

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL029-032	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/09/2018
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NAME OF PROVIDER OR SUPPLIER DAYMARK RECOVERY SERVICES-DAVIDSON	STREET ADDRESS, CITY, STATE, ZIP CODE 1104-A SOUTH MAIN STREET LEXINGTON, NC 27292
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V 000	INITIAL COMMENTS A complaint survey was completed on 11/9/18. The complaint (intake # NC00143550) was unsubstantiated. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program and 27G .4500 Substance Abuse Comprehensive Outpatient Treatment	V 000	<p style="text-align: center; color: blue;">DHSR - Mental Health</p> <p style="text-align: center; color: red;">DEC 05 2018</p> <p style="text-align: center; color: blue;">Lic. & Cert. Section</p>	
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented. (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered. (d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (e) Formal refresher training must be completed	V 536		Daymark is revising it's training to meet the state requirements.

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Tom Hillman, Regional Director

11-26-2018

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V 536	<p>Continued From page 1</p> <p>by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <p>(1) knowledge and understanding of the people being served;</p> <p>(2) recognizing and interpreting human behavior;</p> <p>(3) recognizing the effect of internal and external stressors that may affect people with disabilities;</p> <p>(4) strategies for building positive relationships with persons with disabilities;</p> <p>(5) recognizing cultural, environmental and organizational factors that may affect people with disabilities;</p> <p>(6) recognizing the importance of and assisting in the person's involvement in making decisions about their life;</p> <p>(7) skills in assessing individual risk for escalating behavior;</p> <p>(8) communication strategies for defusing and de-escalating potentially dangerous behavior; and</p> <p>(9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p>	V 536		
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V 536	<p>Continued From page 2</p> <p>(C) instructor's name;</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p>	V 536		

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V 536	<p>Continued From page 3</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p> <p> </p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure formal refresher training in alternatives to restrictive interventions included measurable testing (written and by observation of behavior) affecting 3 of 3 staff (the Center Director (the CD) and Human Services Clinicians #1 and #2 (HSC #1 and #2)). The findings are:</p> <p> </p> <p>Review on 11/8/18 of Human Services Clinician #1's (HSC #1's) record revealed:</p>	V 536		

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V 536	<p>Continued From page 4</p> <ul style="list-style-type: none"> - A hire date of 7/19/17 - She had completed an annual training in alternatives to restrictive interventions on 12/29/17 - This training was conducted by reviewing a training module on the computer and then the completion of an online test - No documentation which reflected that HSC #1 had participated in training in alternatives to restrictive interventions aside from the online class <p>Interview on 11/8/18 with the HSC #1 revealed:</p> <ul style="list-style-type: none"> - She had completed training for alternatives to restrictive interventions online by reviewing a training module and taking a test online - She completed the online training in December of 2017 and later she participated in a class where she had to demonstrate how she would work to de-escalate a situation if a client were in crisis . <p>Review on 11/8/18 of Human Services Clinician #2's (HSC #2's) record revealed:</p> <ul style="list-style-type: none"> - A hire date of 8/21/17 - She had completed an annual training in alternatives to restrictive interventions on 8/21/18 - This training was conducted by reviewing a training module on the computer and the completion of an online test <p>Interview on 11/9/18 with HSC #2 revealed:</p> <ul style="list-style-type: none"> - She had completed an online training for alternatives to restrictive interventions only. <p>Interview on 11/9/18 with the CD revealed:</p> <ul style="list-style-type: none"> - Substance Abuse Intensive Outpatient Program (SAIOP) staff received training in alternatives to restrictive interventions via an online training module 	V 536		

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V 536	<p>Continued From page 5</p> <ul style="list-style-type: none"> - After reviewing the training module, staff were required to complete a multiple choice test which was also online - The total time for the online training was approximately one hour - There was no part of the training that required the SAIOP staff to actually demonstrate their level of competence/comfort in working to de-escalate a situation - Although the staff had not had to demonstrate their level of competence in working to de-escalate a crisis situation, as the supervisor of the SAIOP staff, she did have some indication as to how her staff would react/interact with a client during a moment of crisis. 	V 536		