

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-874	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 05/30/2018
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NAME OF PROVIDER OR SUPPLIER AGAPE UNIT CARE SERVICES INC	STREET ADDRESS, CITY, STATE, ZIP CODE 2801 RAMSEY STREET FAYETTEVILLE, NC 28301
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V 000	<p>INITIAL COMMENTS</p> <p>An annual, complaint and follow up survey was completed on May 30, 2018. The complaint was unsubstantiated (intake #NC00137990). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1200 Psychosocial Rehabilitation Facilities for Individuals with Severe and Persistent Mental Illness.</p>	V 000		
V 500	<p>27D .0101(a-e) Client Rights - Policy on Rights</p> <p>10A NCAC 27D .0101 POLICY ON RIGHTS RESTRICTIONS AND INTERVENTIONS</p> <p>(a) The governing body shall develop policy that assures the implementation of G.S. 122C-59, G.S. 122C-65, and G.S. 122C-66.</p> <p>(b) The governing body shall develop and implement policy to assure that:</p> <p>(1) all instances of alleged or suspected abuse, neglect or exploitation of clients are reported to the County Department of Social Services as specified in G.S. 108A, Article 6 or G.S. 7A, Article 44; and</p> <p>(2) procedures and safeguards are instituted in accordance with sound medical practice when a medication that is known to present serious risk to the client is prescribed. Particular attention shall be given to the use of neuroleptic medications.</p> <p>(c) In addition to those procedures prohibited in 10A NCAC 27E .0102(1), the governing body of each facility shall develop and implement policy that identifies:</p> <p>(1) any restrictive intervention that is prohibited from use within the facility; and</p> <p>(2) in a 24-hour facility, the circumstances under which staff are prohibited from restricting the rights of a client.</p>	V 500		

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

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V 500	<p>Continued From page 1</p> <p>(d) If the governing body allows the use of restrictive interventions or if, in a 24-hour facility, the restrictions of client rights specified in G.S. 122C-62(b) and (d) are allowed, the policy shall identify:</p> <p>(1) the permitted restrictive interventions or allowed restrictions;</p> <p>(2) the individual responsible for informing the client; and</p> <p>(3) the due process procedures for an involuntary client who refuses the use of restrictive interventions.</p> <p>(e) If restrictive interventions are allowed for use within the facility, the governing body shall develop and implement policy that assures compliance with Subchapter 27E, Section .0100, which includes:</p> <p>(1) the designation of an individual, who has been trained and who has demonstrated competence to use restrictive interventions, to provide written authorization for the use of restrictive interventions when the original order is renewed for up to a total of 24 hours in accordance with the time limits specified in 10A NCAC 27E .0104(e)(10)(E);</p> <p>(2) the designation of an individual to be responsible for reviews of the use of restrictive interventions; and</p> <p>(3) the establishment of a process for appeal for the resolution of any disagreement over the planned use of a restrictive intervention.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to report to the Department of Social Services (DSS) in the county where services are provided an allegation of resident exploitation by health care personnel. The findings are:</p>	V 500		

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V 500	<p>Continued From page 2</p> <p>Review on 05/30/18 of a North Carolina Incident Response Improvement System (IRIS) report completed by Qualified Professional (QP) #1 revealed:</p> <ul style="list-style-type: none"> - Date of Incident: 04/23/18. - "Incident Comments: Consumer (client #42) volunteers to organize and set up the Resource center. Upon reviewing of the policy we determine we were in violation of our policy." - "Describe the cause of this incident, (the details of what led to this incident). Consumer volunteers to organize and set up the Resource center. Upon reviewing of the policy we determine we were in violation of our policy." - "To remedy this matter the consumer will be compensated a minimum wage on the next payroll cycle for their time render. To review policies before actions are taken. To ensure that person served will be paid at least minimum wage for work perform for Agape Unit Care Services, and any services outside the scope of their PCP (Person-Centered Plan), during PSR (Psychosocial Rehabilitation) programmatic hours." - Notification of the Health Care Personnel Registry was checked on the document. - No documentation the local DSS was notified of the incident. <p>Interview on 05/30/18 QP #1 stated:</p> <ul style="list-style-type: none"> - She had completed the IRIS report for the exploitation allegation from client #42. - She had not sent the document nor notified the local DSS of the allegation. <p>Interview on 05/30/18 the Program Director stated:</p> <ul style="list-style-type: none"> - He was aware of the allegation of exploitation made by client #42. 	V 500		

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V 500	Continued From page 3 - The program had been stopped. - He understood the local DSS needed to be notified of all allegations of abuse, neglect and exploitation.	V 500		
V 752	<p>27G .0304(b)(4) Hot Water Temperatures</p> <p>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (4) In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to maintain the water temperature between 100-116 degrees Fahrenheit. The findings are:</p> <p>Observation on 05/30/18 at approximately 10:10am revealed: - The hot water temperature in the male bathroom used by the clients was 120 degrees Fahrenheit</p> <p>Interview on 05/30/18 the Program Director stated: - He was not aware if anyone checked the hot water temperature at the facility. - He would ensure the water temperature was regulated as required.</p> <p>[This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.]</p>	V 752		

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