

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>MHL073-061</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>R</b><br><b>05/09/2018</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>MCDANIEL HOME #1</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>192 COUNTRY CLUB ROAD</b><br><b>ROXBORO, NC 27574</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>INITIAL COMMENTS</p> <p>An annual and follow-up survey was completed on May 9, 2018. There was a deficiency cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 5600C Supervised Living for Adults with Developmental Disabilities</p>   | V 000         |   |                    |
| V 131              | <p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by:<br/>Based on record review and interview the facility failed to access the Health Care Personnel Registry (HCPR) prior to employment for one of three audited staff (#3). The findings are:</p> <p>Review on 5/9/18 of Staff #3's personnel record revealed:</p> <ul style="list-style-type: none"> <li>- Hired date: 4/3/17.</li> <li>- Job title: Habilitation Technician - Weekends</li> <li>- HCPR was accessed 4/4/17.</li> </ul> <p>During interview on 5/9/18 with the House Manager confirmed the HCPR was not accessed prior to employment for staff #3. She reported the</p> | V 131         |   |                    |

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| Division of Health Service Regulation<br>LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| V 131              | Continued From page 1<br><br>Director was responsible for accessing the document.  | V 131         |   |                    |
| V 290              | 27G .5602 Supervised Living - Staff<br><br>10A NCAC 27G .5602 STAFF<br>(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.<br>(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.<br>(c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present:<br>(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<br>(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 2</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:</p> <p>(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</p> <p>(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:<br/>Based on record review and interview, the facility failed to assess and document the client's capability of having unsupervised time in the home in the treatment or habilitation plan affecting one of two audited clients (#2). The findings are:</p> <p>Review on 5/9/18 of Client #2's record revealed:</p> <ul style="list-style-type: none"> <li>- Admission date 12/12/12.</li> <li>- Diagnoses of Schizophrenia Disorder, Undifferentiated Type, Mild Developmental Disability and Alcohol Dependence by History.</li> <li>-Treatment Plan dated 6/1/17.</li> <li>- There was no assessment that demonstrated client was capable of unsupervised in the home.</li> </ul> <p>Interview on 5/9/18 with the House Manager revealed:</p> <ul style="list-style-type: none"> <li>-Client #2 had unsupervised time in the home for one hour.</li> <li>-Confirmed there was no assessment in the record.</li> <li>-She would have the Qualified Professional complete an assessment to determine client #2's capability of having supervised time.</li> </ul> | V 290         |   |                    |

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