

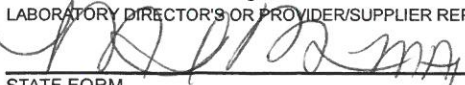
Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601078</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>11/07/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE NORLAND HOUSE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1019 NORLAND ROAD CHARLOTTE, NC 28212</b>
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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	<b>INITIAL COMMENTS</b>  A complaint survey was completed 11-7-18. The complaint was substantiated (NC00143215). Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G 1700 Residential Treatment Staff Secure for Children or Adolescents.	V 000	Residential staff will keep the group home keys on them at all time.  Staff who misplaces the keys will receive supervision and if needed, additional actions will be taken including termination.  Group Home Manager/ Clinical Director/QA Director	
V 110	<b>27G .0204 Training/Supervision Paraprofessionals</b>  <b>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</b> (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter. (c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served. (d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (e) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision	V 110	Implementation Date: 11/14/2018  Projected Completion Date: 11/14/2018 and ongoing	

DHSR - Mental Health  
DEC 04 2018  
Lic. & Cert. Section

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE <b>QA/QI Director</b>	(X6) DATE <b>11/28/18</b>
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V 110	<p>Continued From page 1</p> <p>plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, one of three staff (staff #1) failed to demonstrate competency in analytical and decision making skills. The findings are:</p> <p>Review on 10-31-18 of Incident report dated 10-4-18 revealed: -At 5:09 am...consumer advised staff he did not want to go to school...client went out the front door and was not seen...Staff left site to transport another consumer to school bus...upon returning to facility, staff noticed van was missing. Upon search, staff notice site keys missing and TV was on cartoons. Police notified. -The keys and vehicle were located. The investigation is still underway. The keys were left in the desk drawer.</p> <p>Review on 10-31-18 of staff #1's personnel record revealed: -Hire date 6-20-18 -Job description signed 6-20-18; "Keep all group home keys on you at all times."</p> <p>Interview on 10-31-18 with the facility manager revealed: -They are unsure if the client that left the facility returned to take the van, or if it was someone else. -He stated that the facility would have been locked when staff left to take another client to the bus stop.</p>	V 110		
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V 110	Continued From page 2  Interview on 11-5-18 with staff #1 revealed: -They could not be sure who took the van. -The van was recovered. -He had left the keys in an unlocked drawer at the facility when he left. -A second staff was at the facility but he was asleep when staff #1 left. -He should not have left the keys in an unlocked drawer.	V 110		
V 296	27G .1704 Residential Tx. Child/Adol - Min. Staffing  10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS (a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times. (b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows: (1) two direct care staff shall be present for one, two, three or four children or adolescents; (2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and (3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents. (c) The minimum number of direct care staff during child or adolescent sleep hours is as follows: (1) two direct care staff shall be present and one shall be awake for one through four children or adolescents; (2) two direct care staff shall be present and both shall be awake for five through eight	V 296	PCS always ensure that two direct care staffs are present when clients are present. Group Home Manager will instruct staff to stay awake when clients are getting ready to go to school. Sleep staff will be awake when needed.  Staff who fails to comply with job description/responsibilities will receive supervision and if needed, additional actions will be taken including termination.  Group Home Manager/ Clinical Director/QA Director  Implementation Date: 11/14/2018  Projected Completion Date: 11/14/2018 and ongoing	

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V 296	<p>Continued From page 3</p> <p>children or adolescents; and</p> <p>(3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.</p> <p>(d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan.</p> <p>(e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and needs as specified in the treatment plan.</p> <p>This Rule is not met as evidenced by: Based on interviews and observation, the facility failed to ensure that two staff were present when clients were present and awake. The findings are:</p> <p>Observation on 10-30-18 at approximately 4:00 pm revealed: -One staff (staff #2) and one client (#1) at the facility.</p> <p>Interview on 10-30-18 with client #1 revealed: -There were usually two staff there, it "was not normal" to have just one.</p> <p>Interview on 11-5-18 with staff #1 revealed: -He works third shift and there is another staff who sleeps.</p>	V 296		
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V 296	Continued From page 4  -The sleep staff do not wake up, they sleep until 7:00 am -He gets the clients up and off to school by himself.  Interview on 10-31-18 with the facility manager revealed: -Staff know there is always supposed to be two staff present whenever clients were in the facility.	V 296			