STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL064-084	A. BUILDING: _____ B. WING _____	R 04/02/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BTW HOME CARE SERVICES II LLC	601 COLBY COURT ROCKY MOUNT, NC 27803

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on 4/2/19. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G.5600A Supervised Living for Adults with Mental Illness. *notation: this is a family owned business and for better understanding of this report, the staff are as follows: Licensee #1 (mother) Licensee #2 (father) Chief Financial Officer (paternal mother) staff #1 (Licensee #1 & #2's daughter)	V 000		
V 109	27G .0203 Privileging/Training Professionals 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS (a) There shall be no privileging requirements for qualified professionals or associate professionals. (b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served. (c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (d) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills.	V 109		

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V 109	Continued From page 1 (e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS. (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional. (g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter. This Rule is not met as evidenced by: Based on record review and interview the governing body failed to ensure one of one Qualified Professional (QP) demonstrated the knowledge and skills required by the population served. The findings are: Review on 3/11/19 of the QP's personnel record revealed: - hire date was 2/23/12 - a job description dated 3/6/12 revealed: "will document progress on consumer goals monthly...will maintain monthly notes on each consumer...will obtain documentation from staff, supervisors, administrator and self notes compile all notes into consumers service plan...will monitor for progress/lack of progress through observation, interview and documentation review...will be alert to any changes in the residency of an individual...must have no less than one face to face visit per month which must include periodic visits to the home...will assure	V 109		

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V 109	Continued From page 2 that the consumer receives the best available treatment..." The following are examples of how the QP failed to demonstrate competency: A. During interview on 3/14/19 the QP reported: - staff are responsible for completing progress notes - she interviewed staff to find out the progress of a client B. Review on 3/11/19 of a treatment plan dated 5/20/18 for client #1 revealed: - "I want to continue working on controlling my anger..." During interview on 3/14/19 the QP reported: - she was responsible for completing the clients' treatment plans - she was familiar with the clients at the facility - client #1 was called by his nickname at the facility (notation: client #3 has the nickname) - she was not aware client #1 had anger issues C. Review on 3/20/19 of a police report dated 9/15/18 for client #1 revealed: - "...responded to 601 Colby Court in reference to a physical assault...spoke with [client #1]...stated he was in his backyard when [unknown person] approach him wanting to fight. He stated the [unknown person] just began hitting him. At this location, I observed [client #1]'s face which looked as if he had a possible broken nose, lacerations were underneath each eye and nose, a big lump on the back side of his head on the left side behind his ear, and a possible broken finger...after the interview I was notified by officers that [client #1] started the fight with the [unknown person]. "	V 109		

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V 109	Continued From page 3 During interview on 3/14/19 the QP reported: - all the clients at the facility had unsupervised time - there were no issues or concerns with the clients' unsupervised time During interview on 3/18/19 Licensee #2 reported: - client #1 was the only client that had unsupervised time at the facility D. Observation in the kitchen on 3/11/19 at 3:51pm revealed: - a lock on the top and lower portion of the refrigerator During interview on 3/14/19 the QP reported: - she visited the facility 1- 2 times on a monthly basis - she has not seen a lock on the refrigerator During interview on 3/18/19 Licensee #1 reported: - the QP was not at the facility enough - she has told the QP she needed to come to the facility more - the QP visited the facility to say "she came" During interview on 3/11/19, 3/18/19 & 3/20/19 Licensee #2 reported: - the QP came to the facility once a month - she came only to do supervisions with staff - the QP does not interact with the clients - he interviewed the clients and gave the QP input toward the clients' goals - she does not complete walk throughs of the facility - she was at the facility 30 minutes to an hour - after surveyors left last Wednesday (3/13/19) he contacted the QP - he explained she needed more interaction	V 109		

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V 109	Continued From page 4 with the clients...become more familiar with clients medical and mental health and the progress notes and treatment plans needed improvement [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 109		
V 110	27G .0204 Training/Supervision Paraprofessionals 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter. (c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served. (d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (e) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. (f) The governing body for each facility shall develop and implement policies and procedures	V 110		

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V 110	Continued From page 5 for the initiation of the individualized supervision plan upon hiring each paraprofessional.	V 110		

This Rule is not met as evidenced by:
Based on observation, record review and interview the facility failed to ensure one of one staff (Licensee #2) demonstrated knowledge and skills required by the population served. The findings are:

Review on 4/2/19 of Licensee #2's job description revealed:
- signed 8/22/08
- "...provide through daily supervision a safe environment in the program...accurately and thoroughly document client behavior...administer medications...assist consumers as needed...maintain the facility, furniture and equipment in a quality manner...work as a member of the treatment team in carrying out treatment plans for all clients and represent BTW Home Care Service in a professional manner..."

The following are examples of how Licensee #2 failed to demonstrate competency:

A. examples of anger issues by client #1 (1) police report "...after the interview I was notified by officers that [client #1] started the fight with the [unknown person]" and (2) a clinical assessement "...he (client #1) was at the same PSR (psychosocial rehabilitation) on two different occasions...he was discharged the first time because he did not get along with a female staff...he was readmitted and discharged again

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V 110	Continued From page 6	V 110		

for getting into it with the head administration...client #1 reported having behavioral problems at age 16..."

Review on 3/20/19 of a police report dated 9/15/18 for client #1 revealed:
- "...responded to 601 Colby Court in reference to a physical assault...spoke with [client #1]...he stated the [unknown person] just began hitting him...after the interview I was notified by officers that [client #1] started the fight with the [unknown person]. "

During interview on 3/11/19 Licensee #2 reported:
- client #1 had anger issues when he first got to the facility
- he felt unsupervised time has helped client #1 with his anger
- client #1's anger was there but it was controlled

B. During interview on 3/11/19 Licensee #2 reported:
- he has allowed client #1 to have overnight stays with his girlfriend in her vehicle
- from December 2018 until current both have stayed overnight in her car approximately 4 times
- they had blankets during the cold nights
- they remained in the facility's driveway

C. Review on 3/25/19 of an incident report dated 9/15/18 for client #1 revealed:
- written by Licensee #2
- "...on 9/15/18 [client #1] was involved in a fight in the backyard...came in to the facility with a bloody nose and staff queried him as to what had happened...told staff he was confronted by [unknown person] whom had attacked him out back...paramedics arrived along with the authorities and took [client #1] to the hospital to

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V 110	Continued From page 7	V 110		

check his nose and pinky finger...staff picked [client #1] up from the hospital and found that the incident resulted in a fractured finger and nose..."

Review on 3/20/19 of a hospital discharge dated 9/15/18 for client #1 revealed:
- "...follow up within 1 to 2 days with Ear Nose & Throat (ENT) physician (name & number given) & orthopedic physician (name & number given)"

During interview on 3/27/19 Licensee #2 reported:
- EMS did not transport client #1 to the hospital
- 2 days later (after 9/15/18 incident) client #1 requested to go to the hospital because his finger hurt...and he took him
- he was not aware of a nasal fracture...his nose did not look crooked on the day of the incident...he had a nose bleed
- client #1 was discharged from the hospital with a splint on his finger
- he thought client #1 threw the discharge information into the trash can because he disliked doctors
- he was not aware client #1 was referred to an ENT or orthopedic physician during the 9/15/18 visit

D. Observation in the kitchen on 3/11/19 at 3:51pm revealed the following:
- a locked refrigerator that contained a variety of foods
- an unlocked refrigerator that contained a half bag of frozen sausage biscuits and a pack of frozen tenderloins

During interview on 3/18/19 Licensee #2 reported:
- the clients were able to get food when asked out of the locked refrigerator
- the unlocked refrigerator belonged to the clients

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V 110	Continued From page 8 E. During interview on 3/20/19 client #1 reported: - ...some guys came from the woods and argued with him and hit him...the guys hit him a couple of times...he yelled for another client to go get Licensee #2...the client came back and said Licensee #2 was asleep...Licensee #2 was on the couch with his eyes closed... During interview on 3/20/19 Licensee #2 reported: - he was the only staff that worked at the facility - due to funding he was not able to hire additional staff - he was awake staff during the night - he may nap 30 minutes to 1 hour during the night on the blue couch in the living room area F. During interview on 3/13/19 & 3/18/19 Licensee #2 reported: - he told client #3 the day he found out he (client #3) had an STD (sexually transmitted disease) to contact his girlfriend - he saw the diagnosis "Encounter for screening for infections with a predominantly sexual mode of transmission" on the medication administration record today (3/18/19) was not sure what it meant - he spoke with all the clients about sex, STD's and the use of condoms last night (3/17/19) - prior to last night he had not provided the clients with any sex education G. Observations on 3/11/19 revealed the following: - 4:10pm - an unplugged space heater and pedestal fan in client #1 & #2's bedroom During interview on 3/11/19 client #1 reported: - his girlfriend gave him the space heater	V 110		

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V 110	Continued From page 9 - he still used the space heater because he liked the mixture of the heat and air from the pedestal fan when he slept During interview on 3/11/19 & 3/18/19 Licensee #2 reported: - the facility's heating unit went out for 2 days in December 2018 - he put space heaters throughout the facility during this time - the space heaters used in December 2018 had been removed from the facility - client #1's girlfriend gave him the space heater after the heating unit was replaced - he was aware the space heater was still in client #1 & #2's bedroom - client #1 liked to feel the mixture of the heat and air from the pedestal fan [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 110		
V 112	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;	V 112		

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V 112	Continued From page 10 (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. This Rule is not met as evidenced by: Based on record review and interview the facility failed to develop and implement strategies for two of three audited clients (#1 & #3). The findings are: A. Review on 3/11/19 of client #1's record revealed: - admitted to the facility on 5/1/18 - diagnoses of Mild Intellectual Developmental Disability & Bipolar Disorder Review on 3/11/19 of a treatment plan dated 5/20/18 for client #1 revealed: - "I want to continue working on controlling my anger...goal: (1) will gain knowledge of the importance of continued and regular treatment for his diagnosis and the management of his symptoms as evidenced by taking medications daily and recognizing when he is becoming angry and controlling his actions (2) I want to build a good life for myself...will demonstrate progress in	V 112		

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V 112	Continued From page 11 this goal as evidenced by showing twice per month that he can handle stressful situation" - further review of the treatment plan revealed no goals or strategies about sex education Review on 3/11/19 of a Comprehensive Clinical Assessement dated 10/17/17 for client #1 revealed: - "...was in a group home [another county] had conflicts with the group home staff which led to him going into a crisis and being admitted to the hospital...he was placed at [facility in another county] had conflicts with staff members at the facility that resulted into hospitalization...he was then placed at another facility in which the group home owner stated [client #1] does have anger issues that he is working on controlling. He is presently enrolled at [local psychosocial rehabilitation (PSR)] two incidents were reported where [client #1] have engaged in fights. However, both reports indicate [client #1] was not the initiator...he reported that he began having behavioral problems at age 16..." During interview on 3/20/19 client #1 reported: - he saw his girlfriend 3 - 4 times out of the month - denies any physical or verbal aggression towards his girlfriend - he witnessed his father abuse his mother and he promised himself he would not hit a girl - his girlfriend worked a lot & was not from the local area - when she visited the facility they sometimes had alone time in his bedroom - the roommate would sit in the living room area - the girlfriend was not allowed to stay overnight in the facility - however they were allowed to stay overnight	V 112		

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V 112	Continued From page 12 in her car in the facility's yard - they have stayed in the girlfriend's car at least 4 - 5 times since he was admitted to the facility - during the cold months she would let the car run for a little while and then turn it off - the heat would remain in the car and they both had blankets - Licensee #2 would tell them not to leave the facility's yard during the overnight stays - the girlfriend sometimes would get a hotel - he went with his girlfriend to check in the hotel and they would have sex...he was not allowed to stay overnight - they had sex in the car, at the hotel and in his bedroom - he used condoms because he did not want any kids since he lived at a group home - he got condoms from his primary physician - Licensee #2 spoke to him and the clients last night about sex & sexually transmitted diseases (STD's) - prior to last night Licensee #2 had not talked with him about sex but would hint he needed to wear condoms During interview on 3/14/19 & 3/20/19 client #1's guardian reported: - client #1 does have anger issues, however client #1 does not feel he has any anger issues - he was in the process of getting a therapist - he was at the same PSR on two different occasions...he was discharged the first time because he did not get along with a female staff...he was readmitted and discharged again for getting into it with the "head administration" - he was now enrolled at another PSR - client #1 was allowed to have his girlfriend over at the facility - he was allowed to close his bedroom door for privacy	V 112		

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V 112	Continued From page 13 - she & Licensee #2 have educated client #1 about sex - have not discuss STD's but advised if he needed condoms to ask Licensee #2 - he has asked permission to have overnight stays at the hotel but it was denied by her agency - she was not aware client #1 had overnight stays in his girlfriend's car...it was not approved by her - it has not been discussed to include sex education in client #1's treatment plan During interview on 3/11/19 Licensee #2 reported: - client #1 had anger issues when he first got to the facility - he would refuse his medication but now understood he needed his medication - client #1 did attend the same PSR twice...he could not get along with staff on one occasion...he has been at the current PSR since 3/1/19 - he felt unsupervised time has helped client #1 with his anger - they were in the process of changing therapist...current therapist lost funding - client #1's anger was there but it was controlled - if he (client #1) wanted anything out of life he had to show compliance with his medication...control his anger - if he (Licensee #2) detect any anger from client #2 he will intervene and speak with him - client #1's girlfriend was allowed to have alone time in his bedroom - client #1's girlfriend has not stayed overnight at the facility - he has allowed client #1 to have overnight stays with his girlfriend in her vehicle - from December 2018 until current both have stayed overnight in her car approximately 4 times	V 112		

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BTW HOME CARE SERVICES II LLC	601 COLBY COURT ROCKY MOUNT, NC 27803

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 112	Continued From page 14 - they had blankets during the cold nights - they remained in the facility's driveway B. Review on 3/18/19 of client #3's record revealed: - admitted to the facility on 6/30/16 - diagnoses of Hyperlipidemia; Encounter for screening for infections with a predominantly sexual mode of transmission; Unspecified Mood Affective Disorder; Schizoaffective Disorder, bipolar type & Cocaine use - a March 2019 medication administration record revealed: Metronidazole - Flagyl 500mg every 8 hours for 10 days (Trichomoniasis is treated with oral metronidazole...a very common STD...although symptoms of the disease vary, most people..." - a treatment plan dated 7/10/18 revealed no goals or strategies to address sex education During interview on 3/13/19 a nurse at client #3's physician's office reported: - client #3 tested positive for Trichomonas in March 2019 - client #3 came to their facility in 2016 with the diagnosis "Encounter for screening for infections with a predominantly sexual mode of transmission" - if he had a STD in the past, it was now part of his history During interview on 3/13/19 client #3 reported: - he liked to be called by his nickname - his girlfriend was allowed to come to the facility - they had alone time in his bedroom - he did not have a roommate - she was allowed to stay overnight at the facility - she stayed 2-3 days one time	V 112		

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V 112	Continued From page 15 - Licensee #2 would pick her up and take her home - he currently had a yeast infection - when he had an erection it caused a yeast infection - his girlfriend said if she drunk a lot of sodas she got a yeast infection - sometimes when people touched his food he got a yeast infection - he and his girlfriend used condoms...sometimes they bust - he got his condoms from the local barber shop or store - Licensee #2 told him he had a bacterial infection - he has to take medication for 10 days During interview on 3/13/19 Licensee #1 reported: - she contacted the girlfriend today and made her aware client #3 had a STD - the girlfriend was not aware - the girlfriend scheduled a medical appointment During interview on 3/13/19 & 3/18/19 Licensee #2 reported: - client #3 switched therapist - the therapist requested bloodwork on all new clients - the bloodwork detected client #3 had Trichomonas - client #3's girlfriend stayed 1 night at the facility - she did not have a ride and he could not take her home - he explained to client #3 he had a STD - client #3 said he had only been with his girlfriend - client #3 has been with the same girl since he was admitted (2016)	V 112		

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V 112	Continued From page 16 - he (Licensee #2) told client #3 the day he found out he had an STD to contact his girlfriend - the medication had to be taken for 10 days - the girlfriend was not allowed to come over until the medication was completed - he saw the diagnosis "Encounter for screening for infections with a predominantly sexual mode of transmission" on the client #3's MAR today (3/18/19) but was not sure what it meant - he spoke with all the clients about sex, STD's and the use of condoms last night (3/17/19) - prior to last night he had not provided the clients with any sex education During interview on 3/14/19 the Qualified Professional reported: - she was responsible for completing the clients' treatment plans - she was familiar with the clients at the facility - client #1 was called by his nickname at the facility (notation: client #3 has the nickname) - she was not aware client #1 had anger issues - she was not aware client #3 had a girlfriend - girlfriends are allowed in the client's bedroom if the door was left opened - no sexual intercourse was allowed at the facility - clients have rights and if they had sexual intercourse at the facility she needed to have an education session with them - she was not made aware client #3 had an STD [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 112		

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V 113	Continued From page 17	V 113		
V 113	27G .0206 Client Records 10A NCAC 27G .0206 CLIENT RECORDS (a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to: (1) an identification face sheet which includes: (A) name (last, first, middle, maiden); (B) client record number; (C) date of birth; (D) race, gender and marital status; (E) admission date; (F) discharge date; (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV; (3) documentation of the screening and assessment; (4) treatment/habilitation or service plan; (5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician; (6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician; (7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information	V 113		

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V 113	Continued From page 18 relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143. This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure progress towards outcomes were documented for two of three audited clients (#1 & #3). The findings are: A. Review on 3/11/19 of client #1's record revealed: - admitted to the facility on 5/1/18 - diagnoses of Mild Intellectual Developmental Disability & Bipolar Disorder - progress towards client's goals could not be determined based on the written progress notes Review on 3/11/19 of client #1's treatment plan dated 5/20/18 revealed: - "I want to continue working on controlling my anger...goal: (1) will gain knowledge of the importance of continued and regular treatment for his diagnosis and the management of his symptoms as evidenced by taking medications daily and recognizing when he is becoming angry and controlling his actions (2) I want to build a good life for myself...will demonstrate progress in this goal as evidenced by showing twice per month that he can handle stressful situation" Review on 3/11/19 of some of client #1's progress notes revealed: - "December 2018...has a girlfriend who visit him quiet often, [Licensee #2] has informed him that when he misbehave, she would not be aloud	V 113		

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V 113	Continued From page 19	V 113		

to come visit that week and so he has been better lately. This also tells us that he can control his temper if he wants to. His guardian has agree with this action. [Licensee #2] will ask his guardian about him and her going out to dinner together sometime as long as his behavior is improving." (no staff signature)
- "February 2019...doing better about complying with his medication regimen. He is lazy when it comes to keeping his room clean and doing his house chores. Usually someone else ends up doing them. We have been working on his goal of money management, doing his house chores and getting along with everyone. He is not a friendly person he sometime will not even say good morning or just hay to you...likes a lot of attention or he gets angry with the staff and slams doors and sometime walks off. [Licensee #2] can say something to him when he angry or he will start cussing and ready to fight. He has a real anger problem." (signed by the Chief Financial Officer (CFO)

B. Review on 3/18/19 of client #3's record revealed:
- admitted to the facility on 6/30/16
- diagnoses of Hyperlipidemia; Encounter for screening for infections with a predominantly sexual mode of transmission; Unspecified Mood Affective Disorder; Schizoaffective Disorder, bipolar type & Cocaine use
- progress towards client's goals could not be determined based on the written progress notes

Review on 3/11/19 of client #3's treatment plan dated 7/10/18 revealed:
- "goal (1) will get my GED (general education development)...will demonstrate this goal as evidenced by researching and contacting institutions that offer GED classes at least twice

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V 113	Continued From page 20 monthly (2) I need to help with chores at the group home...will satisfy this goal as demonstrated by helping to keep the bathroom and common areas clean at the group home at least twice a week without prompting..." Review on 3/11/19 of client #3's progress notes revealed: - "(January 2019)...attends a day program...very irresponsible and just will not attend it on a daily basis...when he doesn't want to attend he will not get out of bed causing him to miss the bus; then if you miss the bus without calling in you get suspended for 30 days...we feel he doesn't want to attend." (signed by CFO) - "(February 2019)...attends a day program...he misses more days during the month than he goes...very lazy doesn't want to get up in the mornings and wants to stay up late...he is very spoiled...likes to tease the other consumers and doesn't realize when enough is enough before an argument arise...he is very kind hearted...complies with his medication regiment...pleasant to be around most of the time..." (signed by CFO) During interview on 3/14/19 the Qualified Professional reported: - staff are responsible for completing progress notes - she interviewed the staff to find out about the progress of a client - she also observed client/staff interactions when she visited the facility - she was at the facility 1 - 2 times a month - she was at the facility last month but could not recall the date [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1	V 113		

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V 113	Continued From page 21 rule violation and must be corrected within 23 days.]	V 113		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (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. (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. (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.	V 118		

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V 118	Continued From page 22 This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure medications were administered to two of three audited clients (#1& #3) on the written order of a physician and self administered on the written order of a physician for one of three audited clients (#3). The findings are: 1. The following are examples of how physician's orders were not followed: A. Review on 3/11/19 of client #1's record revealed: - admitted to the facility on 5/1/18 - diagnoses of Mild Intellectual Developmental Disability & Bipolar Disorder - physician order dated 9/15/18: Cephalexin 500mg one capsule four times a day for 7 days... (antibiotics used to treat infections) - September 2018 MAR revealed Cephalexin was not administered until 9/18/18 During interview on 3/26/19 a pharmacy representative reported: - the Cephalexin prescription was written on 9/15/18 - it was faxed to the pharmacy on 9/17/18 from the facility - she was not sure if it was faxed late on 9/1718 but it was not filled until 9/18/18 During interview on 3/11/19 Licensee #2 reported: - he was not sure why client #1's Cephalexin was not administered until 9/18/18 B. Review on 3/18/19 of client #3's record revealed: - admitted to the facility on 6/30/16	V 118		

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V 118	Continued From page 23 - diagnoses of Hyperlipidemia; Encounter for screening for infections with a predominantly sexual mode of transmission; Unspecified Mood Affective Disorder; Schizoaffective Disorder, bipolar type & Cocaine use - a March 2019 MAR revealed: Metronidazole 500mg every 8 hours for 10 days...administration began on 3/9/19 (Trichomoniasis is treated with oral metronidazole...a very common STD) - no physician's order for Metronidazole - a physician order dated 12/10/18: Proair-Albuterol inhaler 2 puffs by mouth four times a day (can prevent bronchospasm) During interview on 3/11/19 Licensee #2 reported: - the Metronidazole order for client #3 was escript to the pharmacy - the pharmacy did not keep a copy of the physician's order 2. The following is an example of how a client self administered a medication without authorization from a physician: Observation on 3/13/19 revealed the following: - at 12:04pm no Albuterol inhaler in client #3's medication box - at 3:41pm client #3 had his Albuterol inhaler in his pocket During interview on 3/13/19 Licensee #2 reported: - client #3 takes the Albuterol inhaler to his psychosocial rehabilitation daily - client #3 has self administered the inhaler since admitted to the facility - he (Licensee #2) will get a self administer order for the Albuterol inhaler [This deficiency constitutes a re-cited deficiency.] [This deficiency is crossed referenced into 10A	V 118		

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V 118	Continued From page 24 NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 118		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses; (4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses;	V 289		

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V 289	Continued From page 25 (5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or (6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7)(A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1)(i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e)(1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL). This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to provide residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, developmental disabilities and substance abuse disorder who require supervision when in the residence affecting five of five clients (#1, #2, #3, #4 & #5). The findings are:	V 289		

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V 289	Continued From page 26 A. Cross reference tag (V109). 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS. Based on record review and interview the governing body failed to ensure one of one Qualified Professional (QP) demonstrated the knowledge and skills required by the population served. B. Cross reference tag. (V110). 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS. Based on observation, record review and interview the facility failed to ensure one of one staff (Licensee #2) demonstrated knowledge and skills required by the population served. C. Cross reference tag (V112). 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN. Based on record review and interview the facility failed to develop and implement strategies for two of three audited clients (#1 & #3). D. Cross reference tag (V113). 10A NCAC 27G .0206 CLIENT RECORDS. Based on record review and interview the facility failed to ensure progress towards outcomes were documented for two of three audited clients (#1 & #3). E. Cross reference tag (V118). 10A NCAC 27G .0209 MEDICATION REQUIREMENTS. Based on observation, record review and interview the facility failed to ensure medications were administered to two of three audited clients (#1& #3) on the written order of a physician and self administered on the written order of a physician for one of three audited clients (#3).	V 289		

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V 289	Continued From page 27 F. Cross reference tag (V290). 10A NCAC 27G .5602 STAFF. Based on observation, record review and interview the facility failed to ensure one of three audited client's (#1) treatment plan was reviewed as needed to ensure the client was capable of remaining in the community without supervision. G. Cross reference tag (291). 10A NCAC 27G .5603 OPERATIONS. Based on record review and interview the facility failed to ensure coordination was maintained with Qualified Professionals who are responsible for treatment for one of three audited clients (#3). H. Cross reference tag (513). 10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE. Based on observation and interview the facility failed to promote a least restrictive environment for four of four clients (#1, #2, #3 & #4). Review on 3/27/19 of a Plan of Protection dated 3/27/19 written by Licensee #2 revealed: "The QP has been replaced as of 3/25/19. The new QP will demonstrate that she can meet the requirements of her position. Participate in and implement sound PCP's (person centered plans) with progress notes that reflect the consumers work toward those goals with staff assisting to achieve those goals. Staff will be trained by [new QP] on the correct procedure for writing progress notes, on consumer diagnosis as pertaining to mental illness homes. We expect receive this training by 4/10/19. Medication prescriptions will be obtained for all medications either by hard copy or by prescription on BTW's medical contact form. Any changes to the medication administration record will be verified by at least two Licensees. Medications will be documented and administered as prescribed. Unsupervised time	V 289		

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V 289	Continued From page 28 will be revisited and documented for all consumers with emphasis on their ability to remain safe while being unsupervised. Staff will not sleep during shifts or in consumer's common areas. All staff will have enough time off to get rest away from the group home. The Chief Financial Officer will ensure that this Plan of Protection is implemented immediately." Client #1 was admitted to the facility 5/1/18 with diagnoses of mild intellectual developmental disability and bipolar disorder. On 9/15/18 client #1 was involved in a fight with a neighbor resulting in client #1 being transported to the emergency room with subsequent diagnoses of a fractured nose and finger. Client #1 was to have had follow-ups with an ENT and orthopedic physicians within 1-2 days, however this did not happen. He was also given a prescription for an antibiotic on 9/15/18 which was not filled until 9/18/18. Client #1 was not seen by the orthopedic physician until 3/11/19 at which time it was discovered that his finger had healed with a slight malunion and he now had significant extension lag and the inability to flex the proximal interphalangeal joint normally. Client #1 was never taken to see an ENT for his fractured nose. Licensee #2 thought that client #1 had just thrown his emergency discharge papers away and did not seek out any further information regarding the extent or follow-ups needed to his injuries. Even after this fight, neither the QP nor Licensee #2 addressed his continued unsupervised time in his treatment plan. Client #1's guardian stated overnight stays of the client's girlfriend had been denied by her agency, however Licensee #1 had allowed this to occur. Licensee #1 had allowed the girlfriend to park her car in the driveway while she and client #1 stayed inside the car overnight during the winter.	V 289		

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V 289	Continued From page 29 Client #3 was admitted to the facility on 6/30/16 with diagnoses of schizoaffective disorder, bipolar type and cocaine use. On 3/9/19 client #3 was started on a course of metronidazole to treat his newly diagnosed Trichomoniasis. Client #3's girlfriend would stay overnight with him as he did not have a roommate. He used condoms but stated they would sometimes bust. Client #3 did not understand his diagnosis of Trichomoniasis or how he had acquired it as he thought it was a yeast infection caused by an erection. Client #3 had been diagnosed with Trichomoniasis prior to this March 2019 episode, however his treatment plan did not address sex education in relation to STDs. The QP was not familiar with the clients in the group home or their needs. She did not know client's names, unsupervised time status, nor was she aware the refrigerator had a lock on it even though she reportedly visited the group home 1-2 times per month. She relied in interviews with the staff to determine progress of clients towards their goals and clients #1 and #3 did not even have documentation related to goal progress. Licensee #2 was the only staff who worked at this group home and with being awake staff at night he would sometimes take naps of 30 minutes to 1 hour during the night on the sofa in the living room. He also routinely locked the refrigerator requiring all the clients to ask permission of him to obtain food & beverages from inside of it. Although the use of space heaters are prohibited from use in this type of group home, Licensee #2 has allowed the use of one in the bedroom of client #1 and #2 since December 2018. This deficiency constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days. An administrative penalty of $2,000 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of	V 289		

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V 289	Continued From page 30 $500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.	V 289		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. (b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body.	V 290		

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V 290	Continued From page 31 (d) In facilities which serve clients whose primary diagnosis is substance abuse dependency: (1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client. This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure one of three audited client's (#1) treatment plan was reviewed as needed to ensure the client was capable of remaining in the community without supervision. The findings are: Review on 3/11/19 of client #1's record revealed: - admitted to the facility on 5/1/18 - age 23 - diagnoses of Mild Intellectual Developmental Disability & Bipolar Disorder - a treatment plan dated 5/20/18 "I want to go out alone; will have 3 hours of unsupervised time...incident free" Review on 3/11/19 of a comprehensive clinical assessment dated 10/17/17 for client #1 revealed: - "...was in a group home [another county] had conflicts with the group home staff which led to him going into a crisis and being admitted to the hospital...he was placed at [facility in another county] had conflicts with staff members at the facility that resulted into hospitalization...he was	V 290		

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then placed at another facility in which the group home owner stated [client #1] does have anger issues that he is working on controlling. He is presently enrolled at [local psychosocial rehabilitation (PSR)] two incidents were reported where [client #1] have engaged in fights. However, both reports indicate [client #1] was not the initiator...he reported that he began having behavioral problems at age 16...[client #1] shared a situation that resulted in a charge of statutory rape. He said that he met a girl at a bar when he was 18 years old. The girl bought him a beer at the local bar...He stated that he thought she was of age because she was in the bar and bought him a drink. He had sexual intercourse with the girl. However, he later found out she was 14 years old. This led to statutory rape...he stayed in jail for 1 year...he has a history of mental health inpatient hospitalizations..."

Observation on 3/20/19 at 2:29pm revealed the local park within eyesight from the facility's backyard

Review on 3/25/19 of an incident report dated 9/15/18 for client #1 revealed:
- "...on Saturday September 9/15/18 Consumer 1 (client #1) was involved in a fight in the backyard of a vacant home adjacent the facility...the fight was over [unknown female] whom consumer 1 had met at the park behind the facility and had been contacing via facebook conversations an argument ensued and ended in physicial combat...consumer1 came into the facility with a bloody nose an staff quieried him as to what happened. Consumer 1 told staff that he was confronted by [unknown person] whom had attacked him out back. Consumer 1 informed staff that he was going to call authorities and did so...paramedics arrived along with the authorities

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V 290	Continued From page 33 and took consumer 1 to the hospital to check his nose and pinky finger..." Review on 3/20/19 of a police report dated 9/15/18 for client #1 revealed: - "...responded to 601 Colby Court in reference to a physical assault...spoke with [client #1]...stated he was in his backyard when [unknown person] approach him wanting to fight. He stated the [unknown person] just began hitting him. At this location, I observed [client #1]'s face which looked as if he had a possible broken nose, lacerations were underneath each eye and nose, a big lump on the back side of his head on the left side behind his ear, and a possible broken finger...after the interview I was notified by officers that [client #1] started the fight with the [unknown person]. I was informed the [unknown person] was trying to break up a fight with [client #1] and another male. When the [unknown person] attempted to break up the fight [client #1] began to swing a chain at [unknown person]. [Client #1] then wrapped the chain around his hand and began to approach [unknown person]. The [unknown person] began to defend himself. After learning this information I confronted [client #1] about this. [Client #1] then switched his story around advising he and the other male agreed to fight behind his house. After he and the other male had finished fighting the [unknown person] jumped on him. While at the resident I was approached by two white males and two white females...they witnessed this incident. The [unknown female] (age 13) stated they were at her house out in the yard when [client #1] walked by her house. [Client #1] was walking by when he started making threats...[Unknown female] stated that [client #1] is upset because neither she nor her sister would date him...she been told her mother about this and she told them to stay away	V 290		

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V 290	Continued From page 34 from [client #1]. Later that day [unknown female] and others walked over to the park and sat on the picnic tables...while they were sitting at the park, [client #1] walked over to them with a chain wrapped around his hand, telling them to leave he started cursing and making threats towards them. Eventually, [client #1] walked away to 601 Colby court. Another male with [unknown female] rode his scooter through the back of [client #1]'s back yard. [Client #1] stepped in front of the scooter and refused to move. Thinking [client #1] was gone hit the other male with the chain he had wrapped around his hand [unknown person] ran over there to stop it...[client #1] started swinging the chain and struck the other male and [unknown person]...the [unknown person] swings at [client #1] striking him in the face with a closed fist knocking him to the ground. Everyone left immediately..." Review on 3/11/19 of a court document dated 10/11/18 for client #1 revealed: - "...assault on a female...assault to inflict serious harm...stay away from [unknown female]" Review on 3/20/19 of a hospital discharge dated 9/15/18 for client #1 revealed: - "...presenting to the emergency room via emergency services status post assault from some guy that came through the woods to his group home...patient states he was punched several times with a fist in posterior head and left orbit region...admits to left 5th digit pain, headache, and blurry vision...Discharge information: assault; contusion; finger fracture; nasal fracture..." During interview on 3/20/19 client #1 reported: - he recalled the 9/15/18 incident...he was in the backyard...some guys came from the woods	V 290		

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V 290	Continued From page 35 and argued with him and hit him...he knew the guys because he seen them at the basketball court...the guys were upset because they did not like for a white boy to beat them in basketball...the guys hit him a couple of times...he yelled for another client to go get Licensee #2...the client came back and said Licensee #2 was asleep...he had the guy on the ground and was able to run in the facility...Licensee #2 was on the couch with his eyes closed but he was not asleep...he told him (Licensee #2) to call the police...he (client #1) had scratches beside his nose...he could not breathe out his nose...he thought his nose was broke...but later found out it was due to the blood and swelling...Licensee #2 took him to the hospital - the assault on a female was due to an unknown female that argued with some friends he was with on the basketball court. The police was called and the other guys ran but he did not. He could not run because the local park was near the facility. When the police arrived she told the police he hit her...he never touched her...she was upset with him because he would not pay her any attention. She would come to the park with booty shorts on and a tight shirt. He asked his friends one day who was that and the guys said "hey bro she is only 13 don't breathe her way" so he no longer paid her any attention - he only went to the park now if Licensee #2 was with him - he mostly used his unsupervised time to go fishing at the city lake and visits with his girlfriend During interview on 3/14/19 & 3/20/19 client #1's guardian reported: - client #1 does have anger issues, however client #1 does not feel he has any anger issues - he was at the same PSR on two different occasions...he was discharged the first time	V 290		

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because he did not get along with a female staff...he was readmitted and discharged again for getting into it with the "head administration"
- he was now enrolled at another PSR
- she was aware of the 9/15/18 incident
- all charges were dropped against client #1... the unknown female did not show for court
- client #1 was capable of unsupervised time

During interview on 3/14/19 the Qualified Professional reported:
- all the clients at the facility had unsupervised time
- there were no issues or concerns with the clients unsupervised time

During interview on 3/11/19 & 3/20/19 Licensee #2 reported:
- client #1 was the only one with unsupervised time at the facility
- he has 3 hours of unsupervised time
- he liked to fish and go out to eat with his girlfriend
- there were no issues in the community with the exception of the 9/15/18 incident
- he was in the facility on 9/15/18 and did not hear or see anything
- he was in the living room watching television
- the clients walked in and out of the facility
- client #1 came in the facility. He walked fast down the hallway toward his bedroom. He called client #1's name and he said "sir" but did not turn around....he called client #1's name again and he turned around and he (client #1) had a nose bleed. He said a guy came from the woods and jumped on him...he later found out it was the unknown female's brother or boyfriend that jumped on client #1...client #1 said the fight took place next door...the home next door was not occupied at the time of the incident...the guy

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V 290	Continued From page 37 pressed charges on client #1 and said he assaulted the unknown female - the unknown female said client #1 grabbed her without her permission - he later found out client #1 and the unknown female had met in the park and had been talking on facebook prior to the incident (9/15/18) - the unknown female has not been to the facility only client #1's girlfriend - he planned to meet with the treatment team to discuss client #1's unsupervised time [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 290		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident.	V 291		

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V 291	Continued From page 38 Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern. This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure coordination was maintained with Qualified Professionals who are responsible for the treatment for one of three audited clients (#3). The findings are: Review on 3/11/19 of client #1's record revealed: - admitted to the facility on 5/1/18 - diagnoses of Mild Intellectual Developmental Disability & Bipolar Disorder Review on 3/25/19 of an incident report dated 9/15/18 for client #1 revealed: - written by Licensee #2 - "...on 9/15/18 [client #1] was involved in a fight in the backyard...came in to the facility with a bloody nose and staff queried him as to what had happened...told staff he was confronted by [unknown person] whom had attacked him out back...informed staff that he was going to call authorities and did so...paramedics arrived along with the authorities and took [client #1] to the hospital to check his nose and pinky finger...staff picked [client #1] up from the hospital and found that the incident resulted in a fractured finger and nose..."	V 291		

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V 291	Continued From page 39 Review on 3/20/19 of a hospital discharge dated 9/15/18 for client #1 revealed: - "...presenting to the emergency room via emergency services status post assault from some guy that came through the woods to his group home...patient states he was punched several times with a fist in posterior head and left orbit region...admits to left 5th digit pain, headache, and blurry vision...Findings: acute-appearing at least slightly displaced or depressed left nasal bone fracture present...fifth proximal phalanx fracture (apply aluminum finger splint). Discharge information: assault; contusion; finger fracture; nasal fracture...follow up within 1 to 2 days with Ear Nose & Throat (ENT) physician (name & number given) & orthopedic physician (name & number given)" Review on 3/20/19 of a physician summary dated 1/9/19 for client #1 revealed: - "he has complaints of left finger pain. He states he was in a fight four weeks...reason for referral: left fifth finger pain, deformity of finger of left hand..." Review on 3/21/19 of an orthopedic summary dated 3/11/19 for client #1 reported: - "...comes in today for an evaluation of his left fifth finger. He states he was playing basketball back on 9/15/18 when he jammed his finger into the ball. He went to hospital where x-rays were taken and he was placed into a splint which he wore off and on for 3-4 days then took it off completely and has not been anywhere else for follow up treatment until now...unfortunately since he took his splint off only 3 days after the fracture and it has healed with a slight malunion he has significant extension lag and inability to flex the proximal interphalangeal joint normally...since his	V 291		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BTW HOME CARE SERVICES II LLC	601 COLBY COURT ROCKY MOUNT, NC 27803

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V 291	Continued From page 40	V 291		

fracture has healed and there is no mal-rotation no attention needs to be directed towards his mal-united proximal phalanx fracture...follow up in 6 weeks"

During interview on 3/20/19 client #1 reported:
- he recalled the 9/15/18 incident...he was in the backyard...some guys came from the woods and argued with him and hit him...he knew the guys because he seen them at the basketball court...the guys were upset because they did not like a white boy to beat them in basketball...he (client #1) had scratches beside his nose...he could not breathe out his nose...he thought his nose was broke...but found out later it was due to the blood and swelling...Licensee #2 took him to the hospital

During interview on 3/20/19 Licensee #2 reported:
- client #1 refused to go to the hospital the day of the fight 9/15/18
- the next day client #1 complained his nose hurt and he (Licensee #2) transported him to the hospital
- client #1 had an annual physical in January 2019 and complained of finger pain
- he was referred to an orthopedic doctor at that time
- client #1 went to the orthopedic doctor last week

During continued interview on 3/27/19 Licensee #2 reported:
- he recalled the 9/15/18 incident
- he recalled client #1 came in the facility with a nose bleed
- client #1 did not go to the hospital that day (9/15/18) because he refused
- client #1 went in the facility and cleaned himself up

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V 291	Continued From page 41 - 2 days later client #1 requested to go to the hospital because his finger hurt...and he took him - he was not aware of a nasal fracture...his nose did not look crooked on the day of the incident...he had a nose bleed - Licensee #2 later reviewed the 9/15/18 incident report he wrote...he recalled he did not take client #1 to the hospital at any time...emergency services took client #1 to the hospital on 9/15/18 and he picked client #1 up from the hospital...he does not recall client #1 with any fractures - client #1 was discharged from the hospital with a splint on his finger - client #1 had the medication prescriptions in his hand with no other paper work - he thought client #1 threw the discharge information into the trash can because he disliked doctors - he was not aware client #1 was referred to an ENT or orthopedic physician during the 9/15/18 visit - he met with the orthopedic doctor during the 3/11/19 visit - the doctor said client #1's finger could not be corrected because the injury happened so long ago - client #1 said he injured the same finger years ago and it was reinjured during the 9/15/18 fight - the orthopedic doctor did not request a follow up visit - later during the day Licensee #1 reported a follow up visit had been scheduled with the orthopedic doctor [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 291		

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V 513	27E .0101 Client Rights - Least Restictive Alternative 10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE (a) Each facility shall provide services/supports that promote a safe and respectful environment. These include: (1) using the least restrictive and most appropriate settings and methods; (2) promoting coping and engagement skills that are alternatives to injurious behavior to self or others; (3) providing choices of activities meaningful to the clients served/supported; and (4) sharing of control over decisions with the client/legally responsible person and staff. (b) The use of a restrictive intervention procedure designed to reduce a behavior shall always be accompanied by actions designed to insure dignity and respect during and after the intervention. These include: (1) using the intervention as a last resort; and (2) employing the intervention by people trained in its use. This Rule is not met as evidenced by: Based on observation and interview the facility failed to promote a least restrictive environment for four of four clients (#1, #2, #3 & #4). The findings are: Observation in the kitchen on 3/11/19 at 3:51pm revealed the following: - a locked refrigerator that contained a variety of foods	V 513		

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V 513	Continued From page 43 - an unlocked refrigerator that contained a half bag of frozen sausage biscuits and a pack of frozen tenderloins - on 3/18/19 at 1:59pm locks were removed from the refrigerator During interview on 3/11/19 client #1 reported: - the refrigerator without the lock was the client's refrigerator - the clients were broke and not able to put any food in their refrigerator - clients can buy their own snacks and drinks to go in their refrigerator - the clients put their names on the items they purchased During interview on 3/11/19 client #3 reported: - clients stole food out of the staff refrigerator that's why it was locked During interview on 3/14/19 the Qualified Professional reported: - she visited the facility 1- 2 times on a monthly basis - she has not seen a lock on the refrigerator - she would be concerned if the refrigerator was locked - clients have a right to go in the refrigerator During interview on 3/18/19 Licensee #2 reported: - locks have been on the refrigerator for the last year - the clients were able to get food when asked out of the locked refrigerator - locks were placed on the refrigerator because clients ate raw food out of the refrigerator - a pack of raw bacon was missing from the refrigerator one time - the unlocked refrigerator belonged to the clients	V 513		

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V 513	Continued From page 44 [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 513		
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 observation and interview the governing body failed to ensure the facility was kept in a safe, clean, attractive and orderly manner. The findings are Review on 3/11/19 of a 2012 North Carolina Building Code 425.2 Residential care homes revealed: "homes keeping no more than six adults...who are able to respond and evacuate the facility without assistance...425.2.4 unvented fuel-fired heaters and portable electric heaters shall not be used..." Observations on 3/11/19 revealed the following: - 3:58pm stained carpet throughout the living room area...a blue stained couch with sinking pillow cushions...a stained brown futon - 4:02pm - client #3's carpet had black stains - 4:10pm - an unplugged space heater and pedestal fan in client #1 & #2's bedroom	V 736		

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V 736	Continued From page 45 During interview on 3/11/19 client #1 reported: - his girlfriend gave him the space heater - he still used the space heater because he liked the mixture of the heat and air from the pedestal fan when he slept During interview on 3/11/19 & 3/18/19 Licensee #2 reported: - he planned to replace the carpet this week - he requested the surveyor last year to cite the carpet because he thought the landlord would replace the carpet but he didn't - he planned to replace the furniture in the facility - the facility's heating unit went out for 2 days in December 2018 - he put space heaters throughout the facility during this time - the space heaters used in December 2018 had been removed from the facility - client #1's girlfriend gave him the space heater after the heating unit was replaced - he was aware the space heater was still in client #1 & #2's bedroom - client #1 liked to feel the mixture of the heat and air from the pedestal fan - as of 3/18/19 the space heater has been removed from the facility	V 736		
V 784	27G .0304(d)(12) Therapeutic and Habilitative Areas 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules,	V 784		

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V 784	Continued From page 46 residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements: (12) The area in which therapeutic and habilitative activities are routinely conducted shall be separate from sleeping area(s). This Rule is not met as evidenced by: Based on interview the governing body failed to ensure therapeutic and habilitative activities were conducted separately from sleeping areas. The findings are: During interview on 3/11/19 client #1 reported: - if Licensee #2 needed a break during the day, he slept on the blue couch in the living room - Licensee #1 or Chief Executive Officer would relieve him while he slept - Licensee #2 slept on the blue couch during the night During interview on 3/20/19 Licensee #2 reported: - he was the only staff that worked at the facility - due to funding he was not able to hire additional staff - he was awake staff during the night - he may nap 30 minutes to 1 hour during the night on the blue couch in the living room area [This deficiency is crossed referenced into 10A NCAC 27G .5601 SCOPE (V289) for a Type A1 rule violation and must be corrected within 23 days.]	V 784		