

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-582	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 10/19/2018
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NAME OF PROVIDER OR SUPPLIER Varsity Crest #3	STREET ADDRESS, CITY, STATE, ZIP CODE 1503 CREST ROAD APT. 103 RALEIGH, NC 27606
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V 000	INITIAL COMMENTS An annual and follow up survey was completed on October 19, 2018. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and	V 108		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 108	<p>Continued From page 1</p> <p>clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the governing body failed to provide training to meet the mh/dd/sa (Mental Health/Developmental Disabilities/Substance Abuse) needs of the clients as specified in the treatment/habilitation plan for 7 of 7 staff (#1 - #7). The findings are:</p> <p>Review on 10/16/18, of client #1's record revealed:</p> <ul style="list-style-type: none"> - admission date of 8/29/18 - diagnoses of Schizoaffective Disorder, Cannabis Use Disorder, Alcohol Use Disorder, Hypothyroidism, Obesity and Metabolic Syndrome - a treatment plan dated 1/23/18 which included "...continue in relapse prevention to abstain from alcohol and cannabis..." <p>Review on 10/16/18, of client #2's record revealed:</p> <ul style="list-style-type: none"> - admission date of 5/23/16 - diagnoses of Schizophrenia, Seizure Disorder, Obesity and Tardive Dyskinesia - a treatment plan dated 10/24/17 which included "...a history substance use...develop a routine of productive activities in his new community and avoid negative influences" <p>Review on 10/18/18 of 7 of 7 paraprofessional staff (#1 - #7)'s personnel records revealed no documentation of training in either Substance Abuse or Seizures.</p> <p>During an interview on 10/18/18, the Director of</p>	V 108		

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V 108	Continued From page 2 Operations reported: - he had a training in Seizure Management scheduled already - they had not done any training in substance abuse but would arrange one as soon as possible - there had not been any incidences of any clients having seizures or using alcohol or illegal drugs in the past year - many clients were connected to ACTTs (Assertive Community Treatment Teams) and they had Substance Abuse Specialists	V 108		
V 111	27G .0205 (A-B) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to: (1) the client's presenting problem; (2) the client's needs and strengths; (3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission; (4) a pertinent social, family, and medical history; and (5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs. (b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter referred to as the "plan," strategies to address the	V 111		

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V 111	<p>Continued From page 3</p> <p>client's presenting problem shall be documented.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure an assessment was completed prior to the delivery of services for 1 of 2 clients (#2). The findings are:</p> <p>Review on 10/16/18, of client #2's record revealed:</p> <ul style="list-style-type: none"> - admission date of 5/23/16 - diagnoses of Schizophrenia, Seizure Disorder, Obesity and Tardive Dyskinesia - a referral form from referring agency - an assessment dated 1/5/18 from a referring agency - no assessment by the facility completed prior to the delivery of services <p>During an interview on 10/16/18, the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> - the admissions process included getting the following from the referring agency <ul style="list-style-type: none"> - a completed referral form - a clinical assessment - a current treatment plan - current medication orders - the Director of Operations (DOO) and/or the QP would interview the client and any case manager and family involved with the client - the DOO and the Licensee would make the final decision on admission 	V 111		

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V 111	Continued From page 4 - she did not think there was documentation in an assessment form or rational for admission documented During an interview on 10/18/18, the DOO reported: - verification of the admissions process listed above - they did not do another written assessment because they always got an assessment from the referring agency	V 111		
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 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;	V 289		

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V 289	<p>Continued From page 5</p> <p>(3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses;</p> <p>(4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses;</p> <p>(5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or</p> <p>(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 alternative family living or assisted family living (AFL).</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 24 hour services were provided</p>	V 289		

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V 289	<p>Continued From page 6</p> <p>as their license are indicated. The findings are:</p> <p>Review on 10/16/18 of the facility's current license revealed:</p> <ul style="list-style-type: none"> - a license for 10A NCAC 27G .5600A Supervised Living for Mentally Ill Adults - a Waiver approval ending 12/31/17 for "Rule 10A NCAC 27G.5601 (a) Staff-client ratios above the minimum numbers and Rule 10A NCAC 27G .5602 Scope and "...In accordance with 10A NCAC 27G.0813, the waiver cannot exceed the expiration date of the license, which is December 13, 2017 and, therefore, shall be subject to renewal consideration upon the request of the licensee." - no documentation of a request or approval of a waiver for 2018 <p>Observation on 10/16/18 at 10:00 am revealed the apartment was independent living with staff located up stairs in a separate apartment. The staff also supervised two other apartments (also licensed as for 10A NCAC 27G .5600A Supervised Living for Mentally Ill Adults.</p> <p>During an interview on 10/17/18, staff #2 reported:</p> <ul style="list-style-type: none"> - there are two staff on duty who monitor the three independent apartments - they do rounds every hour or so to check on the clients - staff are not assigned to an individual apartment <p>During an interview on 10/16/18, the Qualified Professional was not sure if they waiver request had been submitted.</p> <p>During an interview on 10/18/18, the Director of Operations reported he thought the request had</p>	V 289		

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V 289	Continued From page 7 been sent it but they had not received an approval yet as far as he knew.	V 289		