

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-937	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 03/20/2019
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NAME OF PROVIDER OR SUPPLIER PEACE HEALTHCARE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 627 DONALD ROSS DRIVE RALEIGH, NC 27610
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V 000	<p>INITIAL COMMENTS</p> <p>An Annual and Follow Up Survey was completed on March 20, 2019. A Deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness</p>	V 000		
V 108	<p>27G .0202 (F-I) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <p>(1) general organizational orientation;</p> <p>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</p> <p>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</p> <p>(4) training in infectious diseases and bloodborne pathogens.</p> <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and</p>	V 108		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 108	<p>Continued From page 1</p> <p>clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure one of two staff had current trainings in cardiopulmonary resuscitation (CPR) and trained in first aid (staff #2). The findings are:</p> <p>Review on 3/20/19 of staff #2's record revealed: -No hire date -No record a current CPR and First Aid training.</p> <p>During interview on 3/18/19 the Licensee stated: -Staff #1 and #2 work two weeks on and two weeks off.</p> <p>Fax received on 3/20/19 from Qualified Professional revealed: -Staff #2 had expired trainings in CPR and First Aid. -Staff #2 will not return to work until all her trainings have been completed</p>	V 108		
V 536	<p>27E .0107 Client Rights - Training on Alt to Rest. Int.</p> <p>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</p>	V 536		

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V 536	<p>Continued From page 2</p> <p>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.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(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.</p> <p>(e) Formal refresher training must be completed 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> <ol style="list-style-type: none"> (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; 	V 536		

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V 536	<p>Continued From page 3</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> <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</p>	V 536		

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V 536	<p>Continued From page 4</p> <p>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> <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>	V 536		

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V 536	<p>Continued From page 5</p> <p>(I) Documentation shall be the same preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure two of two staff had current trainings in Alternative to Restrictive Interventions (staff #1, #2). The findings are:</p> <p>Review on 3/20/19 of staff #1's record revealed: -No hire date. -No record of Alternative to Restrictive Interventions present.</p> <p>Review on 3/20/19 of staff #2's record revealed: -No hire date -No record of Alternative to Restrictive Interventions present.</p> <p>During interview on 3/18/19 the Licensee stated: -Staff #1 and #2 work two weeks on and two weeks off.</p> <p>Fax received on 3/20/19 from Qualified Professional revealed: -Staff #1 and #2 had expired trainings to Alternative to Restrictive Interventions. -Staff #1 is scheduled for training 3/20/19. -Staff #2 will not return to work until all her trainings have been completed.</p>	V 536		
V 736	27G .0303(c) Facility and Grounds Maintenance	V 736		

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V 736	<p>Continued From page 6</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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 observation and interview, the governing body failed to maintain the facility in an odor free manner. The finding is:</p> <p>Observation on 3/18/19 at 10:30 AM revealed: -Clients bathroom located in the hallway had sheet rock coming off and deep indention's in the wall located beside the shower/bathtub. -Client #1 had a strong smell of urine and her mattress was deeply sunken in in the middle. The mattress appeared stained and had no mattress cover not sheets present. -Client #2's window would not stay up when lifted.</p> <p>During interview on 3/18/19 client #1 stated: -She does wet the bed. -Mattress had been sunken in for a few months. -Does not sleep with sheets on the mattress all the time. -Washed her sheets one time a week. -Not had a mattress cover over her mattress.</p> <p>During interview on 3/18/19 The licensee stated: -Not aware client #1's mattress looked like this, she must have been flipping it over. -Had bought mattress covers for the mattress but client #1 would take them off.</p>	V 736		

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V 736	<p>Continued From page 7</p> <ul style="list-style-type: none"> -Not aware of client #1 not having sheets on her mattress. <p>During interview on 3/18/19 the Qualified Professional stated:</p> <ul style="list-style-type: none"> -Client #1 has a chronic bladder issue where she wets the bed every night. -She had pull ups, but she soaks the bed. -Not aware her mattress was in this shape. -Had taken client to the doctor regarding her bladder. -Had been working with client #1 on these issues. <p>[This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.]</p>	V 736		