-care program, or community-based services. The transition plan is meant to be a plan that the person served uses to identify the support that is needed to prevent a recurrence of symptoms or reduction in functioning. It is expected that the person served receives a copy of the transition plan.

A discharge summary is a clinical document written by the program personnel who are involved in the services provided to the person served and is completed when the person leaves the organization (planned or unplanned). It is a document that is intended for the record of the person served and released, with appropriate authorization, to describe the course of services that the organization provided and the response by the person served.

Just as the assessment is critical to the success of treatment, the transition services are critical for the support of the individual's ongoing recovery or well-being. The organization proactively attempts to connect the persons served with the receiving service provider and contact the persons served after formal transition or discharge to gather needed information related to their post-discharge status. Discharge information is reviewed to determine the effectiveness of its services and whether additional services were needed.

Transition planning may be included as part of the person-centered plan. The transition plan and/or discharge summary may be a combined document or part of the plan for the person served as long as it is clear whether the information relates to transition or pre-discharge planning or identifies the person's discharge or departure from the program.

Key Areas Addressed

- Referral or transition to other services
- Active participation of persons served
- Transition planning at earliest point
- Unplanned discharge referrals
- Plan addresses strengths, needs, abilities, preferences
- Follow-up for persons discharged for aggressiveness

Recommendations

2.D.3.g.(1)
2.D.3.g.(2)
2.D.3.g.(3)
2.D.3.g.(4)
It is recommended that Marlyn Enterprises' written transition plan include strengths, needs, abilities, and preferences.

2.D.6.h.
For all persons leaving services, a written discharge summary should be prepared that includes information on medication(s) prescribed or administered, when applicable.

2.D.7.a.
2.D.7.b.
2.D.7.c.
2.D.7.d.
There are times when the person served no longer shows up for services and there are large "gaps" in the record. It is recommended that, when an unplanned discharge occurs, follow-up is conducted as soon as possible to provide necessary notifications, clarify the reasons for the unplanned discharge, determine with the person served whether further services are needed, and offer or refer to needed services.

2.E. Medication Use

Description

Medication use is the practice of controlling, administering, and/or prescribing medications to persons served in response to specific symptoms, behaviors, or conditions for which the use of medications is indicated and deemed efficacious. The use of medication is one component of treatment directed toward maximizing the functioning of the persons served while reducing their specific symptoms. Prior to the use of medications, other therapeutic interventions should be considered, except in circumstances that call for a more urgent intervention.

Medication use includes all prescribed medications, whether or not the program is involved in prescribing, and may include over-the-counter or alternative medications. Alternative medications can include herbal or mineral supplements, vitamins, homeopathic remedies, hormone therapy, or culturally specific treatments.

Medication control is identified as the process of physically controlling, storing, transporting, and disposing of medications, including those self-administered by the person served.

Medication administration is the preparing and giving of prescription and nonprescription medications by authorized and trained personnel to the person served. Self-administration is the application of a medication (whether by oral ingestion, injection, inhalation, or other means) by the person served to the individual's own body. This may include the program storing the medication for the person served, personnel handing the bottle or prepackaged medication dose to the person served, instructing or verbally prompting the person served to take the medication, coaching the person served through the steps to ensure proper adherence, and/or closely observing the person served self-administering the medication.

Prescribing is the result of an evaluation that determines if there is a need for medication and what medication is to be used in the treatment of the person served. Prior to providing a prescription for medication, the prescriber obtains the informed consent of the individual authorized to consent to treatment and, if applicable, the assent of the person served. Prescription orders may be verbal or written and detail what medication should be given to whom, in what formulation and dose, by what route, when, how frequently, and for what length of time.

Key Areas Addressed
■ Scope of medication services provided by the program(s) seeking accreditation
■ Education and training provided to direct service personnel at orientation and at least annually
■ Education and training provided to persons served, family members, and others identified by the persons served, in accordance with identified needs
■ Written procedures that address medication control, administration, and/or prescribing, as applicable to the program
■ Use of treatment guidelines and protocols to promote prescribing consistent with standards of care, if applicable to the program
■ Peer review of prescribing practices, if applicable to the program

Recommendations
2.E.5.a.
Marlyn Enterprises prescribes medications for a number of their person served, although there is no mention of this in the individualized plan. It is recommended that Marlyn Enterprises implement written procedures that address how medications are integrated into the individualized plan of the person served.

2.E.8.a.(1)
2.E.8.a.(2)
2.E.8.a.(3)
2.E.8.a.(4)(a)
2.E.8.a.(4)(b)
2.E.8.a.(4)(c)
2.E.8.a.(4)(d)
2.E.8.a.(4)(e)
2.E.8.a.(5)(a)(i)
2.E.8.a.(5)(a)(ii)
2.E.8.a.(5)(a)(iii)
2.E.8.a.(5)(b)
2.E.8.a.(5)(c)(i)
2.E.8.a.(5)(c)(ii)
2.E.8.b.(1)
2.E.8.b.(2)
2.E.8.b.(3)
Although the medical doctor signs off on the prescribers notes and prescriptions, Marlyn Enterprises does not conduct a formal peer review focused on prescribing practices. It is recommended that, in a program that provides prescribing of medications, a documented peer review be conducted at least annually by a qualified professional licensed to prescribe or a pharmacist on the records of a representative sample of persons for whom prescriptions

were provided. The peer review should be conducted to assess the appropriateness of each medication, as determined by the needs and preferences of the person served, the condition for which the medication is prescribed, dosage, periodic reevaluation of continued use related to the primary condition being treated, and the efficacy of the medication. The peer review should determine whether the following were identified and, if needed, addressed: contraindications, side effects, and adverse reactions; whether necessary monitoring protocols were implemented; and whether there was simultaneous use of multiple medications, including polypharmacy and copharmacy. Information collected from the peer review process should be reported to appropriate personnel, used to improve the quality of services provided, and incorporated into the performance measurement and management system.

2.G. Records of the Persons Served

Description

A complete and accurate record is developed to ensure that all appropriate individuals have access to relevant clinical and other information regarding each person served.

Key Areas Addressed

- Confidentiality
- Timeframes for entries to records
- Individual record requirements
- Duplicate records

Recommendations

2.G.5.
There were large gaps demonstrated between treatment plans and treatment plan reviews. It is recommended that entries to the records of the persons served follow the organization's policy that specifies timeframes for entries.

2.H. Quality Records Management

Description

The organization implements systems and procedures that provide for the ongoing monitoring of the quality, appropriateness, and utilization of the services provided. This is largely accomplished through a systematic review of the records of the persons served. The review assists the organization in improving the quality of services provided to each person served.

Key Areas Addressed

- Quarterly professional review
- Review current and closed records
- Items addressed in quarterly review
- Use of information to improve quality of services

Recommendations

There are no recommendations in this area.

Consultation

- After review of the record review process, it is suggested that the information be reported to personnel in a manner that is more easily accessible to the staff at Marlyn Enterprises. Currently, a quality improvement plan is attached to the report, although the follow-up process with staff is unclear. This could be addressed by including the information in the clinical supervision process.

2.I. Service Delivery Using Information and Communication Technologies

Description

Depending on the type of program, a variety of terminology may be used to describe the use of information and communication technologies to deliver services; e.g., telepractice, telehealth, telemental health, telerehabilitation, telespeech, etc. Based on the individual plan for the person served, the use of information and communication technologies allows providers to see, hear, and/or interact with persons served, family/support system members, and other providers in or from remote settings (i.e., the person served and provider are not in the same physical location).

The provision of services via information and communication technologies may:

■ Include services such as assessment, individual planning, monitoring, prevention, intervention, team and family conferencing, transition planning, follow-up, supervision, education, consultation, and counseling.
■ Involve a variety of providers such as case managers/service coordinators, social workers, psychologists, speech-language pathologists, occupational therapists, physical therapists, physicians, nurses, dieticians, employment specialists, direct support professionals, peer support specialists, rehabilitation engineers, assistive technologists, teachers, and other personnel providing services and/or supports to persons served.
■ Encompass settings such as:
  - Hospitals, clinics, professional offices, and other organization-based settings.
  - Schools, work sites, libraries, community centers, and other community settings.
  - Congregate living, individual homes, and other residential settings.
■ Be provided via fully virtual platforms.

The use of technology for strictly informational purposes, such as having a website that provides information about the programs and services available or the use of self-directed apps, is not considered providing services via the use of information and communication technologies.

Key Areas Addressed

■ Written procedures for the use of information and communication technologies (ICT) in service delivery
■ Personnel training on how to deliver services via ICT and the equipment used
■ Instruction and training for persons served, family/support system members, and others.
■ Provision of information related to ICT
■ Maintenance of ICT equipment
■ Emergency procedures that address unique aspects of service delivery via ICT
■ Scope of ICT services

Recommendations

There are no recommendations in this area.

Section 3. Core Treatment Program Standards

Description

The standards in this section address the unique characteristics of each type of core program area. Behavioral health programs are organized and designed to provide services for persons who have or who are at risk of having psychiatric disorders, harmful involvement with alcohol or other drugs, or other addictions or who have other behavioral health needs. Through a team approach, and with the active and ongoing participation of the persons served, the overall goal of each program is to improve the quality of life and the functional abilities of the persons served. Each program selected for accreditation demonstrates cultural competency and relevance. Family members and significant others are involved in the programs of the persons served as appropriate and to the extent possible.

3.B. Case Management/Services Coordination (CM)

Description

Case management/services coordination programs provide goal-oriented and individualized supports focusing on improved self-sufficiency for the persons served through assessment, planning, linkage, advocacy, coordination, and monitoring activities. Successful service coordination results in community opportunities and increased independence for the persons served. Programs may provide occasional supportive counseling and crisis intervention services, when allowed by regulatory or funding authorities.

Case management/services coordination may be provided by an organization as part of its person-centered planning and delivery, by a department or division within the organization that works with individuals who are internal and/or external to the organization, or by an organization with the sole purpose of providing case management/services coordination. Such programs are typically provided by qualified case managers/coordinators or by case management teams.

Organizations performing case management/services coordination as a routine function of other services or programs are not required to apply these standards unless they are specifically seeking accreditation for this program.

Key Areas Addressed

■ Personnel who are knowledgeable about appropriate services and relevant support systems
■ Optimization of resources and opportunities for persons served
■ Provision of or linkage to skill development services related to performing ADL

Recommendations

There are no recommendations in this area.

3.F. Day Treatment (DT)

Description

Day treatment programs offer person-centered, culturally and linguistically appropriate, comprehensive, coordinated, and structured treatment services and activities. A day treatment program consists of a scheduled series of structured, face-to-face therapeutic sessions organized at various levels of intensity and frequency in order to assist the persons served in achieving the goals identified in their person-centered plans. Day treatment programs are offered four or more days per week, typically with support available in the evenings and on weekends. A day

treatment program may prevent or minimize the need for a more intensive level of treatment. It may also function as a step-down from inpatient care or partial hospitalization or as transitional care following an inpatient or partial hospitalization stay to facilitate return to the community.

Key Areas Addressed

■ Hours/days of program availability
■ Variety of treatment services
■ Based on the needs of the persons served
■ Program has consistency with scheduled activities and assigned personnel

Recommendations

There are no recommendations in this area.

Section 5. Specific Population Designation Standards

5.C. Children and Adolescents (CA)

Description

Programs for children and adolescents consist of an array of behavioral health services designed specifically to address the treatment needs of children and adolescents. Such programs tailor their services to the particular needs and preferences of children and adolescents and are provided in a setting that is both relevant to and comfortable for this population.

Key Areas Addressed

■ Comprehensive assessments
■ Services based on needs of child
■ Criminal background checks for staff providing direct services

Recommendations

There are no recommendations in this area.

Program(s)/Service(s) by Location

Marlyn Enterprises of Jacksonville, Inc

4063 Salisbury Road, Suite 100
Jacksonville, FL 32216

Case Management/Services Coordination: Mental Health (Adults)
Case Management/Services Coordination: Mental Health (Children and Adolescents)
Day Treatment: Mental Health (Adults)