

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL032-614</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/23/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>RECOVERY CONNECTIONS OF DURHAM - III</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2016 COOK ROAD</b> <b>DURHAM, NC 27713</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
V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow-up survey was completed on March 23, 2018. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 5600E Supervised Living for Substance Abuse Adults.</p>	V 000		
V 107	<p><b>27G .0202 (A-E) Personnel Requirements</b></p> <p><b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b></p> <p>(a) All facilities shall have a written job description for the director and each staff position which:</p> <ul style="list-style-type: none"> <li>(1) specifies the minimum level of education, competency, work experience and other qualifications for the position;</li> <li>(2) specifies the duties and responsibilities of the position;</li> <li>(3) is signed by the staff member and the supervisor; and</li> <li>(4) is retained in the staff member's file.</li> </ul> <p>(b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility:</p> <ul style="list-style-type: none"> <li>(1) is at least 18 years of age;</li> <li>(2) is able to read, write, understand and follow directions;</li> <li>(3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and</li> <li>(4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry.</li> </ul> <p>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based</p>	V 107		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 107	<p>Continued From page 1</p> <p>upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure one of three audited staff (Staff #1) met the minimum level of education requirements. The findings are:</p> <p>Review of the facility's personnel records on 3/23/18 revealed: -Staff #1 had a hire date of 11/14/12. -Staff #1 was hired as a Facility Manager. -There was no documentation staff #1 met the minimum level of education required.</p> <p>Interview on 3/23/18 with the Facility Director revealed: -Staff #1 was obtaining her High School Equivalency Diploma. -She confirmed Staff #1 had no documentation that she met minimum level of education required.</p>	V 107		

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V 107	Continued From page 2  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 107		
V 290	27G .5602 Supervised Living - Staff  10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. (b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body.	V 290		

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V 290	<p>Continued From page 3</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:            (1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and            (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.</p> <p>This Rule is not met as evidenced by:            Based on record review and interview the facility failed to ensure at least one staff member on duty had training on alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addictions affecting one of three audited staff (Staff #1.) The findings are:</p> <p>Review of the facility's personnel records on 3/23/18 revealed:            -Staff #1 had a hire date of 11/14/12.            -Staff #1 was hired as a Facility Manager.            -There was no evidence of training on alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addictions.</p> <p>Interview on 3/23/18 with the Facility Director revealed:            -Staff #1 worked alone.            -She confirmed Staff #1 did not have training on alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addictions.</p>	V 290		