

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL081-112	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/03/2019
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NAME OF PROVIDER OR SUPPLIER PEACE IN THE CITY HOUSE OF HOPE	STREET ADDRESS, CITY, STATE, ZIP CODE 265 OLD CASTLE LANE FOREST CITY, NC 28043
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 1/3/19. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p>	V 000		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(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.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(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.</p>	V 112		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to implement treatment a treatment goal for 1 of 3 audited clients (Client #2). The findings are:</p> <p>Review on 1/3/19 of Client #2's record revealed: Date of admission: 11/14/18 Diagnoses: Attention-Deficit Hyperactivity Disorder (ADHD), Bi-polar Disorder, Cannabis Use Disorder-moderate, and Conduct Disorder-childhood onset Age: 16 -10/30/18, a comprehensive clinical assessment recommended Client #2's medication management, case management, individual or family therapy and substance abuse therapy be continued; -11/14/18 treatment plan contained a goal that Client #2 be assessed for substance abuse therapy; -No written substance abuse evaluations or assessments found for Client #2 between 11/14/18 and 1/2/19.</p> <p>Interview on 1/2/19 with Client #2 revealed: -He was "court-ordered" into group home placement because he had gotten into "some trouble" which resulted in his involvement with Juvenile Justice Services (DJJ); -He denied any issues with illegal substances; -There was a therapist who came out to the facility and talked with him and his housemates; -He met with the LP last week at the group home; -He talked with the therapist because "he's the one that gets to decide if I go home;" -He had not talked with the therapist about having used illegal substances because "there</p>	V 112		

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V 112	Continued From page 2 was no reason to." Interview on 1/3/19 with Executive Director/ Qualified Professional (ED/QP) revealed: -The Licensed Professional (LP) was responsible for follow up with Client #2 to assess the substance use disorder. Interview on 1/3/19 with the LP revealed: -He was certified to do substance abuse assessments and counseling; -Client #2 had not had any indications or signs of substance abuse; -He had not dealt with Client #2 on this issue; -He would follow up with Client #2 to assess his substance use disorder diagnosis.	V 112		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. This Rule is not met as evidenced by:	V 114		

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V 114	<p>Continued From page 3</p> <p>Based on record review and interview, the facility failed to ensure fire and disaster drills were held at least quarterly and repeated for each shift. The findings are:</p> <p>Review on 1/3/19 of the fire drill log revealed: -No fire drills were conducted: -1st and 2nd shift weekend during 1st quarter, 2018 (January-March); -2nd shift weekend during 2nd quarter, 2018 (April-June); -1st and 2nd shift weekend during 3rd quarter, 2018 (July-September); -3rd shift weekday and 1st and 2nd shift weekend during 4th quarter, 2018 (October-December).</p> <p>Review on 1/3/19 of the disaster drill log revealed: -No disaster drills were conducted: -3rd shift weekday and 1st and 2nd shift weekend during 1st quarter, 2018 (January-March); -2nd shift weekend during 2nd quarter, 2018 (April-June); -3rd shift weekday and 1st shift weekend during 3rd quarter, 2018 (July-September); -3rd shift weekday and 1st and 2nd weekend shifts during 4th quarter, 2018 (October-December).</p> <p>Interviews on 1/2/19 with Clients #1, #2 and #3 revealed: -Clients #1 and #2 stated they practiced fire and disaster drills but uncertain how often the drills were conducted; -Client #3 stated he had not practiced a fire or disaster drill since he was admitted to the group home approximately 1 month ago.</p> <p>Interviews on 1/2/19 with the Group Home</p>	V 114		

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V 114	Continued From page 4 Manager/Associate Professional (GHM/AP) revealed: -A fire and a disaster drill was to be conducted by designated group home staff for every shift each month; -There were 3 shifts during the weekday but no clients and staff were at the facility on 1st shift from 8:00 am to 2:00 pm; -Weekday 2nd shift was from 2:00 pm to 11:00 pm and 3rd shift was from 11:00 pm to 8:00 am; -There were 2 weekend shifts that included 1st shift from 8:00 am to 8:00 pm and 2nd shift from 8:00 pm to 8:00 am.	V 114		
V 293	27G .1701 Residential Tx. Child/Adol - Scope 10A NCAC 27G .1701 SCOPE (a) A residential treatment staff secure facility for children or adolescents is one that is a free-standing residential facility that provides intensive, active therapeutic treatment and interventions within a system of care approach. It shall not be the primary residence of an individual who is not a client of the facility. (b) Staff secure means staff are required to be awake during client sleep hours and supervision shall be continuous as set forth in Rule .1704 of this Section. (c) The population served shall be children or adolescents who have a primary diagnosis of mental illness, emotional disturbance or substance-related disorders; and may also have co-occurring disorders including developmental disabilities. These children or adolescents shall not meet criteria for inpatient psychiatric services. (d) The children or adolescents served shall require the following: (1) removal from home to a community-based residential setting in order to	V 293		

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V 293	<p>Continued From page 5</p> <p>facilitate treatment; and (2) treatment in a staff secure setting. (e) Services shall be designed to: (1) include individualized supervision and structure of daily living; (2) minimize the occurrence of behaviors related to functional deficits; (3) ensure safety and deescalate out of control behaviors including frequent crisis management with or without physical restraint; (4) assist the child or adolescent in the acquisition of adaptive functioning in self-control, communication, social and recreational skills; and (5) support the child or adolescent in gaining the skills needed to step-down to a less intensive treatment setting. (f) The residential treatment staff secure facility shall coordinate with other individuals and agencies within the child or adolescent's system of care.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to coordinate with other individuals and agencies within the client's system of care. The findings are:</p> <p>Review on 1/3/19 of Client #1's record revealed: Admission date: 12/17/18 Diagnoses: Disruptive Mood Dysregulation, Attention-Deficit Hyperactivity Disorder (ADHD),</p>	V 293		

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V 293	<p>Continued From page 6</p> <p>and Oppositional Defiant Disorder (ODD); -12/17/18, an admission assessment contained: -statements Client #1 struggled with anger, anxiety, stress, separation anxiety, and impulse control; -information that Client #1 stole from a non-parent, had Juvenile Justice (DJJ) involvement and legal charges associated with theft of a credit card; -recent history of having received Intensive In-Home Services from a local human services agency that recommended Level III residential care; -Client #1 was prescribed Adderall XL 15 milligram (mg) in the morning and 10 mg at 12:00 noon since 2013; -12/18/18, Client #1's treatment plan was updated with strategies that included assessing Client #1's need for ongoing services and medication monitoring and management.</p> <p>Review on 1/3/19 of the facility's written policy dated 10/1/18 and undated written policy on medication requirements revealed: -Statements that the facility's policy was to no longer "accept verbal or phone informing related to client prescriptions, refills discontinuance or changes" and "prescription ...drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs."</p> <p>Interview on 1/2/19 with Client #1 revealed: -He lived locally with his parent prior to group home placement; -He did not want to talk about the reason he came into placement; -He attended a local school, was in a "regular classroom" and was performing "good" in his academics of math, reading and science; -He was supposed to take Adderall but had not</p>	V 293		

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V 293	<p>Continued From page 7</p> <p>taken this medicine since his admission to the group home last month;</p> <ul style="list-style-type: none"> -He was supposed to take this medication every day, once in the morning and at noon; -He did not know the last time he had taken his Adderall medication; -He stated that this medication was supposed to keep him focused in school; -His statement the Adderall did not help him and he was unable to tell a difference when he took the medication; -He was supposed to see a doctor through the group home about whether he needed the Adderall but had not seen the doctor yet; -He believed his primary care physician prescribed the Adderall to him when he lived at home. <p>Interview on 1/2/19 with the Executive Director/Qualified Professional (ED/QP) and Medication Lead Staff (Staff #4) revealed:</p> <ul style="list-style-type: none"> -Client #1's mother admitted Client #1 to the group home on recommendation of a staff from the local human services agency that provided Intensive In-Home Services; -During admission, Client #1's mother said Client #1 was out of his medication and he stopped taking his medication himself while living at home; -Client #1's mother did not bring Client #1's medication bottle at admission or a signed medication prescription; -They did not ask Client #1's mother how long Client #1 was off his medication or the last time he took his medication; -They did not contact Client #1's primary care physician to determine approximate date of Client #1's last prescription for the Adderall and possible effects or symptoms of Client #1 being off his medication; -The local human services agency that provided 	V 293		

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V 293	<p>Continued From page 8</p> <p>Client #1 with Intensive In-Home Services was not cooperative in providing signed medication prescriptions and additional paperwork.</p> <p>Interview on 1/3/19 with Client #1's mother revealed:</p> <ul style="list-style-type: none"> -Client #1 took Adderall XL 15 mg in the morning and 10 mg between 12:00-1:00 pm each day; -This medication was prescribed by Client #1's local primary care physician; -The last time Client #1 had his Adderall was the morning of 12/17/18; -She had not brought Client #1's Adderall medication with him to his group home admission because staff from the local human services agency said the facility would not accept Client #1's medication bottle at his group home admission; -She understood she had to have a signed medication prescription instead; -She did not know what to do because the medication had already been filled for 12/2018; -There was a 12/27/18 refill at the local pharmacy for the medication and understood group home staff picked up the Adderall from the pharmacy on the previous day; -Staff #4 told Client #1's mother he had talked with her on the previous day and explained that Client #1 would need to be assessed before taking the Adderall and he had a doctor's appointment on this date, 1/3/19 at 1:30 pm; -Client #1's mother asked if she had done anything wrong and she was assured she had not; -Client #1 had took his own medication at home with reminders from his mother; -Client #1 took Lexapro and Depakote that was prescribed to him in 10/2018 from a behavioral inpatient program and he stopped taking the medication on his own when he returned home. 	V 293		

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V 294	<p>27G .1702 Residential Tx. Child/Adol -Req. for Q P</p> <p>10A NCAC 27G .1702 REQUIREMENTS OF QUALIFIED PROFESSIONALS</p> <p>(a) Each facility shall utilize at least one direct care staff who meets the requirements of a qualified professional as set forth in 10A NCAC 27G .0104(18). In addition, this qualified professional shall have two years of direct client care experience.</p> <p>(b) For each facility of five or less beds:</p> <p>(1) the qualified professional specified in Paragraph (a) of this Rule shall perform clinical and administrative responsibilities a minimum of 10 hours each week; and</p> <p>(2) 70% of the time shall occur when children or adolescents are awake and present in the facility.</p> <p>(c) For each facility of six or more beds:</p> <p>(1) the qualified professional specified in Paragraph (a) of this Rule shall perform clinical and administrative responsibilities a minimum of 32 hours each week; and</p> <p>(2) 70% of the time shall occur when children or adolescents are awake and present in the facility.</p> <p>(d) The governing body responsible for each facility shall develop and implement written policies that specify the clinical and administrative responsibilities of its qualified professional(s). At a minimum these policies shall include:</p> <p>(1) supervision of its associate professional(s) as set forth in Rule .1703 of this Section;</p> <p>(2) oversight of emergencies;</p> <p>(3) provision of direct psychoeducational services to children or adolescents;</p> <p>(4) participation in treatment planning meetings;</p>	V 294		

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V 294	<p>Continued From page 10</p> <p>(5) coordination of each child or adolescent's treatment plan; and (6) provision of basic case management functions.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that 70% of the clinical and administrative responsibilities performed by the Qualified Professional (QP) occurred in the facility when the clients were awake and present in the home. The findings are:</p> <p>Review on 1/3/19 of the Executive Director/Qualified Professional (ED/QP)'s record revealed: -Date of hire: 1/1/15 -Met requirements of a QP</p> <p>Interviews on 1/2/19 with Clients #1, #2 and #3 revealed: -The ED/QP was at the group home 1-2 times a week and checked on them; -Client #3 stated that the ED/QP talked with him when she came to check on him and helped him to calm down when he was upset.</p> <p>Interview on 1/2/19 with Staff #1 revealed: -The ED/QP was the Qualified Professional for the group home.</p> <p>Interview on 1/2/19 and 1/3/19 with the ED/QP revealed: -She had QP hours at the facility;</p>	V 294		

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V 294	<p>Continued From page 11</p> <p>-Her QP hours were on a "junk drive;" -She did not provide QP hours for review.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 294		