

Motivational Residential Care

164 Graves St.
Burlington, NC. 27217

North Carolina Department of Health and Human Services
Re: Annual Survey

Greetings:, Facility Survey Consultant I

Thank you for allowing Motivational Residential Care the opportunity to submit a plan of correction for the areas cited within our facility, on March 19, 2019

Thank you,

Enclosed: Plan of Correction
 Copies of trainings

Plan of Correction

Reference to out of compliance issues: Deficiency Description: 27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (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. (d) The plan shall include: (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.

Comment: This Rule was not met as evidenced by: the facility failed to have written consent or agreement by the client or responsible party affecting three of three clients (#1, #2 and #3)

Procedure: a. Review on 3/19/19 of client #1's record revealed: -Admission date of 8/1/18. -Diagnoses of Major Depressive Disorder, Recurrent, Severe with Psychotic Features; Hypertension; Bladder Incontinence. -Person Centered Plan was dated 6/5/18. -Person Centered Plan had no written consent or agreements by the client or responsible party. b. Review on 3/19/19 of client #2's record revealed: -Admission date of 6/1/17. -Diagnoses of Paranoid Schizophrenia; High Blood Pressure; Diabetes, Type II. -Person Centered Plan was dated 8/10/18. -Person Centered Plan had no written consent or agreements by the client or responsible party. c. Review on 3/19/19 of client #3's record revealed: Admission date of 2/1/19. -Diagnoses of Bipolar Disorder; Klinefelter syndrome; Venous Stasis D2 -Person Centered Plan was not dated. -Person Centered Plan had no written consent or agreements by the client or responsible party. Interview on 11/29/17 with the Licensee revealed: -She thought clients' #1, #2 and #3's guardians had already signed their Person Centered Plans. -They had been having trouble in receiving signed Person Centered Plans back from guardians. -She confirmed clients' #1, #2 and #3 Person Centered Plans had no written consent or agreement by the client or responsible party.

Systematic Change to Prevent the Out-of Compliance Issues:

Motivational Residential Care QP will review and revise all PCP's and have each client and team members signs all plans. This will be completed by April 5, 2019. QP will conduct audit review each month to assure compliance. Each new admit will have a PCP signed within 72 hours of admit date. If PCP is unable to get signed in a timely fashion, a note will be made and placed into the book.

Reference to out of compliance is:

27E .0107 Client Rights - Training on Alt to Rest. Int.
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

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.

Comment:

This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure two of three audited staff (Staff #1 and Owner/Director) had current training in the use of alternatives to restrictive interventions. The findings are: Review of the Director's personnel records on 3/19/19 revealed: -Staff #1 had a hire date of 3/23/17. -Staff #1 was hired as the Director/Qualified Professional. -Documentation of Training on Alternatives to Restrictive Intervention expired on 3/1/19. Review of Staff #2's personnel records on 3/19/19 revealed: - Staff #2 had a hire date of 3/15/17. -Staff #2 was hired as a Paraprofessional. -Documentation of training on Alternatives to Restrictive Intervention expired on 3/1/19. Interview on 3/19/19 with the /Director revealed: -The group home was using the NCI + Interventions Defense Training Parts A and B. -She worked at the group home doing many tasks besides being the Director. -She was not aware that trainings on alternatives to restrictive interventions for Staff #2 and herself had just expired. -She confirmed Staff #2 and herself did not have current training on Alternatives to Restrictive Intervention.

Systematic Change to Prevent the Out-Of Compliance Issues:

Director has completed NCI training as well as staff. Director will ensure all trainings are current at all times to maintain compliance. Staff books will be checked monthly to ensure compliance. Please see attached copies of new Certificates.

**North Carolina
Interventions Plus**

*Agency is responsible for verifying Participant certification
Go to North Carolina Interventions Plus website:
<http://nciplus.com>*

NCI+ / *Participant*

This certifies that

Signal W Mitchell

*has fulfilled all requirements for certification and, subject to annual
recertification, is qualified to use physical techniques*

***NCI+ Interventions - Defensive Training
(Part A and B)***

A curriculum of the North Carolina Interventions Plus

Kenneth Archie

Instructor Name



Instructor Signatures

03-01-2019

Date

Certificate is valid through Expiration Date 04-10-2020

Participant NCI+ Interventions Defensive Training 1008

Defensive Physical Skills Score Sheet

Name : Signal W Mitchell

Area/Agency : Triad Healthcare

Technique	C I		Comment
Blocks:	Right	Left	
Overhead A	✓	✓	
Overhead B			
Hook A	✓	✓	
Hook B			
Straight A	✓	✓	
Straight B			
Uppercut	✓	✓	
Step Away	✓	✓	
Kick	✓	✓	
Simple:	Correct	Incorrect	
1 - Hand Arm Grab-roll	✓		
2 - Hand Arm Grab-pull Up	✓		
Long Hair	✓		
Complex:	Correct	Incorrect	
Front Choke Prevent	✓		
Full Nelson Prevent	✓		

Certification Date : 03-01-2019

Re-certify by : Kenneth



Evaluator signature

Defensive Physical Skills Score Sheet

Items checked below identify areas of difficulty demonstrated during the return demonstration.

~~Had difficulty getting up from the floor during carries.~~

~~Demonstrated techniques at a very slow pace.~~

~~Demonstrated correct technique, but body strength appeared to be less than adequate to actually control a person who is being aggressive.~~

~~Excessive use of force, inappropriate controlling strength.~~

~~Must demonstrate proficiency in the incomplete techniques marked on return to obtain certification /re-certification.~~

COMMENTS:

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This certifies that

Terry Mitchell

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