STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL092-580	A. BUILDING: ______ B. WING ______	**10/19/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VARSITY CREST #1	**1503 CREST ROAD, APT #101 RALEIGH, NC 27606**

(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	V 000		

An annual 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 111	27G .0205 (A-B) Assessment/Treatment/Habilitation Plan	V 111		

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 client's presenting problem shall be documented.

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V 111	Continued From page 1	V 111		

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 2 of 2 clients (#1 and #2). The findings are:

Review on 10/16/18 of client #1's record revealed:
- admission date 10/31/17
- diagnoses of Schizophrenia, Gastro Esophageal Reflux Disease, Hypothyroidism, Hyperlipidemia, History of Small Bowel Obstruction and Status/Post Appendectomy
- a referral form from referring agency
- no assessment by the facility completed prior to the delivery of services

Review on 10/16/18 of client #2's record revealed:
- admission date 11/2/17
- diagnoses of Schizophrenia, and Generalized Anxiety Disorder
- a undated referral form listing only client #2's name, address and identifying information
- an assessment dated 8/8/16 from a referring agency
- no assessment by the facility completed prior to the delivery of services

During an interview on 10/16/18, the Qualified Professional (QP) reported:
- the admissions process included getting the following from the referring agency
  - a completed referral form
  - a clinical assessment

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V 111	Continued From page 2 - 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 - 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 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;	V 112		

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V 112	Continued From page 3 (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure the treatment/rehabilitative plan was updated at least annually for 1 of 2 clients (#2). The findings are: Review on 10/16/18 of client #2's record revealed: - admission date 11/2/17 - diagnoses of Schizophrenia, and Generalized Anxiety Disorder - the last treatment plan in the record (completed by another agency) was dated 8/23/17 During an interview on 10/18/18, the Qualified Professional reported she thought she had done an update to this plan but acknowledged it was not in his record	V 112		
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	V 289		

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V 289	Continued From page 4	V 289		

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;
(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

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V 289	Continued From page 5 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). This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 24 hour services were provided as their license are indicated. The findings are: Review on 10/16/18 of the facility's current license revealed: - a license for10A 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	V 289		

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V 289	Continued From page 6	V 289		

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 for10A NCAC 27G .5600A Supervised Living for Mentally Ill Adults.

During an interview on 10/17/18, staff #2 reported:
- 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

During an interview on 10/16/18, the Qualified Professional was not sure if they waiver request had been submitted.

During an interview on 10/18/18, the Director of Operations reported he thought the request had been sent it but they had not received an approval yet as far as he knew.