

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL034-334</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/23/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>NOA HUMAN SERVICES #3</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1847 WAYCROSS DRIVE WINSTON SALEM, NC 27106</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on January 23, 2019. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 5600A Supervised Living Group Home for Adults with Mental Illnesses.</p>	V 000		
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p><u>This Rule is not met as evidenced by:</u> Based on record reviews and interviews, the facility failed to ensure fire and disaster drills were conducted at least once per shift per quarter. The findings are: Review on 1/22/19 of the facility's fire and disaster drills, from January 2018 to January 2019, revealed: -No fire or disaster drills were conducted on third shift</p>	V 114	<p><b>DHSR - Mental Health</b></p> <p><b>FEB 22 2019</b></p> <p><b>Lic. &amp; Cert. Section</b></p> <p>The QP will ensure FIRE &amp; DISASTER DRILLS ARE DONE/ CARRIED OUT ON ALL SHIFTS -</p>	<p>45 days</p>

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

TITLE

(X6) DATE

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V 114	Continued From page 1  Interviews on 1/22/19 with client #1, #2 and #3 revealed: -They participated in both fire and disaster drills, but never during asleep hours (3rd shift).  Interview on 1/22/19 with staff #1 revealed: -The facility ran both fire and disaster drills -He had never had the clients participate in the drills during asleep hours  Interview on 1/23/19 with the Supervisor/Acting Qualified Professional revealed: -Was not aware drills were not conducted on third shift -"I guess they (facility staff) did not want to wake the clients up ..." -Would ensure staff conducted fire and disaster drills on third shift.	V 114	QP will ensure FIRE & DISASTER DRILLS ARE CARRIED OUT ON ALL SHIFTS	45 days
V 115	27G .0208 Client Services  10A NCAC 27G .0208 CLIENT SERVICES (a) Facilities that provide activities for clients shall assure that: (1) space and supervision is provided to ensure the safety and welfare of the clients; (2) activities are suitable for the ages, interests, and treatment/habilitation needs of the clients served; and (3) clients participate in planning or determining activities. (h) Facilities or programs designated or described in these Rules as "24-hour" shall make services available 24 hours a day, every day in the year, unless otherwise specified in the rule. (c) Facilities that serve or prepare meals for clients shall ensure that the meals are nutritious. (d) When clients who have a physical handicap	V 115		

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V 115	<p>Continued From page 2</p> <p>are transported, the vehicle shall be equipped with secure adaptive equipment.</p> <p>(e) When two or more preschool children who require special assistance with boarding or riding in a vehicle are transported in the same vehicle, there shall be one adult, other than the driver, to assist in supervision of the children.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure activities were suitable for the ages, interests and treatment/habilitation needs of the clients affecting 3 of 3 clients (#1, #2 and #3). The findings are:</p> <p>Observations on 1/22/19, from 10:25am to 1:44pm, revealed: -When surveyor arrived at the facility, clients #1, #2 and #3 were sleeping -The clients got up at different intervals -The clients sat in the living room watching television, sat outside and smoked cigarettes and would return to their rooms.</p> <p>Review on 1/23/19 of client #1's record revealed: -An admission date of 1/4/17 -Diagnoses of Schizophrenia and Mild Intellectual Disability -An assessment dated 1/4/17 noting "receives psychiatric services, family is important and his brother lives in another state, wants to be independent, needs encouragement to participate in activities, needs time to calm down when</p>	V 115	<p>ALL CLIENTS WILL BE SIGNED UP FOR ACTIVITIES, 3-4 days PER WEEK, THE CLIENTS THEMSELVES REFUSE PARTICIPATION IN ACTIVITIES</p>	

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V 115	<p>Continued From page 3</p> <p>angry, needs time to complete tasks, needs verbal prompts to for his hygiene, needs to follow a hygiene schedule and meal prep, is easily agitated, needs to learn better ways to express his feelings.</p> <p>-A treatment plan dated, 1/5/19, noting "will increase his independence by learning to manage his supervised time in the group home and the community each day to build and integrate building social skills, will abide by the rules and regulations of the facility, learn life and daily living skills and how to be independent 7 out of 7 days per week and will learn how to control his behavior in the home and community, stop getting agitated when told NO, attend all scheduled doctor and other professional appointments and take all medications as prescribed by his doctors."</p> <p>Review on 1/23/19 of client #2's record revealed: -An admission date of 5/11/16 -Diagnoses of Schizophrenia, Tobacco Abuse and Vitamin D Deficiency -An assessment dated 5/11/16 noting "needs weight management, previously at [a state psychiatric hospital], multiple admissions, delusional, has eloped from previous placements, self-cutting after girlfriend broke up with him (2005), previous legal charges for assault, witnessed domestic violence, exhibits grandiose delusions, is not able to hold a reality based conversations with staff for longer than 5 minutes." -A treatment plan dated 5/10/18 noting "will learn to abide by the rules and regulations of the group home, reduce episodes of any disruptive behaviors to less than 3 times per week, will take his medications as prescribed and on time every day of the week, will learn how to budget his weekly allowance every day of the week to</p>	V 115	<p>INDOORS / OR OUTSIDE IN COMMUNITY EVERYDAY. SO WE WILL ENSURE THEY ARE INCLUDED &amp; PARTICIPATE IN ACTIVITIES OR SOME CLASSES / ARTS &amp; CRAFT AT LEAST 3-4 DAYS /WK</p> <p>45 days</p>	

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V 115	<p>Continued From page 4</p> <p>ensure he meets his personal needs budget weekly and staff will assist in locating where to buy and get a better price."</p> <p>Review on 1/23/19 of client #3's record revealed: -An admission date of 4/9/18 -Diagnoses of Schizophrenia, Chronic Obstructive Pulmonary Disease and Mild Cognitive Impairment -An assessment dated 4/9/18 noting "verbally abusive, history of physical aggression, needs verbal prompts with hygiene and assistance with bathing and dressing, incontinent, needs medication management, was previously placed at [a local hospital], has isolated seizures, has behavior issues, judgment is impaired by severe persistent mental illness and needs to avoid food high in salt and fat." -A treatment plan dated 4/10/18 noting "will learn to abide by the rules and regulations of the group home, reduce episodes of any disruptive behaviors to less than 3 times per week, will take his medication as prescribed and on time every day of the week and will learn how to budget his allowance every day of the week."</p> <p>Interview on 1/22/19 with client #1 revealed: -When asked what he did every day, client #1 stated "I watch tv, I lay down and I take naps." -Denied he went out on activities in the community -Did not attend a day program, work or volunteer in the community.</p> <p>Interview on 1/22/19 with client #2 revealed: -Had been at the facility for 9 months -When asked what he did every day, client #2 stated "I watch tv, I listen to the radio and I smoke cigarettes." -Denied he went out on activities in the</p>	V 115	<p>ALL CLIENTS WILL BE ENROLLED IN DAY PROGRAM WHERE POSSIBLE, /OR ENROLL CLIENTS IN CLASSES OF ARTS &amp; CRAFT</p> <p>ALL CLIENTS WILL BE REGISTERED IN SOME CLASSES ARTS &amp; CRAFTS, HOPE TO ENGAGE CLIENTS 3-4 DAYS A WEEK. AS THEY REFUSE EVERYDAY</p>	<p>45 days</p> <p>45 days</p>
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V 115	Continued From page 5  community -"I don't like too much structure with activities."  Interview on 1/22/19 with client #3 revealed: -Had been at the facility for almost 3 years -When asked what he did every day, client #3 stated "I have to come up with things to do here. It is boring. I will pace back and forth for exercise and I smoke. Other than that, we don't do nothing here." -Denied he went out on activities in the community, volunteered or attended a day program  Interview on 1/22/19 with staff #1 revealed: -The clients used to go out into the community and do activities -"That has not happened in quite a while. They like to hang out here and watch tv." -Was not sure whom was responsible for ensuring the clients had activities -When asked about residential goals, staff #1 stated "we haven't work on any since last month. I think they (the clients) forgot them ..."  Interview on 1/23/19 with the Supervisor/Acting Qualified Professional revealed: -Stated the clients go where they choose for outings and activities -"They go to [a restaurant], one client goes to a day program, some walk to the store ...if they don't want to go out into the community, we can't make them ..." -Would work on outings in the community for the clients as well as daily activities.	V 115	ALL CLIENTS WILL BE ENROLLED IN DAY PROGRAMS WHERE POSSIBLE ALSO ENROLL CLIENTS IN CLASSES / ARTS & CRAFT AD/OR GROUP SESSIONS / CLASSES WITH MENTAL HEALTH SUPPORT GROUPS IN WS -	75 days
V 367	27G .0604 Incident Reporting Requirements  10A NCAC 27G .0604 INCIDENT	V 367		

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V 367	<p>Continued From page 6</p> <p><b>REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS</b></p> <p>(a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. <i>The report may be submitted via mail, in person, facsimile or encrypted electronic means.</i> The report shall include the following information:</p> <ol style="list-style-type: none"> <li>(1) reporting provider contact and identification information;</li> <li>(2) client identification information;</li> <li>(3) type of incident;</li> <li>(4) description of incident;</li> <li>(5) status of the effort to determine the cause of the incident; and</li> <li>(6) other individuals or authorities notified or responding.</li> </ol> <p>(b) Category A and B providers shall explain any missing or incomplete information. The provider shall submit an updated report to all required report recipients by the end of the next business day whenever:</p> <ol style="list-style-type: none"> <li>(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or</li> <li>(2) the provider obtains information required on the incident form that was previously unavailable.</li> </ol> <p>(c) Category A and B providers shall submit, upon request by the LME, other information</p>	V 367		

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V 367	<p>Continued From page 7</p> <p>obtained regarding the incident, including:</p> <p>(1) hospital records including confidential information;</p> <p>(2) reports by other authorities; and</p> <p>(3) the provider's response to the incident.</p> <p>(d) Category A and B providers shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18).</p> <p>(e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary via electronic means and shall include summary information as follows:</p> <p>(1) medication errors that do not meet the definition of a level II or level III incident;</p> <p>(2) restrictive interventions that do not meet the definition of a level II or level III incident;</p> <p>(3) searches of a client or his living area;</p> <p>(4) seizures of client property or property in the possession of a client;</p> <p>(5) the total number of level II and level III incidents that occurred; and</p> <p>(6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph.</p>	V 367		



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V 367	<p>Continued From page 8</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews the facility failed to report a Level II incident to the Local Management Entity (LME) within 72 hours of becoming aware of the incident affecting 1 of 3 clients (#1). The findings are:</p> <p>Review on 1/23/19 of client #1's record revealed: -An admission date of 1/4/17 -Diagnoses of Schizophrenia and Mild Intellectual Disability -An assessment dated 1/4/17 noting "receives psychiatric services, family is important and his brother lives in another state, wants to be independent, needs encouragement to participate in activities, needs time to calm down when angry, needs time to complete tasks, needs verbal prompts to for his hygiene, needs to follow a hygiene schedule and meal prep, is easily agitated, needs to learn better ways to express his feelings. -A treatment plan dated, 1/5/19, noting "will increase his independence by learning to manage his supervised time in the group home and the community each day to build and integrate building social skills, will abide by the rules and regulations of the facility, learn life and daily living skills and how to be independent 7 out of 7 days per week and will learn how to control his behavior in the home and community, stop getting agitated when told NO, attend all scheduled doctor and other professional appointments and take all medications as prescribed by his doctors."</p> <p>Review on 1/22/19 of the facility's incident reports</p>	V 367	<p>ALL LEVEL II INCIDENTS WILL BE PROMPTLY REPORTED THROUGH IRIS TO THE APPROPRIATE OFFICE (S)</p> <p><i>4/5/19</i></p>	

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V 367	<p>Continued From page 9</p> <p>revealed:</p> <ul style="list-style-type: none"> <li>-No level 2 incident reports had been completed</li> <li>-There were several "in house" incident reports</li> <li>-On 12/24/18, at 11:00pm, "[Client #1] walked away from the facility after hours while I was asleep down stairs in the staff's room."</li> <li>-This was written up by staff #2</li> </ul> <p>Interview with client #1 revealed:</p> <ul style="list-style-type: none"> <li>-Stated he had walked away from the facility two times</li> <li>-"I caught a ride with the police and they took me to the hospital."</li> <li>-Had walked away from the facility after hours and "staff (#2) was asleep"</li> <li>-Walked out the side door (which has an alarm on it) and walked down town.</li> <li>-"I went right up to the police officer and asked him to take me to the hospital and he did ...[Staff #2] did not know I had walked away until the hospital called them ...I stayed overnight and [the supervisor] picked me up in the morning ..."</li> </ul> <p>Interview on 1/22/19 with staff #1 revealed:</p> <ul style="list-style-type: none"> <li>-Within the last month, client #1 had walked away from the facility</li> <li>-Staff #2 was working</li> <li>-"I heard that [staff #2] was sleeping. Lights are out at 10pm. [Client #1], I heard, went out the side door and walked to the hospital. I just don't know if that is true. I think he got a ride to the hospital. I know the hospital called [the supervisor] and [staff #2] did not know he was missing ...I think he spent the night there. I am not sure how he got home ..."</li> </ul> <p>Interview on 1/23/19 with staff #2 revealed:</p> <ul style="list-style-type: none"> <li>-Worked at the facility on 12/24/18</li> <li>-Ensured the clients were in bed by 10pm on 12/24/18 before he went to sleep</li> </ul>	V 367	<p>ALL LEVEL II INCIDENTS WILL BE PROMPTLY REPORTED THROUGH IRIS</p>	30 days

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V 367	<p>Continued From page 10</p> <ul style="list-style-type: none"> <li>-Received a telephone call (time unknown) from the hospital</li> <li>-The hospital staff stated client #1 was at their emergency room</li> <li>-Staff #2 stated to the hospital staff that was untrue as client #1 was in bed</li> <li>-Went to client #1's bedroom and he was not there.</li> <li>-Called the Supervisor/Acting Qualified Professional</li> <li>-Wrote up a level I incident report</li> </ul> <p>Interview on 1/23/19 with the Supervisor/Acting Qualified Professional revealed:</p> <ul style="list-style-type: none"> <li>-Was informed by staff #2 regarding the incident with client #1 on 12/24/18</li> <li>-Was not aware a level II incident report should have been completed</li> <li>-Staff #2 did write up a level I incident report</li> <li>-Would ensure level II incident reports were submitted via IRIS</li> </ul> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 367	<p>ALL LEVEL II INCIDENTS WILL BE PROMPTLY REPORTED THROUGH IRIS IN A PROMPTLY MANNER.</p>	30 days
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility staff failed to maintain the facility grounds in a</p>	V 736	<p>THE FACILITY GROUNDS WILL BE PROPERLY MAINTAINED</p>	

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL034-334</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>01/23/2019</b>
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NAME OF PROVIDER OR SUPPLIER  
**NOA HUMAN SERVICES #3**

STREET ADDRESS, CITY, STATE, ZIP CODE  
**1847 WAYCROSS DRIVE  
WINSTON SALEM, NC 27106**

(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 736	<p>Continued From page 11</p> <p>safe, clean and attractive manner. The findings are:</p> <p>Observations on 1/22/19, at approximately 9:59am, of the outside of the facility revealed: -A boom box plugged into the carport outlet blaring music with no one outside -Leaves had blown into the carport and were stacked in front of one of the screen doors -To the right of the carport, inside the metal fence, was a bumper to a vehicle -Under the carport were 2 broken televisions</p> <p>Observations on 1/22/19, at approximately 10:22am, of the inside of the facility revealed: -6 leather dining room chairs were ripped open exposing the fabric inside. -Several of the chairs were dirty</p> <p>Observations on 1/23/19, at approximately 12:33pm, of the facility revealed: -The green sofa in the living room had torn cushions and frayed fabric -Several of the mattresses and box springs belonging to the clients were in poor repair, with springs exposed and sagging in the middle -Rust was located under the clients' bathroom sink and behind the toilet -Several of the clients' linens were ripped and comforters were in poor shape -A cracked light switch plate in the clients' rooms -The washing machine top and inside rim were rusted with pieces falling into the actual washing machine -The concrete wall next to the exit in the basement was covered with black mold and it appeared to have water stains going down several bricks -The light over the stairs going to the basement was burned out</p>	V 736	<p><del>MAINTAINED</del> IN A DAILY ALL ITEMS NOT IN USED SHALL NOT BE LEFT/ABANDONED ON THE FACILITY GROUNDS.</p> <p>THE DINING ROOM CHAIRS WILL BE IMMEDIATELY REPLACED &amp; MAINTAINED IN A GOOD CONDITION</p> <p>ALL APPLIANCES IN THE FACILITY WILL BE INSPECTED &amp; REPLACED WHERE NECESSARY AN ANTI-MOLD PAINTING WILL BE APPLIED</p>	<p>4/5 days</p> <p>4/5 days</p>

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL034-334</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/23/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>NOA HUMAN SERVICES #3</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1847 WAYCROSS DRIVE WINSTON SALEM, NC 27106</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
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V 736	<p>Continued From page 12</p> <p>Interviews on 1/22/19 with clients #1, #2 and #3 revealed: -The bumper to the car belonged to the QP when he had an accident in a bank parking lot -The broken televisions had been sitting there "for months" -The boom box was only to be on with clients were outside smoking</p> <p>Interview on 1/22/19 with staff #1 revealed: -The car bumper had been sitting inside the fence for months -"Apparently, [the QP] hit something and pulled the bumper off and left it here. I don't know if he is coming back to get it or plans to recycle it ..." -Stated the broken televisions needed to be placed at the curb or recycled. -He thought there was a mattress under the carport that needed to be taken to the curb also.</p> <p>Interview on 1/23/19 with the Supervisor/Acting Qualified Professional revealed: -Would immediately contact the maintenance man for necessary repairs</p>	V 736	<p>ON THE MENTIONED WALL DOWNSTAIRS TO TREAT &amp; ENSURE IT DOES NOT REOCCUR</p> <p>ALL /THE GROUNDS WILL BE MAINTAINED IN GOOD &amp; CLEAN CONDITIONS</p>	<p>45 days</p> <p>45 days</p>
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