STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL026-855	A. BUILDING: _____ B. WING _____	R 06/27/2018

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JOYFUL LIVING #1	1951 IRELAND DRIVE FAYETTEVILLE, NC 28304

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on June 27, 2018. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record review and interview the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings are: Review on 06/26/18 of facility records from September 2017 through June 2018 revealed: - No fire drill had been completed on the weekend shift (approximately 5pm Friday to 8:00am Monday) from October 2017 through December 2017.	V 114		

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V 114	Continued From page 1 - No disaster drill had been completed on the first quarter, January 2018 through March 2018 for first shift (approximately 7:30am Monday through Thursday 3:30pm). - No disaster drill had been completed on the third quarter, July 2017 through September 2017 for the weekend shift (approximately 5pm Friday to 8:00am Monday) . Interview on 06/26/18 client #4, #5 and #6 stated they had participated in fire and disaster drills at the facility. Interview on 06/26/18 the Licensee stated: - The Monday through Friday shift is typically 7:30am to 3:30pm (First) and 3:30pm to 7:30am (second). - A weekend staff worked at the facility from Friday at 5:00pm until Monday at 8:00am. - She understood fire and disaster drills should be completed every quarter and for each shift, for the two shifts on the weekdays and the one weekend shift. [This deficiency is a re-cited deficiency and must be corrected within 30 days.]	V 114		
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	V 289		

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V 289	Continued From page 2	V 289		

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 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);

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V 289	Continued From page 3 (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 alternative family living or assisted family living (AFL). This Rule is not met as evidenced by: Based on record review and interview, the facility failed to operate within the scope of licensure by serving one of three audited clients (#6) without a primary diagnosis of Developmental Disability. The findings are: Review on 06/26/18 of Division of Health Service Regulation (DHSR) records revealed the facility is licensed under 10A NCAC 27G .5600C, Supervised Living for Adults with Developmental Disabilities. Review on 06/26/18 of client #6's record revealed: - 21 year old female. - Admission date of 02/14/18. - Diagnoses of Bipolar Disorder, Posttraumatic Stress Disorder (PTSD) and Adjustment Disorder with Depressed Mood. -Client #6's record did not reflect a diagnosis of developmental disability. Interview on 06/26/18 client #6 stated she had resided at the facility for several months. Interview on 06/26/18 the Licensee stated:	V 289		

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V 289	Continued From page 4 - She did not have a current waiver for client #6 to remain at the facility. - She was in the process of having psychological testing completed for client #6. - She would speak to the Local Management Entity/Managed Care Organization regarding a waiver for client #6.	V 289		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or	V 291		

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V 291	Continued From page 5 safety issues become a primary concern. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to maintain coordination between the facility operator and the professionals who are responsible for the client's treatment, affecting one of three audited clients (#6). The findings are: Review on 06/26/18 of client #6's record revealed: - 21 year old female. - Admission date of 02/14/18. - Diagnoses of Bipolar Disorder, Posttraumatic Stress Disorder (PTSD) and Adjustment Disorder with Depressed Mood. - Person Centered Plan (PCP) dated 03/01/18 revealed, "outpatient treatment, she needs motivotional therapy, CBT (cognitive behavioral therapy)..." Review on 06/26/18 of client #6's medical records provided by the Licensee revealed: - No documentation of client #6 had attended outpatient therapy. Interview on 06/26/18 the group home manager stated client #6 was not currently seeing a therapist. Interview on 06/26/18 client #6 stated staff did not take her to see a therapist. Interview on 06/26/18 the Licensee stated: - She was aware of the need for client #6 as indicated in her PCP to attend outpatient therapy and would arrange the appointment for her.	V 291		

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V 291	Continued From page 6 [This deficiency is a re-cited deficiency and must be corrected within 30 days.]	V 291		