

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL060-776</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>04/30/2019</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint and follow up survey was completed on 4/30/19. The complaints were unsubstantiated (Intakes #NC150398, #NC150533 and #NC151051). The follow up survey reviewed the following for compliance: 10A NCAC 27G .1701 Residential Treatment Staff Secure for Adolescents or Children V293 with cross referenced 10A NCAC 27G 1704 Minimum Staffing Requirements V296. The following was brought back into compliance: 10A NCAC 27G .1701 Residential Treatment Staff Secure for Adolescents or Children V293. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Adolescents or Children.</p>	V 000		
V 120	<p><b>27G .0209 (E) Medication Requirements</b></p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently</p>	V 120		

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V 120	<p>Continued From page 1</p> <p>registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to ensure medications were stored in a securely locked cabinet. The findings are:</p> <p>Observations on 4/23/19 at 7:30am revealed: -2 staff and 2 clients on the premises; -medication keys were hanging in the open door of the closet where medications were kept; -staff #2 was standing in the living room adjacent to the room where the medication closet was; -a notice was posted at the medication closet door documenting "Staff please do not leave closet door open or unlocked at any time during your shift;" -medications closet door with keys was open from 7:36am to 7:45am without staff at the closet.</p> <p>Interview on 4/23/19 with staff #1 revealed they were in the process of getting clients ready for school.</p> <p>Review on 4/23/19 and 4/24/19 of the facility incident reports from 3/23/19-4/23/19 revealed no incidents of any diversion of medications by staff or clients.</p> <p>Interview on 4/23/19 with the Director of Operations revealed: -staff should not have medication closet door open; -will address issue with staff.</p>	V 120		

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V 296	Continued From page 2	V 296		
V 296	<p>27G .1704 Residential Tx. Child/Adol - Min. Staffing</p> <p>10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS</p> <p>(a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times.</p> <p>(b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows:</p> <p>(1) two direct care staff shall be present for one, two, three or four children or adolescents;</p> <p>(2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and</p> <p>(3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents.</p> <p>(c) The minimum number of direct care staff during child or adolescent sleep hours is as follows:</p> <p>(1) two direct care staff shall be present and one shall be awake for one through four children or adolescents;</p> <p>(2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and</p> <p>(3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.</p> <p>(d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan.</p>	V 296		

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V 296	<p>Continued From page 3</p> <p>(e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and needs as specified in the treatment plan.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to ensure two direct care staff were present for one, two, three or four children or adolescents present and awake at the facility. The findings are:</p> <p>Review on 2/13/19 of client #1's record revealed: -date of admission 7/13/17 with diagnoses of Major Depression, Autism Spectrum Disorder, Post Traumatic Stress Disorder, Intermittent Explosive Disorder and Psychosis Disorder Not Otherwise Specified; -age 16 years and in the custody of Social Services due to abuse by her parents; -admission assessment documented client #1 had poor boundaries, threats of self harm, suicidal ideation, auditory hallucinations, poor coping skills, clingy to female staff and aggression, stepped down from a PRTF (Psychiatric Residential Treatment Facility) and disrupted her TFC (Therapeutic Foster Care Home) with false allegations against the foster parents; -treatment plan dated 1/8/19 documented client #1 had "regressed to making allegations against peers as well as staff...continues to hear voices and makes allegations of abuse by others..;"</p>	V 296		

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V 296	<p>Continued From page 4</p> <p>client #1 makes allegations against peers and staff, plays the victim, attempts to run away and had a new updated goal to not make false allegations, not run away, not call the police and make false reports;</p> <p>-crisis plan dated 2/27/19 documented the following: client #1 will talk back, whine, refuse to do whatever is asked, runs away, give clear, concise instructions and redirections, encourage her all the time, "Do not be alone with [client #1]" remove her form the situation and away from others "but do not be alone with [client #1]", give her something fun to do, allow her to help out with simple tasks, give her undivided attention, do not get loud with her or bombard her with questions.</p> <p>Finding #1: Observation on 4/24/19 at 11:15am revealed: -two cars in the driveway; -facility vehicle was gone; -client #1 present in the facility with staff #1; -no other staff present in the facility.</p> <p>Interview on 4/24/19 with staff #1 revealed: -yesterday had client #1 with her all day; -client #1 refused to go to school; -client #1 made threats to run away; -also made threats to beat up the Group Home Manager (GH MGR); -threatened to burn down school if she went to school; -got client #1 calm and took her out to eat; -stayed whole day at the facility, client #1 refused to go to the office; -this morning, the same issues, client #1 refusing to go to school; -the GH Mgr was here earlier but have to leave to go get medications and an appointment for client #2; -talking to client #1 to try to get her to go to</p>	V 296		

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V 296	<p>Continued From page 5</p> <p>school.</p> <p>Interview on 4/24/19 with client #1 revealed: -all the other clients were at school; -staff #1 was here with her; -a teacher cussed her out and now she does not want to go to school; -usually two staff here; -last weekend, staff #7 worked by herself until staff #5 came in.</p> <p>Finding #2: Interview on 4/24/19 with client #1's school staff revealed: -on 4/8 client #1 was making suicidal statements at the end of the day; -one group home staff picked her up; -on 4/9 same thing, client making suicidal statements near end of day; -police, Mobile Crisis and Social Services were involved; -called facility staff several times, facility staff reported can not transport client #1 if in crisis, asked school to call 911; -school did assessment and client #1 rated high on risk level; -Mobile Crisis came and did evaluation and felt client #1 needed to follow up with someone; -school per policy can not call 911 on client #1; -legal guardian was also contacted and involved; -GH Mgr called back and reported she was on her way to pick up client #1; -when GH Mgr arrived, she sat in another room; -client #1 had "somewhat"de-escalated, when client #1 saw GH Mgr she immediately reported she was going to kill herself; -client #1 left the school with the GH Mgr who stated she would take client #1 to the hospital.</p> <p>Further interview on 4/24/19 with client #1</p>	V 296		

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V 296	<p>Continued From page 6</p> <p>revealed:</p> <ul style="list-style-type: none"> <li>-reported she said suicidal thoughts at school;</li> <li>-feel better now;</li> <li>-the GH Mgr picked her up from school and she went to the hospital, no other staff with them;</li> <li>-staff #4 picked her up the first time she had suicidal thoughts at school, no other staff with them.</li> </ul> <p>Interview on 4/23/19 with client #3 revealed a few weeks ago, staff #7 worked by herself at the facility.</p> <p>Interview on 4/30/19 with the Director of Operations revealed:</p> <ul style="list-style-type: none"> <li>-she had called the GH Mgr to come to the office and bring some documentation for the survey and go by the pharmacy;</li> <li>-she was aware client #1 had refused to go to school earlier but she did not know client #1 was still at the facility alone with staff #1;</li> <li>-usually staff #1 can talk client #1 into going to school;</li> <li>-had 2 staff working that shift, staff #1 and the GH Mgr;</li> <li>-school calls daily about client #1 being in crisis;</li> <li>-school says they assess her and it rates high;</li> <li>-client #1 says she wants to kill herself so she can leave school or not go;</li> <li>-school wants client #1 to go to the hospital, they take her to the hospital, she is not admitted and assessed not in crisis;</li> <li>-school will not call 911;</li> <li>-client #1 says whatever to get what she wants;</li> <li>-now client #1 saying she does not want to attend school at all because a problem with a teacher and being bullied on the bus by peers;</li> <li>-had a meeting with the school about the issues after the incidents on 4/8-4/10;</li> <li>-when staff go to school to pick client up, she is</li> </ul>	V 296		

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V 296	Continued From page 7  not in crisis and is calm; -feel ok for one staff to pick her up.  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 296		
V 736	27G .0303(c) Facility and Grounds Maintenance  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.  This Rule is not met as evidenced by: Based on observations and interviews, the facility and its grounds were not maintained in a safe, clean, attractive and orderly manner. The findings are:  Observation on 4/24/19 at 11:10am revealed: -broken blinds in the living room; -peeling paint behind the sink, toilet and shower head in the hall bathroom; -mold on the ceiling; -soap scum on the walls; -in the bottom of the vanity in the hall bathroom, piece of cardboard covering a hole in the bottom of the vanity under sink approximately 6 inches round, used toilet paper on top of piece of cardboard; -broken door hanging on one hinge; -towels stuffed around the bottom of the refrigerator in the kitchen.	V 736		



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V 736	<p>Continued From page 8</p> <p>Interview on 4/24/19 with staff #1 revealed: -refrigerator has been leaking; -put towels under it to keep water off floor.</p> <p>Interview on 4/30/19 with the Chief Operating Officer revealed: -not aware hole still in vanity; -will have maintenance man go by home and do repairs needed.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		