

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-776	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/25/2019
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NAME OF PROVIDER OR SUPPLIER SIGMA HEALTH SERVICES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 2321 CRABTREE BOULEVARD, SUITE 250 RALEIGH, NC 27604
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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 and complaint survey was completed on 2/25/19. The complaint was substantiated Intake NC00145335. A deficiency was cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program and 10A NCAC 27G .4500 Substance Abuse Comprehensive Outpatient Treatment</p>	V 000		
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> <p>(1) technical knowledge;</p> <p>(2) cultural awareness;</p> <p>(3) analytical skills;</p> <p>(4) decision-making;</p> <p>(5) interpersonal skills;</p> <p>(6) communication skills; and</p> <p>(7) clinical skills.</p> <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</p>	V 109		

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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>develop and implement policies and procedures for the initiation of an individualized supervision 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 observation, record review and interview the facility failed to ensure 2 of 3 audited staff (intake specialist & SAIOP facilitator) demonstrated the knowledge and skills required by the population served. The findings are:</p> <p>Observation on 2/15/19 revealed the following:</p> <ul style="list-style-type: none"> - 11:10am revealed an African American lady come in the office area with a cup of urine...there was no staff that accompany her...surveyor was not able to visually see where she took the urine - 11:47am - the bathroom was located in a hallway outside of where the SAIOP services were provided - at 12:27pm - there was a white plastic storage box that contained urine samples under a table in the intake specialist office...8 total urine samples were in the box...3 of the urine samples were without names - the Executive Director witnessed the urine samples without names on them <p>During interview on 2/15/19 client #1 reported:</p> <ul style="list-style-type: none"> - urine samples are taken every Monday - clients are responsible for placing their names on the urine sample...she forgot to put her name on the urine sample this morning 	V 109		

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V 109	<p>Continued From page 2</p> <ul style="list-style-type: none"> - urine samples are not observed by staff - after she completes the urine sample it was placed in a box in the intake specialist office <p>During interview on 2/15/19 client #2 reported:</p> <ul style="list-style-type: none"> - urine samples were not observed by staff - clients are responsible for placing their names on the urine samples <p>During interview on 2/15/19 the Intake Specialist reported:</p> <ul style="list-style-type: none"> - the SAIOP facilitator was responsible for placing the clients name on the urine sample cup & accompanying them to the bathroom - most of the time the clients are self sufficient and go to the bathroom alone for the urine samples - the urine was placed in the white plastic storage box in her office - she would throw the urine samples away without the names on them <p>During interview on 2/15/19 the SAIOP facilitator reported:</p> <ul style="list-style-type: none"> - clients write their initials on the urine sample cup - clients are supposed to go to the bathroom with staff to give urine sample - she thought the intake specialist ensured the clients' initials were on the urine samples since the urine samples were kept in her office <p>During interview on 2/25/19 the Executive Director reported:</p> <ul style="list-style-type: none"> - staff are supposed to accompany the clients to the bathroom for urine samples - he normally accompanied the males to the bathroom - initially the intake specialist was responsible for ensuring the initials were on the urine samples 	V 109		

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V 109	Continued From page 3 and then it changed to the SAIOP facilitator - it was some discussion about having a lab representative onsite to collect the urine samples - in the future it will be one designated person responsible for the collection of urine samples	V 109		