Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION STATEMENT OF DEFICIENCIES (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: B WING MHL092-676 04/26/2018 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 413 RALPH DRIVE RALPH DRIVE HOME **CARY, NC 27513** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 An Annual and Follow Up Survey was completed DHSR - Mental Health 04/26/18. A deficiency was cited. MAY 1 4 2018 This facility is licensed for the following service category 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. Lic. & Cert. Section 27G .5602 Supervised Living - Staff V 290 V 290 Recruitment and staffing of Direct 6/25/2018 10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum Service Providers: Bi-monthly internal numbers specified in Paragraphs (b), (c) and (d) job fairs and monthly external job fairs of this Rule shall be determined by the facility to are currently conducted. Job openings enable staff to respond to individualized client are continuously posted on job boards such as Indeed, Craig's list and LinkedIn. (b) A minimum of one staff member shall be New Hire Orientations are also held bipresent at all times when any adult client is on the premises, except when the client's treatment or monthly. Additionally, we continually habilitation plan documents that the client is post for PRN DSPs. Staff retention capable of remaining in the home or community program initiatives continue to be without supervision. The plan shall be reviewed ongoing, Community Residential QP. as needed but not less than annually to ensure supervisors and current house staff all the client continues to be capable of remaining in cover as many shifts as possible to fill the home or community without supervision for specified periods of time. gaps until staffing holes are (c) Staff shall be present in a facility in the permanently filled and/or PRN pool is following client-staff ratios when more than one replenished. Applications are tracked child or adolescent client is present: on a spreadsheet and external job fair (1) children or adolescents with substance attendees are tracked on sign in logs. abuse disorders shall be served with a minimum QP will schedule accordingly and as a of one staff present for every five or fewer minor clients present. However, only one staff need be last resort, support a resident in present during sleeping hours if specified by the another TLC home nearby if needed emergency back-up procedures determined by until adequate staff coverage is the governing body; or available. 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 Division of Health Service Regulation LABORATORY PIRECTORS OF PROVIDER'S UPPLIER REPRESENTATIVE'S SIGNATURE STATE FORM

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Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: R B. WING MHL092-676 04/26/2018 -NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 413 RALPH DRIVE RALPH DRIVE HOME **CARY, NC 27513** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (EACH (X5) COMPLETE (X4) ID (EACH DEFICIENCY MUST BE PRECEDED BY FULL CORRECTIVE ACTION SHOULD BE PRE PREFIX CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) DATE TAG FIX TAG DEFICIENCY V 290 V 290 Continued From page 1 Continued From page 1 more clients present. However, only one staff 6/25/2018 QP will alert CPO and QA/QI immediately if need be present during sleeping hours if adequate staff coverage is not found so specified by the emergency back-up procedures other staff from other programs can be determined by the governing body. (d) In facilities which serve clients whose primary floated to ensure staff ratios. diagnosis is substance abuse dependency: 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 the services of a certified substance abuse counselor shall be available on an as-needed basis for each client. This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to maintain staff-client ratios above the minimum numbers to enable staff to respond to individualized needs for four of four clients (#1-#4). The findings are: Review on 04/24/18 of the facility's records for the clients revealed: Client #1- diagnoses included Profound Mental Retardation, Visually and Hearing Impaired Client #2- diagnoses included Mental Retardation, Microcephaly, Bell's Palsy and Damdy-Walker Syndrome Client #4- diagnoses included Severe Mental Retardation, Cleft Palate, Febrile Seizures and Abnormal Vision During interview on 04/24/18, staff #2 reported: She had been recently hired She had worked at the facility for two days.

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	During interview on 04/24/18, staff #1 reported:					
	She worked on the 2nd shift between 3-11P She worked at the facility for the past few months					
				-		
	alone. She was informed the facility should have two staff on the second shift. Clients #1-#3 required physical assistance with					
	bathing and activities of daily living, client #4					
	could do things on h	ner own with monitoring.				
	Dusing integrious h	ohugon 04/24/19 and				
	During interviews between 04/24/18 and 04/25/18, the Qualified Professional reported: She completed the staff schedule for this home.					
El .						
	Staff #3 worked the first shift. However, staff #3 was on vacation the week of April 23, 2018. While staff #3 was on vacation, she provided					
	transportation for clients at this house during the day to various day programs. All clients except					
	client #1 went to a day program on April 24, 2018.					
	Client #1 did not attend a day program today so					
	staff from another house provided monitoring for					
	her.					
		lget included two staff on e staff on each of the other				
		8, the clients were home				
		, most were enrolled in day				
	programs.					
		group home did not have				
	adequate staffing to accommodate the three shifts inclusive of as relief and paraprofessional					
	staff in cases of call					
	emergencies.					
	The agency had bee	en in the process of hiring				
		eds of the clients in the home.				
		stain staff either during				
		or after a few weeks of work. teran staff that had resigned				
		er home which impacted the				
		coverage at other homes.				