

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL084-085	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/08/2018
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NAME OF PROVIDER OR SUPPLIER LORETTA'S PLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 109 PENNY STREET ALBEMARLE, NC 28001
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on 8/8/18. The complaint was substantiated (Intake #NC 140184). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment Facility.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to ensure fire and disaster drills were held at least quarterly and were repeated for each shift. The findings are:</p> <p>Interviews on 8/3/18 and 8/5/18 with staff #1, #2 and #3 and the Nurse revealed they worked 12 hour shifts(day/night).</p> <p>Review on 8/3/18 of the facility's fire and disaster</p>	V 114		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 114	<p>Continued From page 1</p> <p>documentation from 1/1/18-8/3/18 revealed the following:</p> <ul style="list-style-type: none"> -no day shift fire drills from 1/1/18-3/31/18; -no night shift disaster drills from 1/1/18-3/31/18; -no day shift disaster drills from 4/1/18-6/30/18; -no night shift fire drills from 4/1/18-6/30/18. <p>Interview on 8/3/18 with Human Resources Administrator revealed:</p> <ul style="list-style-type: none"> -modified the form to reflect times drills were completed; -thought drills were being conducted as required; -not aware of the missing drills per shift; -will make sure drills conducted per shift per quarter as required. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114		
V 317	<p>27G .1904 Psych. Res. Tx. Fac. - Transfer or Discharge</p> <p>10A NCAC 27G .1904 TRANSFER OR DISCHARGE</p> <p>(a) The purpose of this Rule is to address the transfer or discharge of a child or adolescent from the facility.</p> <p>(b) A child or adolescent shall not be discharged or transferred from a facility, except in case of emergency, without the advance written notification of the treatment team, including the legally responsible person. For purposes of this Rule, treatment team means the same as the existing child and family team or other involved persons as set forth in Paragraph (c) of this Rule.</p> <p>(c) The PRTF shall meet with existing child and family teams and other involved persons including the parent(s) or legal guardian, area authority or county program representative(s) and</p>	V 317		

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V 317	<p>Continued From page 2</p> <p>other representatives involved in the care and treatment of the child or adolescent including local Department of Social Services, Local Education Agency and criminal justice agency, to make service planning decisions prior to the transfer or discharge of the child or adolescent from the facility.</p> <p>(d) In case of an emergency, the facility shall notify the treatment team including the legally responsible person of the transfer or discharge the child or adolescent as soon as the emergency situation is stabilized.</p> <p>(e) In case of an emergency, notification may be by telephone. A service planning meeting as set forth in Paragraph (c) of this Rule shall be held within five business days of an emergency transfer or discharge.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to ensure service planning decisions were made prior to discharge of the adolescent from the facility with all members of the treatment team affecting 1 of 2 audited former clients (FC#5). The findings are:</p> <p>Review on 8/3/18 of FC#5's record revealed: -admission date of 11/24/17 with discharge date of 5/1/18; -diagnoses of Attention Deficit Hyperactivity Disorder, Disruptive Mood Dysregulation Disorder and Other Specified Persistent Mood Disorder; -a typed summary from a Child and Family Team Meeting (CFT Mtg) dated 4/17/18 documented</p>	V 317		

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V 317	<p>Continued From page 3</p> <p>the therapist/Clinical Director (CD) was working on reunification with FC#5 with his aunt with intensive in home (IIH) services in place with after care provider #1, the birth mother was not able to care for FC#5 at this time, FC#5 does not get along with his grandfather who birth mother resided with and FC#5 would be discharged on 4/27/18 to his aunt's home;</p> <p>-form titled discharge summary documented a discharge date of 5/1/18 with plans to step down to his aunt's home with services in place with aftercare provider #1, information was provided to the CD aftercare provider #1 would not be able to provide services, CD informed the team and family aftercare provider #2 would be providing services for FC#5 while in his aunt's home.</p> <p>Review on 8/7/18 of documentation regarding discharge planning for FC#5 completed by the CD revealed:</p> <p>-3/7/18 discussed with birth mother services for FC#5 upon discharge, FC#5 reported issues with grandfather's alcohol usage and "gets mean," birth mother resided with grandfather, birth mother stated did not want to work with aftercare provider #1, wanted to work with aftercare provider #2, did not want recommended after care provider #3, CD emailed aftercare provider #2 for a referral for FC#5, called aftercare provider #2 and discussed referral process;</p> <p>-3/8/18 through 4/12/18 CD determined return to home of birth mother would not be conducive to FC#5, discussed with birth mother therapeutic foster care(TFC) or intensive alternative family treatment (IAFT)or moving in the aunt with IIH as an alternative;</p> <p>-4/12/18 during family session with birth mother and FC#5, FC#5 had said aunt no longer an option, birth mother told FC#5 he would be coming home to her, CD expressed concerns to</p>	V 317		

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V 317	<p>Continued From page 4</p> <p>birth mother about this plan, again recommended TFC or IAFT, birth mother disagreed with both recommendations, CD still pursued IAFT with aftercare provider #1;</p> <p>-4/13/18 emailed Comprehensive Clinical Assessment (CCA) update to aftercare provider #1;</p> <p>-4/18/18 spoke with aftercare provider #1 about providing services in aunt's home, talked with aunt, asked aftercare provider #1 to contact aunt, asked birth mother to contact aftercare provider #1 to do a release of information;</p> <p>-4/23/18 CD spoke with birth mother and asked to put off discharge date of 4/27/18 for a later date in May 2018, birth mother continued to press for discharge for fear of social services involvement, CD contacted aftercare provider #1 who reported they could not provide services, spoke to birth mother about referral to aftercare provider #2;</p> <p>-5/1/18 CD spoke with aftercare provider #1 who reported they were not able to provide services but had reached out to aftercare provider #3 who could provide services for FC#5, provide outpatient services until IIH could begin in 2-3 weeks, CD contacted birth mother and reported to her services could begin with aftercare provider #3 but birth mother turned aftercare provider #3 down and reported she wanted to wait on aftercare provider #2;</p> <p>-5/8/18 referral made to aftercare provider #2, reported to birth mother referral emailed and faxed, CD notified aftercare provider #2 had a waiting list for services, was not aware of waiting list.</p> <p>Interview on 8/7/18 with the Care Coordinator (CC) for FC#5 revealed: -FC#5 was discharged without securing aftercare services; -participated in the C FT Mtg on 4/12/18 with</p>	V 317		

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V 317	<p>Continued From page 5</p> <p>discharge date set for 4/27/18; -facility sent in a request to extend services through 5/8/18 for FC#5; -saw the request which was approved and assumed FC#5 would be at the facility through 5/8/18; -CC had asked the Program Director (PD) to arrange a conference call with her, the facility and the aftercare provider secured for FC#5 prior to discharge date to ensure all things in place, PD said who would arrange it; -waited on conference call and did not hear anything; -sent email to PD on 5/4/18 asking update on aftercare services and received a response from PD saying the CD was working on it, the PD did not let her know FC#5 had already been discharged, was under the impression FC#5 was still at the facility; -received a call on 5/7/18 from FC#5's prior probation officer FC#5 was back home with his birth mother, was never notified by the facility FC#5 was discharged on 5/1/18; -sent email to PD asking why FC#5 was discharged with no aftercare services in place.</p> <p>Interview on 8/7/18 with the PD revealed: -does not remember conversation with FC#5's CC about the agreement to arrange a conference call prior to FC#5's discharge; -a lot was going on, may have slipped his mind.</p> <p>Interview on 8/8/18 with the CD revealed: -case managers handle all after care planning and service coordination; -had 2 case managers and had both resign, one in 2/2018 and one in 3/2018; -PD was trying to do all case management services/coordination of care along with his other job duties;</p>	V 317		

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V 317	Continued From page 6 -CD volunteered to assist PD with aftercare/discharge planning; -CD does not usually do aftercare/discharge planning; -usually aftercare/discharge planning in place; -have hired 2 new case managers, have set up a calendar for all discharges and planning dates, will ensure all discharge planning and coordination of care for aftercare is completed on all cases.	V 317		