

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL001-165	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/21/2019
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NAME OF PROVIDER OR SUPPLIER NEW DIMENSIONS INTERVENTIONS, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 2856 ANDERSON ROAD BURLINGTON, NC 27217
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on March 21, 2019. Deficiencies were 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 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> <ol style="list-style-type: none"> (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (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. 	V 112		

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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 reviews and interview, the facility failed to have a Person Centered Plan with 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 affecting two of three clients (#3, #4). The findings are:</p> <p>Review on 3/21/19 of Client #3's record revealed: -Admission date of 10/14/10. -Diagnoses of Hypertension; Acute Renal Failure; Diabetes; Schizophrenia; COPD; GERD; Herpes; Hyperlipidemia. -Client #3 had a Person Centered Plan dated 3/2/18. -Client #3's Person Centered Plan had no current written consent or agreement by the client or responsible party.</p> <p>Review on 3/21/19 of Client #4's record revealed: -Admission date of 10/7/15. -Diagnoses of Impaired Cognition; Schizoaffective Disorder; Pain in lower limbs. -Client #4 had a Person Centered Plan dated 1/23/18. -Client #4's Person Centered Plan had not current written consent or agreement by the client or responsible party.</p> <p>Interview on 3/21/19 with Staff #1 revealed: -Qualified Professional was responsible for completing the Person Center Plans. -Person Center Plan for Clients #3 and #4 were recently completed. -She did not know why updated plans for Client #3 and #4 were not in their files. -Clients #3 and #4 had legal guardians that needed to sign their plans.</p>	V 112		

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V 112	Continued From page 2 -She confirmed that the Person Centered Plans for Clients #3 and #4 had no written consent or agreement by the client or responsible party.	V 112		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</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 facility failed to ensure facility grounds were maintained in a clean, safe and attractive manner. The findings are:</p> <p>Observation on 3/21/19 at 1:00 PM of the Dining area revealed: -Linoleum flooring was torn and had a hole.</p> <p>Observation on 3/21/19 at 1:03 PM of the Kitchen revealed: -Cabinet doors under the sink did not close properly.</p> <p>Observation on 3/21/19 at 1:07 PM of Bedroom located adjacent to the kitchen revealed: -Carpet was dirty. Unvacuumed. Debris/pieces of paper observed on the carpet.</p> <p>Observation on 3/21/19 at 1:10 PM of the Hallway Bathroom revealed: -Strong urine smell.</p>	V 736		

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V 736	<p>Continued From page 3</p> <p>-Wall was cracking and peeling off.</p> <p>Observation on 3/21/19 at 1:15 PM of first Bedroom to the right revealed: -Linoleum flooring was scratched and showing holes. -Flooring was dirty. Needed sweeping. Debris/pieces of paper observed on the floor.</p> <p>Observation on 3/21/19 at 1:18 PM of the Living Area revealed: -Carpet was wrinkled and needing to be stretched. -Carpet was dirty. Unvacuumed. Debris/pieces of paper observed on the carpet.</p> <p>Observation on 3/21/19 at 1:20 PM of the Bedroom located to the left revealed: -Carpet was wrinkled and needing to be stretched. -Carpet was dirty. Unvacuumed. Debris/pieces of paper observed on the carpet. -Closet doors were hard to open due to thickness of carpet.</p> <p>Interview on 3/21/19 with Staff #2 revealed: -She was aware of carpet's conditions. -She was aware of flooring condition in the kitchen. -Foul odor in bathroom was attributed to residents missing the toilet when urinating. -Staff were supposed to sweep and vacuum the floors. -Home staff were responsible for completing maintenance of the home. -She confirmed that the facility failed to ensure grounds were maintained in a clean, safe and attractive manner.</p>	V 736		