

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL043-102	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/17/2018
NAME OF PROVIDER OR SUPPLIER FREEDOM CARE SERVICES, LLC #6		STREET ADDRESS, CITY, STATE, ZIP CODE 34 SHALLOW FORD STREET CAMERON, NC 28326		
(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	INITIAL COMMENTS An annual and complaint survey was completed on May 17, 2018. The complaints were substantiated (intake #NC00138634 and NC00138383). Deficiencies were cited. The facility is licensed for the following service category: 10A NCAC 27 G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000	Licensee will assure that all professionals have the requirements to be considered an employee. Licensee will assure that all professionals that transport will have valid drivers license. Licensee will do random checks to assure drivers license are still active and in good standings. If the license are not in good standing and active the professional will not transport.	7/1/18
V 109	27G .0203 Privileging/Training Professionals 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS (a) There shall be no privileging requirements for qualified professionals or associate professionals. (b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served. (c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (d) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. (e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS. (f) The governing body for each facility shall develop and implement policies and procedures	V 109		

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

TITLE

(X6) DATE

STATE FORM

18QV11

If continuation sheet 1 of 16

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V 109	<p>Continued From page 1</p> <p>for the initiation of an individualized supervision plan upon hiring each associate professional. (g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, one of one Qualified Professionals (the Licensee/Qualified Professional) failed to demonstrate knowledge, skills and abilities to meet the needs of clients. The findings are:</p> <p>a. Review on 5/15/18 of client #1's record revealed: -Admission date of 4/22/18. -Diagnoses of Bipolar Disorder, Major Depressive Disorder, Depression, Post Traumatic Stress Disorder, Seizure Disorder, Anemia, Hyperlipidemia, Acute Renal Failure and Restless Legs Syndrome.</p> <p>b. Review on 5/15/18 of client #2's record revealed: -Admission date of 4/18/18. -Diagnoses of Schizophrenia-Undifferentiated Type and Major Vascular Neurocognitive Disorder with Behavioral Disorder.</p> <p>c. Review on 5/15/18 of client #3's record revealed: -Admission date of 4/24/18. -Diagnoses of Schizophrenia-Unspecified, Bipolar Disorder-Unspecified, Hyponatremia, Hypertension and Normocytic Hypochromic</p>	V 109		

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V 109	<p>Continued From page 2</p> <p>Anemia.</p> <p>Review of the facility's personnel records on 5/16/18 revealed:</p> <ul style="list-style-type: none"> -The Licensee/Qualified Professional had a hire date of 9/1/17. <p>Review of facility records on 5/15/18 revealed:</p> <ul style="list-style-type: none"> -An incident report dated 5/3/18 had the following: "Auto Accident-[Staff #1] was on the way home to drop clients off and [Staff #1] switched to other lane and a car side swiped [Staff #1], police was called, report was made, no injuries, no damages." <p>Interview with client #1 on 5/15/18 revealed:</p> <ul style="list-style-type: none"> -They were involved in a car accident a few weeks ago. -Staff #1 was driving the company van. -A car hit the side of the van while staff #1 was driving. -Another staff had to pick them up. -Staff #1 did not have a driver's license and could not drive them after the accident. <p>Interview with staff #1 on 5/17/18 revealed:</p> <ul style="list-style-type: none"> -She had a minor accident with the agency van at the beginning of May 2018. -Client's #1, #2, #3 and clients from another group home were on the van. -During the accident she was getting into another lane and a car side swiped the van. -She did call the police after the accident. -She does not have a driver's license to operate a motor vehicle. -She currently has a learner's permit. -The Licensee/Qualified Professional was aware she only had a Learner's permit. -She was the only staff transporting clients during that accident. 	V 109		

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V 109	<p>Continued From page 3</p> <ul style="list-style-type: none"> -She had to call another staff after the accident. -The other staff had to transport the clients to their group homes. -She transferred to that group home at the beginning of April 2018. -She had been transporting clients on the van alone since she transferred to that home. <p>Interview with the Licensee/Qualified Professional on 5/15/18 and 5/17/18 revealed:</p> <ul style="list-style-type: none"> -Staff #1 just recently had a minor accident with the agency van. -She thought client's #1, #2 and #3 were on the van during the accident. -Staff #1 told her she was switching lanes and a car side swiped the van. -Staff #1 did called the police after the accident. -Staff #1 had a learner's permit. -Staff #1 does not have a driver's license to operate a motor vehicle. -Staff #1 was the only staff transporting clients during that accident. -Staff #1 had to call another staff after the accident. -The other staff had to transport the clients back to the group home. -Staff #1 was working at the group home for about a month. -Staff #1 had been transporting clients on the van alone since she transferred to that home. -She was aware when she hired staff #1 that she only had a learner's permit. -Staff #1 informed her that she would be getting her driver's license. -She hired staff #1 towards the end of 2017 for one of her other homes. -She did not think to check with staff #1 about the status of her driver's license. <p>This deficiency is cross referenced into 10A</p>	V 109		

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V 109	Continued From page 4 NCAC 27G .5601 Scope (Tag V-289) for a Type B rule violation and must be corrected within 45 days.	V 109		
V 110	27G .0204 Training/Supervision Paraprofessionals 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter. (c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served. (d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (e) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.	V 110	Licensee will assure that all professionals have the requirements to be considered an employee. Licensee will assure that all professionals that transport will have a valid drivers license. Licensee will do random checks to assure drivers license are still active and in good standing. If the license are not in good standing or not active the professionals will not transport.	7/1/18

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V 110	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews one of three audited staff (staff #1) failed to demonstrate the knowledge, skills and abilities required for the population served. The findings are:</p> <p>a. Review on 5/15/18 of client #1's record revealed: -Admission date of 4/22/18. -Diagnoses of Bipolar Disorder, Major Depressive Disorder, Depression, Post Traumatic Stress Disorder, Seizure Disorder, Anemia, Hyperlipidemia, Acute Renal Failure and Restless Legs Syndrome.</p> <p>b. Review on 5/15/18 of client #2's record revealed: -Admission date of 4/18/18. -Diagnoses of Schizophrenia-Undifferentiated Type and Major Vascular Neurocognitive Disorder with Behavioral Disorder.</p> <p>c. Review on 5/15/18 of client #3's record revealed: -Admission date of 4/24/18. -Diagnoses of Schizophrenia-Unspecified, Bipolar Disorder-Unspecified, Hyponatremia, Hypertension and Normocytic Hypochromic Anemia.</p> <p>Review of the facility's personnel records on 5/16/18 revealed: -Staff #1 had a hire date of 12/7/17. -Staff #1 was hired as a Paraprofessional. -Staff #1 had a copy of a Learner's Permit issued 3/6/17. -No evidence of a driver's license to operate a</p>	V 110		

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V 110	<p>Continued From page 6</p> <p>motor vehicle.</p> <p>Review of facility records on 5/15/18 revealed: -An incident report dated 5/3/18 had the following: "Auto Accident-[Staff #1] was on the way home to drop clients off and [Staff #1] switched to other lane and a car side swiped [Staff #1], police was called, report was made, no injuries, no damages."</p> <p>Interview with client #1 on 5/15/18 revealed: -They were involved in a car accident a few weeks ago. -Staff #1 was driving the company van. -A car hit the side of the van while staff #1 was driving. -Another staff had to pick them up. -Staff #1 did not have a driver's license and could not drive them after the accident.</p> <p>Interview with staff #1 on 5/17/18 revealed: -She had a minor accident with the agency van at the beginning of May 2018. -Client's #1, #2, #3 and clients from another group home were on the van. -During the accident she was getting into another lane and a car side swiped the van. -She did call the police after the accident. -She does not have a driver's license to operate a motor vehicle. -She currently has a learner's permit. -The Licensee/Qualified Professional was aware she only had a Learner's permit. -She was the only staff transporting clients during that accident. -She had to call another staff after the accident. -The other staff had to transport the clients to their group homes. -She transferred to that group home at the beginning of April 2018.</p>	V 110		

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V 110	Continued From page 7 -She had been transporting clients on the van alone since she transferred to that home. Interview with the Licensee/Qualified Professional on 5/15/18 revealed: -Staff #1 just recently had a minor accident with the agency van. -She thought client's #1, #2 and #3 were on the van during the accident. -Staff #1 told her she was switching lanes and a car side swiped the van. -Staff #1 did call the police after the accident. -Staff #1 had a learner's permit. -Staff #1 does not have a driver's license to operate a motor vehicle. -Staff #1 was the only staff transporting clients during that accident. -Staff #1 had to call another staff after the accident. -The other staff had to transport the clients back to the group home. -Staff #1 was working at the group home for about a month. -Staff #1 had been transporting clients on the van alone since she transferred to that home. This deficiency is cross referenced into 10A NCAC 27G .5601 Scope (Tag V-289) for a Type B rule violation and must be corrected within 45 days.	V 110		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe	V 118	Licensee and professionals 7/11/18 will assure there are no blank spaces in the MARS. Licensee will retrain professionals	

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V 118	<p>Continued From page 8</p> <p>drugs.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to keep the MAR current affecting two of three clients (#2 and #3) and failed to record administered medications immediately affecting one of three clients (#1). The findings are:</p> <p>1. The following is evidence the facility failed to keep the MAR current.</p>	V 118	<p>on documenting MAR correctly.</p> <p>Licensee will double check the MARs weekly to assure professionals are in compliance</p> <p>Licensee and professionals will assure that all residents have a MAR per month and documentation is accurate on the MAR.</p>	

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V 118	<p>Continued From page 9</p> <p>a. Review on 5/15/18 of client #2's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 4/18/18. -Diagnoses of Schizophrenia-Undifferentiated Type and Major Vascular Neurocognitive Disorder with Behavioral Disorder. -Physician's order dated 4/18/18 for Docusate 100 mg, one capsule daily; Glycolox Powder 527 gm, mix 17 gms into 8 ounces of fluid daily; Pantoprazole Sodium 40 mg, one tablet daily; Lisinopril 40 mg, one tablet daily; Furosemide 20 mg, one tablet daily; Cardizem 120 mg, one capsule daily; Cetirizine HCL 5 mg, one tablet daily; Labetalol 200 mg, one tablet every 12 hours; Hydralazine 100 mg, one tablet every 8 hours; Prolixin 5 mg, one tablet two times daily; Cyclobenzaprine 10 mg, one tablet three times daily and Trazodone 100 mg, one tablet at bedtime. -The April 2018 MAR had blank spaces for the following medications: Docusate 100 mg on 4/20; Glycolox Powder 527 gm on 4/20, 4/25 through 4/30; Pantoprazole Sodium 40 mg on 4/20; Lisinopril 40 mg on 4/20; Furosemide 20 mg on 4/20; Cardizem 120 mg on 4/20; Cetirizine HCL 5 mg on 4/20; Labetalol 200 mg on 4/20 AM dose and 4/19 PM dose; Hydralazine 100 mg on 4/20 AM dose, 4/19 and 4/20 2 PM doses, 4/19 10 PM dose; Prolixin 5 mg on 4/20 AM dose and 4/19 PM dose; Cyclobenzaprine 10 mg 4/20 AM dose, 4/19, 4/20 and 4/25 2 PM doses, 4/19 and 4/20 PM doses and Trazodone 100 mg on 4/19. <p>b. Review on 5/15/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 4/24/18. -Diagnoses of Schizophrenia-Unspecified, Bipolar Disorder-Unspecified, Hyponatremia, Hypertension and Normocytic Hypochromic Anemia. 	V 118			

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V 118	<p>Continued From page 10</p> <p>-Physician's order dated 5/8/18 for Mobic 15 mg, one tablet daily; Quetiapine 400 mg, one tablet two times daily; Trazodone 50 mg, one tablet at bedtime; Pravastatin Sodium 20 mg, one tablet at bedtime and Divalproex Sodium DR 500 mg, five tablets at bedtime.</p> <p>-Physician's order dated 5/3/18 for Alprazolam 1 mg, one tablet three times daily.</p> <p>-Physician's order dated 4/30/18 for Lisinopril 5 mg, one tablet daily; Aspirin 81 mg, one tablet daily; Benzotropine Mesylate 1 mg, one tablet daily; Buspirone HCL 15 mg, one tablet two times daily; Clobetasol 0.05% cream, apply topically to affected area two times daily and Cetirizine HCL 10 mg, one tablet at bedtime.</p> <p>-The May 2018 MAR had blank boxes for the following medications: Mobic 15 mg on 5/1 through 5/5; Quetiapine 400 mg on 5/1 through 5/4; Trazodone 50 mg on 5/2 through 5/4; Pravastatin Sodium 20 mg on 5/2 through 5/4; Divalproex Sodium DR 500 mg on 5/2 through 5/4; Alprazolam 1 mg on 5/1 through 5/5 AM doses, 5/1 through 5/4 2PM doses and 5/1 through 5/4 8 PM doses; Lisinopril 5 mg on 5/1 through 5/4; Aspirin 81 mg on 5/1 through 5/4; Benzotropine Mesylate 1 mg on 5/1 through 5/4; Buspirone HCL 15 mg on 5/1 through 5/4; Clobetasol 0.05% cream on 5/1 AM and PM doses and Cetirizine HCL 10 mg on 5/2 through 5/4.</p> <p>Interview with the Licensee/Qualified Professional on 5/15/18 revealed:</p> <p>-She thought staff possibly forgot to document that medications were being administered.</p> <p>-There were no issues with clients getting their prescribed medications.</p> <p>-She thought client #3 could have possibly been hospitalized at the beginning of May 2018.</p> <p>-She confirmed facility staff failed to keep the</p>	V 118		

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V 118	<p>Continued From page 11</p> <p>MAR's current for clients' #2 and #3.</p> <p>2. The following is evidence the facility failed to record administered medications immediately.</p> <p>Review on 5/15/18 of client #1's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 4/22/18. -Diagnoses of Bipolar Disorder, Major Depressive Disorder, Depression, Post Traumatic Stress Disorder, Seizure Disorder, Anemia, Hyperlipidemia, Acute Renal Failure and Restless Legs Syndrome. -Physician's order dated 5/10/18 for Furosemide 20 mg, one tablet daily. -Physician's order dated 5/3/18 for Pantoprazole 40 mg, one tablet daily; Quetiapine Fumarate 300 mg, two tablets daily and Trazodone 100 mg, 2.5 tablets at bedtime. -Physician's order dated 4/19/18 for Ropinirole 0.5 mg, one tablet daily; Chlorpromaze 25 mg, one tablet in the morning, at noon and two tablets at bedtime and Prazosin 2 mg, one capsule daily. -Physician's order dated 4/12/18 for Benzotropine Mesylate 1 mg, one tablet at bedtime -Physician's order dated 3/26/18 for Ferrous Sulfate 325 mg, one tablet three times daily and Vitamin C 250 mg, one tablet three times daily. -Physician's order dated 3/15/18 for Atorvastatin 40 mg, one tablet at bedtime. -Physician's order dated 2/5/18 for Docusate Sodium 100 mg, one capsule two times daily. -Physician's order dated 1/2/18 for Metoprolol Succinate ER 25 mg, one tablet daily; Midodrine HCL 2.5 mg, one tablet three times daily; Paroxetine HCL 40 mg, one tablet daily and Tegretol 200 mg, one tablet three times daily. -Physician's order dated 11/24/17 for Gabapentin 300 mg, one capsule two times daily. -There was no evidence of an April or May 2018 MAR for the above medications. 	V 118			

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL043-102	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/17/2018
NAME OF PROVIDER OR SUPPLIER FREEDOM CARE SERVICES, LLC #6		STREET ADDRESS, CITY, STATE, ZIP CODE 34 SHALLOW FORD STREET CAMERON, NC 28326		
(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 118	Continued From page 12 Interview with staff #2 on 5/15/18 revealed: -Staff did administer medications to client #1 April 22 through May 15, 2018. -Client #1 did not have an April or May 2018 MAR. -Staff were writing there initials on the medication bubble packs. -Each time staff administered pills from the bubble pack they would put their initials. -She confirmed staff failed to record administered medications immediately for client #1. Interview with the Licensee/Qualified Professional on 5/15/18 revealed: -She was not aware there was no April or May 2018 MAR for client #1. -She confirmed staff failed to record administered medications immediately for client #1.	V 118		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as	V 289	Licensee will assure that all professionals have the requirements to be considered an employee. Licensee will assure that all professionals that transport will have a valid drivers license. Licensee will do random checks to assure drivers license	7/1/18

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL043-102	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/17/2018
NAME OF PROVIDER OR SUPPLIER FREEDOM CARE SERVICES, LLC #6		STREET ADDRESS, CITY, STATE, ZIP CODE 34 SHALLOW FORD STREET CAMERON, NC 28326		
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V 289	Continued From page 13 designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses; (4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses; (5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or (6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e) (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as	V 289	are still active and in good standing. If the license are not in good standing or active the professional will not transport.	

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NAME OF PROVIDER OR SUPPLIER FREEDOM CARE SERVICES, LLC #6		STREET ADDRESS, CITY, STATE, ZIP CODE 34 SHALLOW FORD STREET CAMERON, NC 28326			
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V 289	<p>Continued From page 14</p> <p>alternative family living or assisted family living (AFL).</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to operate and provide services for the care, habilitation and rehabilitation of three of three clients (#1, #2 and #3). The findings are:</p> <p>Cross Reference Tag 109 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS Based on record reviews and interviews, one of one Qualified Professionals (the Licensee/Qualified Professional) failed to demonstrate knowledge, skills and abilities to meet the needs of clients.</p> <p>Cross Reference Tag 110 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS Based on record reviews and interviews one of three audited staff (staff #1) failed to demonstrate the knowledge, skills and abilities required for the population served.</p> <p>Review on 5/17/18 of a Plan of Protection written by the Licensee/Qualified Professional dated 5/17/18 revealed: What immediate action will the facility take to ensure the safety of the consumers in your care: "The facility will not allow any staff without a operable drivers license to transport any residents within the facility. Staff with operable drivers license will transport residents." Describe your plans to make sure the above</p>	V 289			

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V 289	Continued From page 15 happens: "Facility will double check all staffs license upon hire and every 6 months-1 year after to assure licenses are in good standing. Facility also requires staff to report any changes in their license status immediately of them being notified." Staff #1 had a accident with the agency van while transporting clients on 5/3/18. Staff #1 did not have a driver's license to operate a motor vehicle. Staff #1 had a learner's permit and was the only staff on the van during the accident. The Licensee/Qualified Professional was aware that staff #1 only had a learner's permit. The Licensee/Qualified Professional allowed staff #1 to drive the agency van to transport clients since the beginning of April 2018. This violation constitutes a Type B violation which is detrimental to health, safety or welfare of clients. If the violation is not corrected within 45 days, administrative penalty of \$200.00 per day will be imposed for each day the facility is out of compliance beyond the 45th day.	V 289			