


Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601346	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/29/2019
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NAME OF PROVIDER OR SUPPLIER HARRISON HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 12551 HASHANLI PLACE MATTHEWS, NC 28105	
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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	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 1-29-19. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G 5600F Supervised Living for All Disability Groups in a Private Residence.</p>	V 000	<p>All Qualified Professionals hired by Care Well of Charlotte follow the state standards for hiring.</p>	
V 109	<p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision</p>	V 109	<p>Upon hiring, the Executive Director of Care Well meets with the QP and goes over the expectations for the 1st 90 days of work. These expectations include the following: technical knowledge, cultural awareness, analytical skills, decision-making, interpersonal skills, communication skills, clinical skills, etc..</p> <p>The QP in question was given his expectations from Care Well upon hiring and was supervised weekly on the competencies of a QP. After this AFL review, it is apparent that he will need more training/monitoring from his supervisor.</p> <p>The Executive Director has met with the QP and will continue to do so for the next 30 days individually to ensure he meets the standards as a QP. If the QP is unable to meet these standards, Care Well will take additional action up to and may include termination of employment.</p>	3/1/19

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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V 109	<p>Continued From page 1</p> <p>plan upon hiring each associate professional. (g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the Qualified Professional (QP) failed to display the knowledge, skills, and abilities required by the population served. The findings are:</p> <p>Review on 1/28/19 of the QP's record revealed: -Hired in 11/2018; -Job description duties included but not limited to assuring the clients care and needs were met by supporting the Alternative Living Family (AFL) Provider;</p> <p>Interview on 1/28/19 with the QP revealed: - He started his job responsibilities as a QP in 11/2018; - He was responsible for ensuring clients medications were ordered, goals were run appropriately, day supports were in place and the clients were taken care of and safe in the AFL Home; - There were two clients residing in the AFL home; - He had had two supervisions with the AFL Provider; - He had read both clients treatment plans however was unable to recall any of their goals; - He had not met face to face with one of the two clients and was unaware of this clients' Day Support schedule;</p>	V 109		

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V 109	Continued From page 2 - He was unaware of who both clients' legal guardians were. Interview on 1/29/19 with the AFL Provider revealed: - The QP had visited the home to twice to provide supervision; - The QP checked the hot water, assured medications were double locked and asked if any assistance was needed; - Felt the QP was an improvement from the previous QP she worked with. Interview on 1/28/19 with the Executive Director revealed: - She supervised the QP monthly and had an open door policy to meet as often as needed to ask any questions or have discussions; - QP had never mentioned his need for assistance therefore she was unaware the QP had no knowledge about some client specific information; - Her expectations of the QP's are to become familiar with the clients basic information necessary in order to provide assistance to the AFL Providers. Interview on 1/28/19 with the CEO revealed: - The QP meeting was held every Friday to discuss caseloads, ask questions and receive support as needed; - The QP needed more training.	V 109			