

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>1803</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>07/31/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ROCK COUNTY HUMAN SVS CRISIS INTERVENTION I</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3530 N COUNTY HIGHWAY F</b> <b>JANESVILLE, WI 53547</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
X 000	<p>Initial Comments</p> <p>On 07/31/2019, an on-site complaint investigation was conducted at Rock County Department of Health Services - Crisis Intervention Services certificate #1803.</p> <p>The provider holds certification under Wisconsin Administrative Code(s): DHS 34.3 Emergency Mental Health Service.</p> <p>Based on interviews and record review, 4 deficiencies were identified.</p> <p>A plan of correction will be required.</p>	X 000		
X 800	<p>DHS 34.22(3)(e)1a-c Linkage and Coordination Services</p> <p>Linkage and coordination services shall do all of the following:</p> <ol style="list-style-type: none"> <li>1. Be provided for the purpose of achieving one or more of the following outcomes:               <ol style="list-style-type: none"> <li>a. Connection of a client with other programs to obtain ongoing mental health treatment, support and services, and coordination to assist the client and his or her family during the period of transition from emergency to ongoing mental health services.</li> <li>b. Coordination with other mental health providers in the community for whom the program is designated as crisis care backup, to ensure that adequate information about the other providers' clients is available if a crisis occurs.</li> <li>c. Coordination with law enforcement, hospital emergency room personnel and other county service providers to offer assistance and intervention when other agencies are the initial point of contact for a person in a mental health crisis.</li> </ol> </li> </ol>	X 800		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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X 800	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on interview and review of the treatment record and policy and procedures, linkage and coordination services were not delivered to Client 1 and Client 1's family at a time when Client 1 was at risk of experiencing a crisis. Findings include:</p> <p>A phone interview with Family Member B conducted on 07/31/2019 at 1:15 PM reported a transfer of care meeting occurred on 03/07/2019 between Client 1, Family Member 2, Crisis Intervention Worker D, and Crisis Case Manager E. During this meeting, Family Member B reported an understanding that due to the transfer in Client 1's care and the structure of Rock County DHS Crisis Case Management, new treatment providers would need to be sought out in the community through Client 1's insurance. Family Member B reported an understanding that Crisis Intervention Worker D would be assisting the family with seeking community providers within the family's insurance network since specific providers would be necessary due to Client 1's legal commitment. Family Member B reported Crisis Intervention Worker D requested Client 1's insurance information and obtained a copy of the insurance card with the assistance of Crisis Case Manager E. Family Member B reported Client 1 was agreeable to family therapy and would need a new psychiatrist for medications. Both services are conditions of Client 1's legal commitment. Family Member B reported an understanding that Crisis Intervention Worker D would be contacting Client 1's family with referrals for services by the next week. Family Member 2 denies receiving assistance from Crisis Intervention Worker D with seeking providers in the community. Family Member 2 reports messages left for Crisis Intervention</p>	X 800		
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X 800	<p>Continued From page 2</p> <p>Worker D went unanswered and were not documented in Client 1's record. Family Member 2 reports having to return to Client 1's previous psychiatrist in order to obtain a medication check for Client 1 because a psychiatric referral had not been made.</p> <p>A phone interview with Crisis Intervention Worker D conducted on 08/01/2019 at 12:35 PM and review of Client 1's progress notes, confirmed a meeting was held on 03/07/2019. Crisis Intervention Worker D reported informing Family Member B to, "call insurance to get a list of providers in network in the community that offered family therapy" followed by "If I learn of anything I will call but otherwise plan to talk on the [March] 13th." Surveyor asked Crisis Intervention Worker D if a copy of the insurance card was obtained during this meeting. Crisis Intervention Worker D denied obtaining a copy of the insurance card at that time and stated, "[I was] to get that from mom, the guardian and insurer [at the meeting on March 13th]."</p> <p>Contradictory to Crisis Intervention Worker D's statement, documentation completed and signed by Crisis Intervention Worker D on 03/13/2019 in the form of a progress note for services rendered on 03/07/2019 contained the following statements, "[Family Member B] indicated they are able to locate services however would like help if it is possible as they aren't as familiar with in home services or services in Rock County. [Family Member B] stated [Client 1] is covered by step mother's insurance, [insurance name], and feels it will cover most Mental Health services. Asked [Family Member B] to look into CI [Crisis Intervention] services as that is what we [Rock County] have to bill under." Further contradiction was found in Crisis Intervention Worker D's</p>	X 800		

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X 800	<p>Continued From page 3</p> <p>documentation completed and signed by Crisis Intervention Worker D on 03/14/2019 in the form of a progress note for services rendered on 03/13/2019 which contained the following statements, "The family is wanting family therapy and this worker will look into agencies that might accept their insurance. Discussed CSCM [crisis case management] and they all agree this might be beneficial to link them to services and provide them with support in the family until other services can get set up. They indicated the doctor in [Medical Doctor K] is willing to give five refills so we have six months to get [Client 1] set up with a psychiatrist. This worker will make referral and have someone call them by early next week." There was no further documentation made by Crisis Intervention Worker D regarding seeking community providers for Client 1. There was no documentation of phone call correspondence between Crisis Intervention Worker D and Family Member B located in Client 1's record. A copy of Client 1's step-mother's insurance card was located in the record. Although Crisis Intervention Worker D documented having 6-months to find Client 1 a new psychiatrist, surveyor determined this 6-month timeline did not meet the needs of Client 1 during the transfer of care.</p> <p>A phone interview conducted with Crisis Case Manager E on 08/02/2019 at 9:00 AM confirmed this meeting took place. Surveyor inquired about outcome of 03/07/2019 meeting. Crisis Case Manager confirmed general statements regarding the meeting to be true, but reported a mutual understanding similar to Family Member B that Crisis Intervention Worker D would be "assisting with finding an outside provider for family services and psychiatry within a couple of days". Crisis Case Manager E reported Family Member B had concerns about what to do in the meantime to</p>	X 800		

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X 800	<p>Continued From page 4</p> <p>which crisis hotline information was provided by both Crisis Intervention Worker D and Crisis Case Manager E. Surveyor asked Crisis Case Manager E if an exchange of insurance information occurred. Crisis Case Manager E stated, "I remember Crisis Intervention Worker D asking what insurance [Family Member B] had, and [Family member B] took out the insurance card. Crisis Intervention Worker D asked [Family Member B] if it was ok to make a copy of it and [Family Member B] agreed. I remember making the copy and giving the copy to Crisis Intervention Worker D." Crisis Case Manager E reports discharging Client 1 on 03/07/2019 due to successful transfer to Rock County. Client 1's record contained a discharge summary to confirm this information to be accurate. Client 1 then experienced a medical incident on 03/18/2019, prompting Client 1's family to reach out to Crisis Case Manager E for assistance with a medication check with previous psychiatrist; Medical Doctor K. Crisis Case Manager E was informed by Family Member B a new psychiatrist had not yet been set up within Rock County. Crisis Case Manager E was able to schedule Client 1 for a "priority appointment on 03/20/2019" with Medical Doctor K. Client 1's record contained documentation of this reported contact on 03/18/2019 and 03/20/2019.</p> <p>Additional information obtained by Family Member B during 07/31/2019 phone interview included outcomes of a follow-up meeting scheduled with Crisis Intervention Worker D, Client 1, Family Member L, and Family Member B on 03/13/2019. Family Member L was not available for surveyor interview. Family Member B, who resides with Family Member L and at the time Client 1, reported a mutual understanding within the family that linkage and coordination</p>	X 800		

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X 800	<p>Continued From page 5</p> <p>services would be provided with the assistance of Crisis Intervention Worker D and newly assigned Crisis Case Manager C.</p> <p>Crisis Intervention Worker D reported during the 08/01/2019 phone interview that it was stated to the Client 1 and family at the 03/13/2019 meeting, "I would attempt to look for resources. If I was not able to do that, the case manager would assist because we try to do that as quickly as possible." In addition, Crisis Intervention Worker D reported informing Client 1 and family, "if they did not hear from the case manager by Wednesday [03/20/2019] to call [Crisis Intervention Worker D] to follow-up." Surveyor asked if contact was made and Crisis Intervention Worker D stated, "No, they didn't call. I don't recall getting any information after that meeting." A Crisis Plan documented and signed by Crisis Intervention Worker D on 03/21/2019 following the development of the plan on 03/14/2019, contained the following information under Linkage and Follow Up: "CSCM [Crisis Case Manager C] referral was made to assist with locating appropriate services in Rock County as his commitment and services were transferred to Rock County from Walworth County. CI [Crisis Intervention Worker D] will monitor his compliance and provide support, linkage, and assessment as requested."</p> <p>Review of Rock County Human Services Department DHS 34 Policy and Procedure Manual for Crisis Services states the following: Crisis Services provides timely person centered services to individuals or families who are experiencing, or are at risk of experiencing, a mental health or AODA Crisis.</p> <p>Also included in the policy and procedure manual</p>	X 800		

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X 800	Continued From page 6  are summaries of crisis staff responsibilities. Listed under Crisis Intervention Workers/Clinicians are the following: Conduct assessments of individuals at risk of harming self or others per standards outlined in DHS Chapter 51; Conduct determination of service needs assessments for individuals who are at risk of entering into a period of crisis; Develop Safety Plans which may include scheduled welfare checks and/or referral to additional mental health/AODA services; Provide short-term therapeutic services to alleviate immediate risk; Provide back up to other crisis service staff as assigned.	X 800		
X 842	DHS 34.23(7)(a) Crisis Plan  The program shall prepare a crisis plan for a person who is found to be at high risk for a recurrent mental health crisis under the criteria established in the coordinated community services plan under s. DHS 34.22 (1) (a) 7.  This Rule is not met as evidenced by: Based on treatment record and policy and procedure review, Client 1's crisis plan was not completed, in accordance with state statutes and as outlined in Rock County's policies, in a manner that would thoroughly inform crisis staff and family with information found to be helpful at a time of crisis . Findings include:  Review of Rock County Human Services Department DHS 34 Policy and Procedure Manual for Crisis Services determined the policy titled, Crisis Plan Development/Update prompts for the retrieval of specific information regarding a clients case history and current needs. Review of	X 842		

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X 842	<p>Continued From page 7</p> <p>Client 1's Crisis Plan dated 03/14/2019 was documented and signed by Crisis Intervention Worker D on 03/14/2019. The Crisis Plan was then signed by Program Manager H on 03/28/2019. Based on a progress note dated 03/15/2019, Client 1's Crisis Plan was documented as being carried over from the previous provider but reviewed and updated by Crisis Intervention Worker D on 03/14/2019. Additional findings include:</p> <p>Risk and Concerns - documentation did not include history of suicidal ideation or new patterns of risk</p> <p>Trauma History - documentation stated, "unknown at this time".</p> <p>Medical Problems - documentation stated, "unknown at this time".</p> <p>Previous Emergency Mental Health Services Provided -documentation did not include information regarding the previous crisis provider and Client 1's transfer</p> <p>History of Hospitalizations - documentation identified bulleted information regarding history, per policy this was incomplete</p> <p>Intervention Strategies - documentation stated, "CSCM [Crisis Case Manager C] will develop more strategies with [Client 1] and family." Per policy, the additional information documented here should contain a specific plan for crisis response, what has been learned from previous crisis involvement, mitigating risk factors, and when to consider increased level of care.</p> <p>Strategies that do not help in a crisis situation - documentation stated, "Not indicated on [previous provider] Crisis Plan. CSCM [Crisis Case Manager C] will develop with [Client 1] and family."</p>	X 842		



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X 871	Continued From page 8	X 871		
X 871	<p>DHS 34.25(2)(a) Conflict Resolution Procedure</p> <p>A program shall inform clients and their parents or guardian, where the consent of the parent or guardian is required for services, that they have the option of using either formal or informal procedures for resolving complaints and disagreements.</p> <p>This Rule is not met as evidenced by: Based on interview the family of Client 1 was not given the option of using either formal or informal procedures for resolving complaints and disagreements. Findings include:</p> <p>Based on interview with Family Member A and Family Member B concerns regarding Client 1's services were not addressed in a manner that was compliant with the grievance procedure as outlined in DHS 94.40 System Requirements. Both family members reported repeat correspondence via email, phone, and an in person meeting with Rock County Division Manager M and Director G regarding Client 1's care. Email correspondence was reviewed to determine these reports were accurate.</p> <p>During an interview with Director G information was provided regarding the meeting held on 07/18/2019 with Family Member A and Family Member B intended to assist the family with gathering more information about Client 1's services. Director G provided surveyor with a copy of email correspondence and a timeline of steps taken before, during, and after Client 1's admission to crisis services. Prior to the meeting with family members was a note (date unknown, July of 2019) documenting "Medical Director N reported that [Medical Director N] reviewed the records and has no concerns about the quality of</p>	X 871		

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X 871	Continued From page 9  care provided." Upon observation of this note, surveyor asked Director G if at any time this correspondence and these meetings were handled in accordance with grievance procedures. Upon asking this, Director G stated, "You know, I never really thought of it that way. We were trying to listen to and be there for the family but as it progressed I didn't think to determine whether or not this had escalated to a formal complaint. I didn't have that procedure in mind at the time."  Based on review of Rock County Department of Health Services 2018 recertification application, Medical Director N is not identified as the Client Rights Specialist. In addition, Medical Director N has direct involvement with the oversight of the crisis program.	X 871		
X 935	DHS 94.08 Prompt and Adequate Treatment  All patients shall be provided prompt and adequate treatment, habilitation or rehabilitation, supports, community services and educational services as required under s. 51.61 (1) (f), Stats., and copies of applicable licensing and certification rules and program manuals and guidelines.  This Rule is not met as evidenced by: Based on interview, review of the treatment record, and policy and procedures, prompt and adequate treatment, supports, and community services were not provided to Client 1 and Client 1's family as evidenced by delayed case management appointments, a lack of referrals, and under-assessed risk potential. Findings include:	X 935		

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X 935	<p>Continued From page 10</p> <p>Client 1's treatment record contained a copy of the legal orders involved in Client 1's mental health care dating from 04/27/2018 - 03/27/2019. These orders provide a summary of Client 1's case history and, most recently, Medical Doctor J, the professional examiner's observations and recommendations regarding Client 1's need for current care. The most recent examination document dated 03/22/2019 identified Client 1 to be at high-risk of crisis, including suicidal and violent behavior, if current treatment did not continue. In addition, the examination identifies a patterned history of this type of de-compensation when not receiving consistent treatment. Medical Doctor J's final comments found reason to extend Client 1's legal commitment due to both these patterns and the recent change in treatment providers requiring time for reestablishing care. This information was made available to the provider and treatment team for review as of 03/22/2019, 13 days prior to the 04/04/2019 assessment with Crisis Case Manager C. Two examinations from the months prior to the 03/22/2019 exam, dated 02/21/2018 and 05/07/2018, also identified high-risk behavior to substantiate the current findings of the 03/22/2019 exam. This information was made available to the provider and treatment team for review as of 03/18/2019 as reported in a progress note documented and signed by Crisis Intervention Worker D.</p> <p>A phone interview with Family Member B conducted on 07/31/2019 at 1:15 PM reported Client 1 was scheduled to meet with Crisis Case Manager C on 2 separate occasions, 03/20/2019 and 03/26/2019. Both of these appointments were rescheduled by Crisis Case Manager C due to illness. Family Member B reported this correspondence was done via text message.</p>	X 935		

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X 935	<p>Continued From page 11</p> <p>Family Member B reported calling Crisis Case Manager C on 04/03/2019 stating Client 1 was having an "episode" at school and "escalating". Family Member B reported expressing concerns to Crisis Case Manager C of fear for both personal safety and the safety of Client 1. Family Member B reports seeking information from Crisis Case Manager C for whom to call if the situation progressed into the evening of 04/03/2019.</p> <p>A progress note completed and signed by Crisis Case Manager C dated 04/03/2019 documented a phone call Crisis Case Manager C received from Family Member B and states, "[Family Member B] stated that [Client 1] is becoming more aggressive and hostile" and "[school staff] notified them that [school staff] had become fearful of [Client 1]" and "[Family Member B] wanted information on who to contact if they have any problems with [Client 1] this evening. This writer stated that [Crisis Case Manager C] would contact the Crisis Unit and that this writer will call them to update on [Client 1's] situation." The progress note states the crisis unit was updated and Family Member B was given the contact number for the Crisis Unit. An existing assessment appointment had been scheduled for the afternoon of the following day, 04/04/2019.</p> <p>Additional information obtained by Family Member B during 07/31/2019 phone interview included the reported events and outcomes of the 04/04/2019 assessment meeting with Crisis Case Manager C. Family Member B stated, "At the meeting [Crisis Case Manager C] came into the lobby with a piece of paper in [Crisis Case Manager C's] hand and looked for an available room. [Client 1] asked [Crisis Case Manager C], "what's that?". [Crisis Case Manager] slid the</p>	X 935		

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>1803</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>07/31/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ROCK COUNTY HUMAN SVS CRISIS INTERVENTION</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3530 N COUNTY HIGHWAY F JANESVILLE, WI 53547</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
X 935	<p>Continued From page 12</p> <p>document across the table with one finger, leaned back in the chair and told [Client 1], "[Medical Doctor J] is recommending an additional 6-month commitment" which made [Client 1] go nuts." Family Member B reports choosing to leave the room to allow Client 1 and Crisis Case Manager C to talk in private. Family Member B reports Client 1 exiting the assessment "about 30 minutes later" with Client 1 being in a calmer state. Family Member B reports little information provided following the assessment other than intention for Client 1 to write a letter regarding legal commitment. Family Member B reports feeling Crisis Case Manager C did not understand the severity of Client 1's situation and family concerns.</p> <p>A progress note completed and signed by Crisis Case Manager C dated 04/04/2019 documented events from 04/04/2019 before and during the assessment meeting. According to the progress note, at 9:06 AM, Crisis Case Manager C "Checked legal status for [Client 1's] legal commitment order. [Client 1's] commitment transferred to Rock County on 03/01/2019." In addition, at 3:15 PM - 3:57 PM Crisis Case Manger C documented, "This writer [Crisis Case Manager C] met with [Client 1] and [Family Member 2] at HCC. Reviewed evaluation from [Medical Doctor J] recommending extension of [Client 1's] commitment order." Crisis Case Manager C went on to document Client 1 as "highly upset" about the extension and "continued to be angry" and "expressed frustrations with being in the system" but further discussion with Client 1 and the development of a plan to write a letter to the judge helped calm Client 1.</p> <p>A phone interview was conducted with Crisis Case Manager C on 08/01/2019 at 10:35 AM.</p>	X 935		

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>1803</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>07/31/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ROCK COUNTY HUMAN SVS CRISIS INTERVENTION I</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3530 N COUNTY HIGHWAY F</b> <b>JANESVILLE, WI 53547</b>
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X 935	<p>Continued From page 13</p> <p>Surveyor asked Crisis Case Manger C if the record was available prior to the 04/04/2019 assessment and if so, was it reviewed. Crisis Case Manager C responded, "Yes I had access to the record and I briefly went over it." Crisis Case Manager C reported understanding Client 1's situation to be of "moderate urgency". Crisis Case Manager confirmed the 03/20/2019 and 03/26/2019 appointments were rescheduled. Surveyor asked Crisis Case Manager C if after-hours crisis contact information was provided at time of cancellations and Crisis Case Manger C stated, "I don't know. My assumption would be that [Crisis Intervention Worker D] would have given this information." After-hours crisis contact information was confirmed to be provided by Crisis Intervention Worker D during 03/07/2019 initial assessment meeting. Surveyor asked Crisis Case Manager C what the protocol for canceling/rescheduling appointments with clients receiving crisis services are. Crisis Case Manager C reported responsibility to fall on worker to reschedule appointment with client. Surveyor repeated surveyors understanding that unless there is an identified need, there is no communication with the Crisis Supervisor about what clients are being seen and what clients are being rescheduled/canceled from the time of intake with the Crisis Intervention Worker to the time of assessment with the Crisis Case Manager. Crisis Case Manager C confirmed this understanding to be accurate. Surveyor asked Crisis Case Manager C about suicide screening and whether or not an inquiry about access to weapons had been made with Client 1 and/or Family Member B. Crisis Case Manager C stated, "I did the Columbia Suicide Scale" and "No, I did not [inquire about weapons]. I was under the assumption [Client 1] had already been educated on that because [Client 1] was on a commitment</p>	X 935		

Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>1803</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>07/31/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ROCK COUNTY HUMAN SVS CRISIS INTERVENTION</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3530 N COUNTY HIGHWAY F JANESVILLE, WI 53547</b>
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X 935	<p>Continued From page 14</p> <p>order." Crisis Case Manager C reported Client 1 to have "future thinking" and "plans for the weekend" at the end of the 04/04/2019 assessment meeting.</p> <p>A phone call interview with Crisis Case Manager E on 08/02/2019 at 9:00 AM determined Client 1 was being seen by Crisis Case Manager E about 1 time weekly. Surveyor asked Crisis Case Manager E about transfer meeting held on 03/07/2019. Crisis Case Manager E stated, "There was enough information between us [Family Member B and Crisis Case Manager E] to convey to Crisis Intervention Worker D and [sic] new provider that Client 1 was at a moderately-high to high risk." Reasons identified by Crisis Case Manger E included recent inpatient stays, legal commitment, upcoming commitment evaluation, change in school, change in provider, and dynamics in the family. Email correspondence between Crisis Case Manager E and Crisis Intervention Worker D received on 03/12/2019 verified this information was conveyed to Crisis Intervention Worker D, including frequency of contact with Client 1.</p> <p>Review of Rock County Human Services Department DHS 34 Policy and Procedure Manual for Crisis Services determined there is not a current policy for the monitoring of canceled and/or rescheduled appointments with clients receiving crisis services.</p>	X 935		