

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL007-055	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 10/15/2018
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NAME OF PROVIDER OR SUPPLIER WOODED ACRES #3	STREET ADDRESS, CITY, STATE, ZIP CODE 3680 CHERRY ROAD WASHINGTON, NC 27889
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(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	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on October 15, 2018. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A, Supervised Living for Adults with Mental Illness.</p>	V 000		
V 109	<p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(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.</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.</p>	V 109		

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

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V 109	<p>Continued From page 1</p> <p>(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 review and interviews the Qualified Professional (QP) failed to demonstrate knowledge, skills and abilities required by the population served. The findings are:</p> <p>Review on 10/12/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> - 28 year old male admitted to the facility 1/6/14. - Diagnoses included Schizoaffective Disorder, depressive, and obesity. - Person Centered Plan dated 6/21/17 included goals to manage cigarette consumption, money management, compliance with the facility sanitation policy, compliance with mental health medications, and "compliance with all medication regiments." <p>During interview on 10/12/18 client #3 stated:</p> <ul style="list-style-type: none"> - He was trying to lose weight and smoke less. - He wanted to regain his guardianship, get his GED (General Education Diploma), and to get a job. - He did not know any of the goals in his person centered plan, nor did he know who wrote them. - He had met the QP once last year. <p>Review on 10/9/18 of the QP's personnel record revealed:</p> <ul style="list-style-type: none"> - Hire date of 2/19/16. - Education records included Bachelor of Science 	V 109		

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V 109	<p>Continued From page 2</p> <p>in Rehabilitation Services, 2008; Master's Degree in Rehabilitation Counseling, 2012; Master's Degree in Substance Abuse Clinical Counseling, 2012; and Master's Degree in Criminal Justice, 2014.</p> <p>Professional credentials included Licensed Clinical Addictions Specialist, expired 7/01/15; Licensed Professional Counselor Associate, expired 6/30/17; and Master Addiction Counselor, effective 1/31/16.</p> <p>- No documented training with regard to working with adults diagnosed with developmental disabilities or mental illness, or Person Centered Planning.</p> <p>- "Qualified Professional Job Description" signed and dated by the QP 2/19/16 included " . . . 2. Is responsible for the overall personal care plans throughout the facility. . . 11. Assures the continuous maintenance of all standards and regulations and the implementation of the policies and procedures . . . 14. Monitors medication in homes, checks medication, doctor's orders and fl-2. Check medication weekly . . . 16. Completes client's books upon admission. Making sure all documentation that is required is in book. 17. Monitor doctor's appointments. Follow up with staff after clients attend appointments for medication change or referrals . . . "</p> <p>During interview on 10/1/18 the QP stated:</p> <p>- She worked full time as an "independent practitioner" and was a Licensed Clinical Addictions Specialist and a Licensed Professional Counselor.</p> <p>- She had training in CPR, NCI, Person Centered Planning, and various mental health diagnoses.</p> <p>- Some of her responsibilities included treatment team meetings, "staffing," and clinical paperwork, including completion of the Person Centered Plans.</p>	V 109		

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V 109	<p>Continued From page 3</p> <ul style="list-style-type: none"> - Person Centered Plans were written with goals and strategies developed based on "what the individual client said they wanted to do, goals they wanted to achieve," and some of what was in the client assessments. - She and the administrator "talked to" direct care staff regarding the content of the Person Centered Plans and how to train goals and implement strategies. - She had no responsibility for client medications or Medication Administration Records. <p>During interview on 10/15/18 the Administrator stated she was responsible for supervision of direct care staff and she did not have a supervisor.</p>	V 109		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <ul style="list-style-type: none"> (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. <p>This Rule is not met as evidenced by: Based on record reviews and interviews the</p>	V 114		

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V 114	<p>Continued From page 4</p> <p>facility failed to ensure fire and disaster drills were held quarterly and repeated on each shift. The findings are:</p> <p>During interview on 10/12/18 the facility Administrator stated the group home operated two shifts, Monday 9:00 am - Thursday 5:00 pm, and Thursday 5:00 pm - Monday 9:0 am.</p> <p>Review on 10/12/18 of the facility's fire and disaster drill documentation revealed:</p> <ul style="list-style-type: none"> - No fire drill documented for the Monday - Thursday shift in the 3rd quarter (July - September) 2018. - No fire or disaster drill documented for the Thursday - Monday shift in the 3rd quarter (July - September) 2018. - No fire or disaster drill document for either shift in the 2nd quarter (April - June) 2018; a tornado drill was documented Thursday, 6/14/18, but no time was documented, therefore the shift during which the drill was held could not be determined. - No fire or disaster drill documented for the Monday - Thursday shift in the 1st quarter (January - March) 2018. - No fire or disaster drill documented the Thursday - Monday shift for the 3rd quarter (July - September) 2017. - No disaster drill documented for the Monday - Thursday shift for the 4th quarter (October - December) 2017. - No fire drill documented for the Thursday - Monday shift for the 4th quarter (October - December) 2017. <p>During interview on 10/12/18 client #2 stated they did fire and tornado drills and had a fire drill recently. They would evacuate the facility during fire drills, going across the driveway away from the facility until they were told they could return.</p>	V 114		

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V 114	<p>Continued From page 5</p> <p>During interview on 10/12/18 client #3 stated fire and tornado drills were held in the facility monthly.</p> <p>During interview on 10/12/18 client #4 stated fire and tornado drills were held but he wasn't sure how often.</p> <p>During interview on 10/15/18 the Administrator stated she understood the requirement to hold fire and disaster drills quarterly and on each shift.</p>	V 114		