

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL013-195	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/27/2019
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NAME OF PROVIDER OR SUPPLIER SMITH HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 9167 HYDRANGEA DRIVE HARRISBURG, NC 28075
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 3/27/29. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Alternative Family Living.</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 interviews, observations and record reviews, the facility failed to ensure all staff completed trainings in general organizational orientation, training in client rights and confidentiality, training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan, training in infectious diseases and bloodborne pathogens and the facility also failed to ensure at least one staff member 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 was available in the facility at all times when clients were present affecting 2 of 2 clients (#1, #2) The findings are:</p> <p>Observation on 3/25/19 at 3:00pm revealed a male adult in the facility with staff #1.</p> <p>Review on 3/22/19 of client #1's record revealed: -admission date of 11/10/14 with diagnoses of COPD, Encephalopathy, Osteoarthritis, Asthma, Schizoaffective Disorder, Depressive Disorder, Borderline Personality Disorder and Intellectual Developmental Disabilities(IDD)-Moderate.</p> <p>Review on 3/22/19 of client #2's record revealed: -admission date of 4/5/18 with diagnoses of PTSD, Personality Disorder, Bipolar Disorder, Psychosis Disorder, Depression, Acid Reflux, Hypothyroidism, Obesity, Anxiety, IDD-Moderate, Migraines and Adjustment Disorder.</p>	V 108		

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V 108	<p>Continued From page 2</p> <p>Interview on 3/25/19 with client #1 revealed when staff #1 goes places, "[the adult male] watches them sometimes."</p> <p>Interview on 3/25/19 with client #2 revealed if staff #1 has to run an errand, "[the adult male] watches them."</p> <p>Interview with staff #1 revealed the adult male was her boyfriend and watched client #1 and #2 sometimes if she has to run a quick errand.</p> <p>Request on 3/27/19 to review the personnel record and trainings of the adult male in the facility providing care for clients #1 and #2 was unsuccessful as there was not a personnel record or trainings to review.</p> <p>Interview on 3/27/19 with the Residential Director revealed: -staff #1's boyfriend does not live in the facility; -he only visits from time to time; -considered a "natural support;" -can watch clients #1 and #2 up to three hours per their policy and no training required; -this policy was created by a former administrator regarding an issue at another facility; -do not have a personnel record on the adult male in the facility; -the adult male in the facility does not have any completed trainings.</p>	V 108		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>only be administered to a client on the written order of a person authorized by law to prescribe drugs.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on records review, observation and interviews, the facility failed to ensure medications were administered as ordered affecting 1 of 2 clients (#1). The findings are:</p> <p>Review on 3/22/19 of client #1's record revealed: -admission date of 11/10/14 with diagnoses of COPD, Encephalopathy, Osteoarthritis, Asthma,</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>Schizoaffective Disorder, Depressive Disorder, Borderline Personality Disorder and Intellectual Developmental Disabilities-Moderate; -physicians' orders dated 1/9/19 for Triamcinolone ointment apply twice daily to groin and Ketoconazole cream apply once daily to right groin.</p> <p>Observation on 3/25/19 at 2:58pm of client #1's medications on site revealed: -Triamcinolone ointment apply twice daily to groin not on site; -Ketoconazole cream apply once daily to right groin not on site.</p> <p>Review on 3/22/19 and 3/25/19 of client #1's MARS from 1/1/19-3/22/19 revealed: -Triamcinolone ointment apply twice daily and Ketoconazole cream apply once daily not listed on MARs for 1/2019, 2/2019 and 3/2019; -no documentation on the 1/2019, 2/2019 and 3/2019 MARs Triamcinolone ointment apply twice daily and Ketoconazole cream apply once daily was administered.</p> <p>Interview on 3/25/19 with client #1 revealed she was not aware of any missed medications.</p> <p>Interview on 3/27/19 with the Nurse revealed: -not sure why medications were not on MARs; -not sure why medications were not administered; -will ensure correct medications were listed on MARS and medications administered as prescribed.</p>	V 118		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL</p>	V 131		

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V 131	<p>Continued From page 5</p> <p>REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to access the HCPR(Health Care Personnel Registry). The findings are:</p> <p>Observation on 3/25/19 at 3:00pm revealed a male adult in the facility with staff #1.</p> <p>Review on 3/22/19 of client #1's record revealed: -admission date of 11/10/14 with diagnoses of COPD, Encephalopathy, Osteoarthritis, Asthma, Schizoaffective Disorder, Depressive Disorder, Borderline Personality Disorder and Intellectual Developmental Disabilities(IDD)-Moderate.</p> <p>Review on 3/22/19 of client #2's record revealed: -admission date of 4/5/18 with diagnoses of PTSD, Personality Disorder, Bipolar Disorder, Psychosis Disorder, Depression, Acid Reflux, Hypothyroidism, Obesity, Anxiety, IDD-Moderate, Migraines and Adjustment Disorder.</p> <p>Interview on 3/25/19 with client #1 revealed when staff #1 goes places, "[the adult male] watches them sometimes."</p> <p>Interview on 3/25/19 with client #2 revealed if staff</p>	V 131		

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V 131	<p>Continued From page 6</p> <p>#1 has to run an errand, "[the adult male] watches them."</p> <p>Interview with staff #1 revealed the adult male was her boyfriend and watched client #1 and #2 sometimes if she has to run a quick errand.</p> <p>Request on 3/27/19 to review the personnel record and HCPR check of the adult male in the facility providing care to clients #1 and #2 was unsuccessful as there was not a personnel record or HCPR check to review.</p> <p>Interview on 3/27/19 with the Residential Director revealed:</p> <ul style="list-style-type: none"> -staff #1's boyfriend does not live in the facility; -he only visits from time to time; -considered a "natural support;" -can watch clients #1 and #2 up to three hours per their policy; -this policy was created by a former administrator regarding an issue at another facility; -do not have a personnel record on the adult male in the facility; -the adult male in the facility does not have a HCPR check since he does not reside in the facility. 	V 131		
V 133	<p>G.S. 122C-80 Criminal History Record Check</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</p> <p>(a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter.</p>	V 133		

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V 133	Continued From page 7 (b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the	V 133		

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V 133	<p>Continued From page 8</p> <p>national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p> <ol style="list-style-type: none"> (1) The level and seriousness of the crime. (2) The date of the crime. (3) The age of the person at the time of the conviction. (4) The circumstances surrounding the commission of the crime, if known. (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled. (6) The prison, jail, probation, parole, rehabilitation, and employment records of the 	V 133		

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V 133	<p>Continued From page 9</p> <p>person since the date the crime was committed.</p> <p>(7) The subsequent commission by the person of a relevant offense.</p> <p>The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:</p> <p>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.</p> <p>(2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.</p> <p>(e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10,</p>	V 133		

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V 133	<p>Continued From page 10</p> <p>Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p>	V 133		

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V 133	<p>Continued From page 11</p> <p>(1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.</p> <p>(2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to request the required criminal records check. The findings are:</p> <p>Observation on 3/25/19 at 3:00pm revealed a male adult in the facility with staff #1.</p> <p>Review on 3/22/19 of client #1's record revealed: -admission date of 11/10/14 with diagnoses of COPD, Encephalopathy, Osteoarthritis, Asthma, Schizoaffective Disorder, Depressive Disorder, Borderline Personality Disorder and Intellectual Developmental Disabilities(IDD)-Moderate.</p> <p>Review on 3/22/19 of client #2's record revealed: -admission date of 4/5/18 with diagnoses of PTSD, Personality Disorder, Bipolar Disorder, Psychosis Disorder, Depression, Acid Reflux, Hypothyroidism, Obesity, Anxiety, IDD-Moderate, Migraines and Adjustment Disorder.</p> <p>Interview on 3/25/19 with client #1 revealed when staff #1 goes places, "[the adult male] watches</p>	V 133		

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V 133	<p>Continued From page 12</p> <p>them sometimes."</p> <p>Interview on 3/25/19 with client #2 revealed if staff #1 has to run an errand, "[the adult male] watches them."</p> <p>Interview with staff #1 revealed the adult male was her boyfriend and watched client #1 and #2 sometimes if she has to run a quick errand.</p> <p>Request on 3/27/19 to review the personnel record and criminal records check of the adult male providing care to clients #1 and #2 in the facility was unsuccessful as there was not a personnel record or criminal records check to review.</p> <p>Interview on 3/27/19 with the Residential Director revealed: -staff #1's boyfriend does not live in the facility; -he only visits from time to time; -considered a "natural support;" -can watch clients #1 and #2 up to three hours per their policy; -this policy was created by a former administrator regarding an issue at another facility; -do not have a personnel record on the adult male in the facility; -the adult male in the facility does not have a criminal records check since he does not reside in the facility.</p>	V 133		
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</p> <p>(a) Facilities shall implement policies and</p>	V 536		

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NAME OF PROVIDER OR SUPPLIER SMITH HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 9167 HYDRANGEA DRIVE HARRISBURG, NC 28075
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V 536	<p>Continued From page 13</p> <p>practices that emphasize the use of alternatives to restrictive interventions.</p> <p>(b) Prior to providing services to people with 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; 	V 536		

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V 536	<p>Continued From page 14</p> <p>(5) recognizing cultural, environmental and organizational factors that may affect people with disabilities;</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</p>	V 536		

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V 536	<p>Continued From page 15</p> <p>failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be 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>	V 536		

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V 536	<p>Continued From page 16</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure prior to providing services, staff demonstrated competence by successfully completing training in alternatives to restrictive interventions. The findings are:</p> <p>Observation on 3/25/19 at 3:00pm revealed a male adult in the facility with staff #1.</p> <p>Review on 3/22/19 of client #1's record revealed: -admission date of 11/10/14 with diagnoses of COPD, Encephalopathy, Osteoarthritis, Asthma, Schizoaffective Disorder, Depressive Disorder, Borderline Personality Disorder and Intellectual Developmental Disabilities(IDD)-Moderate.</p> <p>Review on 3/22/19 of client #2's record revealed: -admission date of 4/5/18 with diagnoses of PTSD, Personality Disorder, Bipolar Disorder, Psychosis Disorder, Depression, Acid Reflux, Hypothyroidism, Obesity, Anxiety, IDD-Moderate, Migraines and Adjustment Disorder.</p> <p>Interview on 3/25/19 with client #1 revealed when staff #1 goes places, "[the adult male] watches them sometimes."</p>	V 536		

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V 536	<p>Continued From page 17</p> <p>Interview on 3/25/19 with client #2 revealed if staff #1 has to run an errand, "[the adult male] watches them."</p> <p>Interview with staff #1 revealed the adult male was her boyfriend and watched client #1 and #2 sometimes if she has to run a quick errand.</p> <p>Request on 3/27/19 to review the personnel record and completed training in alternatives to restrictive interventions of the adult male in the facility was unsuccessful as there was not a personnel record or any trainings to review.</p> <p>Interview on 3/27/19 with the Residential Director revealed: -staff #1's boyfriend does not live in the facility; -he only visits from time to time; -considered a "natural support;" -can watch clients #1 and #2 up to three hours per their policy; -this policy was created by a former administrator regarding an issue at another facility; -do not have a personnel record on the adult male in the facility; -the adult male in the facility does not have a any completed trainings since he does not reside in the facility.</p>	V 536		