

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601328	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/24/2019
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NAME OF PROVIDER OR SUPPLIER HOPEWAY	STREET ADDRESS, CITY, STATE, ZIP CODE 1717 SHARON ROAD WEST CHARLOTTE, NC 28210
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V 000	INITIAL COMMENTS An annual, complaint and follow-up survey was completed on 4/24/19. The complaints were substantiated (intake #NC00150389, #NC00150397 and #NC149602). A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.	V 000		
V 512	27D .0304 Client Rights - Harm, Abuse, Neglect 10A NCAC 27D .0304 PROTECTION FROM HARM, ABUSE, NEGLECT OR EXPLOITATION Employees shall protect clients from harm, abuse, neglect and exploitation in accordance with G.S. 122C-66. Employees shall not subject a client to any sort of abuse or neglect, as defined in 10A NCAC 27C .0102 of this Chapter. Goods or services shall not be sold to or purchased from a client except through established governing body policy. (d) Employees shall use only that degree of force necessary to repel or secure a violent and aggressive client and which is permitted by governing body policy. The degree of force that is necessary depends upon the individual characteristics of the client (such as age, size and physical and mental health) and the degree of aggressiveness displayed by the client. Use of intervention procedures shall be compliance with Subchapter 10A NCAC 27E of this Chapter. (e) Any violation by an employee of Paragraphs (a) through (d) of this Rule shall be grounds for dismissal of the employee.	V 512	The following measures were put in place to CORRECT the deficient area of practice. 1) Terminate A) Staff #1 B) Staff #2 C) Former Staff #3 Termination was approved by Chief Executive Officer & Chief Medical Officer and finalized by Director of Human Resources. 2) Conduct mandatory all staff training to re-review and re-educate regarding the following. A) Policies & Procedures reviewed CTS – 035: Keeping Clients Safe from Abuse, Neglect, and/or Exploitation; EC – 002: Incident Reporting and Management; HR – 002: Code of Conduct; HR – 014: Social Media and Networking; LD – 003: Investigating and Reporting of Abuse and Exploitation; and RI – 004: Client Rights.	1) A) 05/22/19 B) 05/22/19 C) 11/26/18 2) 05/01/19

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Alyson R. Mazzei* CEO
TITLE: *Chief Medical Officer*
This Rule is not met as evidenced by: *Alyson R. Mazzei, D.O.*
(X6) DATE: *5/29/19*

MAY 31 2019

Lic. & Cert. Section

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V 512	<p>Continued From page 1</p> <p>Based on record reviews and interviews, 2 of 2 staff (Staff #1 and #2) and 1 of 1 former staff (FS #3) subjected clients to exploitation, affecting 2 of 2 former clients (FC #1 and #2). The findings are:</p> <p>Finding #1</p> <p>Review on 3/19/19 of FC #1's record revealed: - Admission date of 10/22/18; Discharge date of 11/30/18 - Diagnoses of Depression, Generalized Anxiety Disorder and Borderline Traits - Presented with post-partum psychosis, depression, anxiety and suicidal ideation</p> <p>Review on 3/19/19 of FC #2's record revealed: - Admission date of 10/30/18; Discharge date of 11/28/18 - Diagnoses of Major Depressive Disorder and Borderline Personality Disorder</p> <p>Review on 3/19/19 of Staff #1's record revealed: - Hire date of 11/29/16 - Behavioral Health Technician II</p> <p>Review on 3/19/19 of Staff #2's record revealed: - Hire date of April 2018 - Behavioral Health Technician</p> <p>Review on 3/19/19 of Former Staff (FS) #3's record revealed: - Hire date of 11/5/18; Termination date of 11/28/18 - Behavioral Health Technician</p> <p>Interview on 3/28/19 with FC #1 revealed: - She had been admitted to the facility in October and left at the end of November. - During her time there, she had an inappropriate</p>	V 512	<p>B) Employee Handbook:</p> <p>i) Pages 15 -17: Internet Access, Right to Monitor, Responsibilities and Obligations, Email, Confidentiality of Electronic Mail, Social Media and Networking, Telephones, Fax and Copy Machines</p> <p>C) 10A NCAC 27D .0304 Protection from Harm, Abuse, Neglect, and Exploitation.</p> <p>This training was conducted by Chief Executive Officer & Chief Medical Officer; Chief Compliance Officer; and Director of Human Resources.</p> <p>3) Conduct mandatory all residential staff training to re-review and re-educate regarding the following.</p> <p>A) HopeWay's Mission, Vision, and Values</p> <p>B) Expectations of staff members' adherence to HopeWay policies, procedures, and practices, as well as to 10A NCAC 27D .0304.</p> <p>C) Consequences, up to and including termination, for staff members who fail to adhere to HopeWay policies, procedures, and practices, as well as failure to adhere to 10A NCAC 27D .0304.</p> <p>This training was conducted by Chief Compliance Officer; Director of Medical Services; Staff Nurse; and Director of Human Resources.</p>	3) 05/02/19

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V 512	<p>Continued From page 2</p> <p>relationship with Staff #1. There was heavy flirting in the beginning and then it became very inappropriate between the two of them. "It wasn't just him, it was me too. Now looking back, I feel very taken advantage of."</p> <p>- There was a lot of touching that was sexual in nature. "He would come into my room by making up an excuse such as needing to fix my alarm clock. He would give me hugs a lot and get aroused."</p> <p>- On one occasion (date unknown), Staff #1 took FC #1's hand and rubbed it on his private part. This happened in FC #1's bedroom.</p> <p>- On another occasion (date unknown), Staff #1 picked up FC #1 and slid her down his body with her legs wrapped around him. FC #1 kissed Staff #1 on his neck during this time. This happened in FC #1's bedroom.</p> <p>- There was another occasion (date unknown) that while FC #1 was doing her laundry, Staff #1 gestured at his penis and stated, "look what you do to me." FC #1 touched his penis. "The first time, he put my hand on his private. This time, I touched his private on my own."</p> <p>- Staff #1 touched FC #1 on her buttocks. Most of the inappropriate touching and interactions took place in FC #1's room and the laundry room.</p> <p>- Staff #1 asked FC #1 for her phone number and memorized it so he didn't have to save it in his phone. He never contacted FC #1 by phone.</p> <p>- Staff #1 looked on FC #1's phone and saw pictures of her in her bra and underwear that she had sent to her husband.</p> <p>- Staff #1 had FC #1 listen to songs that talked about wanting her or that was about sex</p> <p>- FC #1 had been in a "very very low dark place" upon arrival to the facility. She had just had a baby and was suffering from post-partum depression and anxiety. "If I didn't have my children, I wouldn't be here!" FC #1 was suicidal</p>	V 512	<p>4) Conduct focused review of P&Ps to ensure highest protections for our clients and HopeWay.</p> <p>A) Policies & Procedures to be reviewed included CTS – 035: Keeping Clients Safe from Abuse, Neglect, and/or Exploitation; EC – 002: Incident Reporting and Management; HR – 002: Code of Conduct; HR – 014: Social Media and Networking; LD – 003: Investigating and Reporting of Abuse and Exploitation; and RI – 004: Client Rights.</p> <p>This P&P review was conducted by Chief Executive Officer & Chief Medical Officer; Chief Compliance Officer; and Chief Operations Officer.</p> <p>The following measures will be put in place to PREVENT the problem from occurring again.</p> <p>5) Implement quarterly review of P&P, state statute, expectations, and consequences at department staff meetings to provide continued education and training to all staff. The review will include the discussion and review of the following.</p> <p>A) Policies & Procedures reviewed CTS – 035: Keeping Clients Safe from Abuse, Neglect, and/or Exploitation; EC – 002: Incident Reporting and Management; HR – 002: Code of Conduct; HR – 014: Social Media and Networking; LD – 003: Investigating and Reporting of Abuse and Exploitation; and RI – 004: Client Rights.</p>	<p>4) 05/14/19</p> <p>5) 07/01/19 (Will begin in Q3 and be completed once per quarter.)</p>

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V 512	<p>Continued From page 3</p> <p>and had to wait 2 weeks to get admitted into the facility. "I had to be with my mom or husband until I could get some help." - "This inappropriate relationship distracted my treatment there ...I feel completely taken advantage of." - There was another client (FC #3) that also had something going on with Staff #1. "During [Alcoholics Anonymous] meeting, she showed up pissed that [Staff #1] wasn't there. She gave me a note to give to [Staff #1]. The note said "What happened to you "being there"? Hope you know what this means. If not, f**k it." She drew a heart and signed her name. She also came up to HopeWay at 4am looking for him after she was already discharged. [FC #3] also gave another client a note to give to Staff #1. We were in the game room sitting at the table when the client walked in and gave Staff #1 the note and said here, [FC #3] wanted me to give this to you. [Staff #1] read it and put it in his pocket." - "The staff know what they are doing and Staff #1 was aware of the rules." It was a nice facility. The nurses and doctors were pretty good. It was only a problem with the behavioral technicians ..."some of them have no business being in residential!"</p> <p>Attempted Interview with FC #3 on 3/28/19 revealed: - "I don't feel comfortable talking about this." - FC #3 hung up</p> <p>Telephone call on 3/29/19 from FC #3 revealed: - She wanted to know if she was the only female involved and being asked about Staff #1</p> <p>Attempted Interview on 3/28/19 and 4/16/19 with Staff #1 was unsuccessful. Staff #1 would not return surveyor's telephone call. On 4/4/19 and</p>	V 512	<p>B) Employee Handbook:</p> <p>i) Pages 15 -17: Internet Access, Right to Monitor, Responsibilities and Obligations, Email, Confidentiality of Electronic Mail, Social Media and Networking, Telephones, Fax and Copy Machines</p> <p>C) 10A NCAC 27D .0304 Protection from Harm, Abuse, Neglect, and Exploitation.</p> <p>D) Consequences, up to and including termination, for staff members who fail to adhere to HopeWay policies, procedures, and practices, as well as failure to adhere to 10A NCAC 27D .0304.</p> <p>Quarterly reviews will be conducted by Chief Operations Officers for the Operations and Outreach Specialists departments; Director of Admissions for the Admissions department; Director of Clinical Services for Clinical department; Chief Finance Officer for the Finance department; Chief Compliance Officer for the Medical Records department; Director of Medical Services for the Medical Staff department; Director of Nursing for the Nursing Staff/Residential department; Chief Advancement Officer for the Development & Marketing department; and by Chief Executive Officer/Chief Medical Officer for Senior Leadership Team.</p>	

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V 512	<p>Continued From page 4</p> <p>4/17/19, dhsr surveyor received telephone call and voicemail from Staff #1's attorney. The attorney left a message saying that she wanted to talk with me regarding surveyor needing to interview Staff #1 and wanted to get more details as to what the investigation was about and questions surveyor had. DHSR surveyor returned call and left a message with the office that dhsr surveyor could not discuss investigation with attorney or communicate questions through attorney for Staff #1 but that Staff #1 was welcomed to give dhsr surveyor a call back for an interview.</p> <p>Finding #2</p> <p>Interview on 3/28/19 with FC #1 revealed: - On November 29, 2018 "[Staff #2] came to work "super high" on marijuana. She came into my bedroom and told me about it. She said she was high. She said she didn't have any money and asked me if I could order her something to eat. So I ordered her some food online through [online delivery company]. We were supposed to turn in our cellphones at 8pm. But since I ordered her some food, she let me keep my phone all night and I had it until I left (was discharging the next day). She signed my phone back in so they would think it was turned back in." -FC #1 and Staff #2 had exchanged phone numbers and Staff #2 told her not to tell anyone because she would get fired. - After FC #1's discharge, Staff #2 had reached out to her a few times through text message asking how FC #1 was doing. Then, Staff #2 texted FC #1 on 2/16/19 and told FC #1 that her</p>	V 512	<p>Monitoring of this measure put in place to prevent the problem from occurring again will be conducted by Director of Human Resources. This monitoring will occur quarterly and include the auditing of staff meetings agenda and sign in sheets to ensure compliance with quarterly reviews (to provide continued education and training to all staff) at department staff meetings.</p> <p>6) Install additional cameras in town hall, residential clients' laundry room, and residential staff breakroom; and implement random once weekly review of multiple cameras for various day and night hours.</p> <p>Chief Operations Officer will continue to review cameras upon request and when there is an incident, and will begin random once weekly review of multiple cameras for various day and night hours.</p> <p>Monitoring of this measure put in place to prevent the problem from occurring again will be conducted by Chief Operations Officer. This monitoring will occur upon request, when there is an incident, and once weekly at random and will be documented on a camera review log.</p>	6) 08/01/19

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V 512	<p>Continued From page 5</p> <p>birthday was coming up soon but she couldn't go out to celebrate because someone had stolen her money. FC #1 asked her if she needed money. Staff #2 asked for FC #1 to send \$150 but said if she didn't have that she could send \$125. FC #1 asked Staff #2 how to get the money to her and Staff #2 told her she could western union it or cash app it. FC #1 told her ok and that she would run it by her husband. Staff #2 then said no, she didn't want FC #1's husband involved and said not to worry about the money. Staff #2 sent her a text message on 2/17/19 but FC #1 didn't respond.</p> <p>Interview on 4/1/19 with Staff #2 revealed:</p> <ul style="list-style-type: none"> - She worked in the facility for approximately 1 year as a Behavioral Health Technician. She worked 3rd shift. - She never went into work high - No clients had ever purchased her any food and she never asked any clients for money - "It is against rule policy. I have seen people let go due to giving clients their phone numbers." <p>Review on 3/28/19 of FC #1's food order receipt revealed:</p> <ul style="list-style-type: none"> - a food order was purchased online on 11/29/18 at approximately 8:42pm for delivery <p>Review on 4/1/19 of the facility's staff schedule revealed:</p> <ul style="list-style-type: none"> - Staff #2 worked at the facility on 11/29/19 7pm-7:30am <p>Review on 3/28/19 of screenshots of text messages between FC #1 and Staff #2 revealed:</p> <ul style="list-style-type: none"> - 1/31/19- general conversation about how FC #1 is doing, how her treatment in Intensive Outpatient Therapy is going, and about family and Staff #2's possible birthday plans. 	V 512	<p>7) Recruit strong leadership for residential unit to support and strengthen current leadership and staff mentoring. Restructure residential staffing to have Charge RN per shift to increase staff interaction with nurse leader, which would (1) increase residential staff oversight, (2) lead to quicker problem discovery, reporting, and resolution, and (3) increase nurse leader availability and provide another route for staff to disclose concerns.</p> <p>Monitoring of this measure put in place to prevent the problem from occurring again will be conducted by Charge RN and Director of Nursing. This monitoring will occur daily.</p> <p>Additional monitoring of this measure put in place to prevent the problem from occurring again will be conducted by Director of Human Resources. This monitoring will occur annually during employee performance reviews.</p>	7) 09/01/19

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V 512	<p>Continued From page 6</p> <p>- 2/16/19- text messages: Staff #2- "Hey friend wyd" FC #1- "Hey girl hey!!!! How are you doing?" Staff #2- "I'm good hru" FC #1- "I was surprised to see your text, I was thinking about you earlier (and [Staff #1] too of course). I'm good. Missing you guys. Your bday is the 20th right?" Staff #2- "Awww yea girl wish u were here to celebrate it with me I'm so sad someone stole my money and now I can't do shit" FC #1- "Oh no! That really sucks! Do you want me to send you some money? How much do you need girl???" Staff #2- "Awww are you serious if you can send me 150 if not that 125 I'll give it back Friday" FC #1- "No problem. How do I get it to you?" Staff #2- "Do u have cash app. If you don't it's ok western union is the only next thing" FC #1- "Ok. I'll run it by my husband but I'm sure he'll be fine with it." Staff #2- "O no I don't want him involved Its ok but thank you anyways" - 2/17/19- staff #2- "Hey girl wyd"</p> <p>Review on 4/1/19 of a screenshot of staff #2 phone number from FC #1's phone revealed: - It is the same phone number the facility has on record for Staff #2</p> <p>Finding #3</p> <p>Review on 3/20/19 of the facility's incident reports revealed: - 11/19/18 Incident: - an allegation of exploitation was made involving FC #2 and FS #3 - "Per consumer report, consumer and staff</p>	V 512		
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V 512	<p>Continued From page 7</p> <p>member shared indecent photographs with one another via social media (specifically SnapChat)."</p> <ul style="list-style-type: none"> - "Per consumer report, consumer and staff member exchanged accounts, which led to an exchange of nuse pictures. Supervisor was unable to validate proof of alleged actions as reported by consumer." - "As a result of this incident, the newly employed staff member was instructed to work only with make clients." - 11/21/18 Incident: <ul style="list-style-type: none"> - "Per consumer report, a group of consumers were listening to different artists in the milieu, when staff member leaned in and advised the consumer to enter his phone number into her phone." <p>Attempted interview on 4/18/19 with FC #2 was unsuccessful due to no answer and no return call.</p> <p>Interview on 3/28/19 with FC #1 revealed:</p> <ul style="list-style-type: none"> - FS #3 was new. "We (FC #1 and FS #3) were talking about music and he said something about reggae. I asked him if he had heard a certain artist and song. He said no, not sure. I said when I get my phone I will let you hear it. He said ok. Later, [FS #3] came up and asked if I was going to let him hear the song. He came up and said put my number in your phone. I put it in my phone. He asked me to text him that night but I didn't." - FC #1 reported what happened to staff and administration. FS #3 was fired. <p>Interview on 4/18/19 with FS #1 revealed:</p> <ul style="list-style-type: none"> - He had been working in the facility for about 2-3 weeks and was still in training. He was recently terminated. 	V 512		

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V 512	<p>Continued From page 8</p> <ul style="list-style-type: none"> - FC #2 reached out to him on social media. He wasn't sure how she found him ..."she looked me up I think." - FC #2 sent FS #3 a friend request and he accepted it unknowingly. "I didn't know it was a client." - FC #2 sent FS #3 a photo. He sent her a photo back. "The photo wasn't explicit ...it was a regular picture of me." - He thought about what took place and realized he shouldn't have and then deleted the app and blocked FC #2. He went in to work and notified administration. <p>Review on 4/24/19 of the Plan of Protection dated 4/24/19 submitted by the CEO/Chief Medical Officer revealed: "What immediate action will the facility take to ensure the safety of the consumers in your care?"</p> <ol style="list-style-type: none"> 1) Terminate [Staff #1] (currently on administrative leave since 03.14.19) status post receipt and review of DHSR report of deficiencies/findings. 2) Terminate [Staff #2] (currently on administrative leave since 04.19.19) status post receipt and review of DHSR report of deficiencies/findings. 3) Schedule a mandatory training with all staff to re-review Policies and Procedures (P&Ps) related to proper boundaries with all clients. 4) Schedule a mandatory training with the residential staff to re-review mission, values, expectations and consequences for not adhering to HopeWay P&Ps. 5) Notify the Board of Directors of report and Plan of Protection. 6) Recruit strong leadership for residential unit. 7) Explore hiring a "secret shopper" to come in 	V 512		

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V 512	<p>Continued From page 9</p> <p>and explore potential vulnerabilities.</p> <p>8) Focused review of P&Ps to ensure highest protections for our clients and HopeWay.</p> <p>9) Implement quarterly review of P&P, state statue, expectations, and consequences at department staff meetings.</p> <p>10) Implement quarterly auditing to ensure compliance with mandatory in-service attendance and quarterly reviews at department staff meetings.</p> <p>Describe your plans to make sure the above happens.</p> <p>1) [Staff #1] will remain on administrative leave until he is terminated. Termination will occur, in consultation with legal counsel, status post receipt and review of DHSR report of deficiencies/findings.</p> <p>a. Estimated accountability date: 05/10/2019</p> <p>i. Estimated accountability date maybe altered dependent upon receipt and review of DHSR report of deficiencies/findings.</p> <p>2) [Staff #2] will remain on administrative leave until she is terminated. Termination will occur, in consultation with legal counsel, status post receipt and review of DHSR report of deficiencies/findings.</p> <p>a. Estimated accountability date: 05/10/2019</p> <p>i. Estimated accountability date maybe altered dependent upon receipt and review of DHSR report of deficiencies/findings.</p> <p>3) Mandatory training with all staff</p> <p>a. Scheduled on:</p> <p>i. 04/29/2019 @ 1600</p> <p>ii. 04/29/2019 @ 1830</p> <p>iii. 04/30/2019 @ 1200</p> <p>iv. 04/30/2019 @ 1230</p> <p>v. 05/01/2019 @ 1400</p> <p>b. To be conducted by:</p>	V 512		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601328	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/24/2019
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NAME OF PROVIDER OR SUPPLIER HOPEWAY	STREET ADDRESS, CITY, STATE, ZIP CODE 1717 SHARON ROAD WEST CHARLOTTE, NC 28210
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V 512	<p>Continued From page 10</p> <ul style="list-style-type: none"> i. DO, MRO, FAPA - Chief Executive Officer & Chief Medical Officer ii. MSN, APRN, FNP-C, CPCO - Chief Compliance Officer iii. Director of Human Resources c. Topics to be discussed/reviewed: <ul style="list-style-type: none"> i. Policies & Procedures: <ul style="list-style-type: none"> 1. CTS - 035: Keeping Clients Safe from Abuse, Neglect, and/or Exploitation 2. EC - 002: Incident Reporting and Management 3. HR - 002: Code of Conduct 4. HR - 014: Social Media and Networking 5. LD - 003: Investigating and Reporting of Abuse and Exploitation 6. RI - 004: Client Rights <ul style="list-style-type: none"> ii. Employee Handbook: <ul style="list-style-type: none"> 1. Pages 15 -17: Internet Access, Right to Monitor, Responsibilities and Obligations, Email, Confidentiality of Electronic Mail, Social Media and Networking, Telephones, Fax and Copy Machines iii. 10A NCAC 27D .0304 Protection from Harm, Abuse, Neglect, and Exploitation 4) Schedule a mandatory training with the residential staff to re-review mission, values, expectations and consequences for not adhering to HopeWay P&Ps. <ul style="list-style-type: none"> a. Scheduled on: <ul style="list-style-type: none"> i. 05/01/2019 @ 0700 ii. 05/01/2019 @ 1830 iii. 05/02/2019 @ 0700 iv. 05/02/2019 @ 1200 b. To be conducted by: <ul style="list-style-type: none"> i. DO, MRO, FAPA - Chief Executive Officer & Chief Medical Officer ii. MSN, APRN, FNP-C, CPCO - Chief Compliance Officer iii. MD - Director of Medical Services iv. PhD, RN - Director of Nursing 	V 512		

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V 512	<p>Continued From page 11</p> <p>v. Director of Human Resources</p> <p>c. Topics to be discussed/reviewed:</p> <p>i. HopeWay's Mission, Vision, and Values</p> <p>ii. Expectations of staff members' adherence to HopeWay policies, procedures, and practices, as well as to 10A NCAC 27D .0304.</p> <p>iii. Consequences, up to and including termination, for staff members who fail to adhere to HopeWay policies, procedures, and practices, as well as failure to adhere to 10A NCAC 27D .0304.</p> <p>5) Notify the Board of Directors of report and Plan of Protection.</p> <p>a. Notification made by DO, MRO, FAPA - Chief Executive Officer & Chief Medical Officer on 04/18/2019.</p> <p>6) Recruit strong leadership for residential unit to support and strengthen current leadership and staff mentoring.</p> <p>a. Estimated accountability date: 90 days, if not sooner depending on recruitment</p> <p>i. Estimated accountability date maybe altered dependent upon receipt and review of DHSR report of deficiencies/findings.</p> <p>7) Explore hiring a "secret shopper" to come in and explore potential vulnerabilities, and evaluate HopeWay policies, procedures, and practices, and explore opportunities for improvement.</p> <p>a. Estimated accountability date: w/in 120 days</p> <p>i. Estimated accountability date maybe altered dependent upon receipt and review of DHSR report of deficiencies/findings.</p> <p>8) Focused review of P&Ps to ensure highest protections for our clients and HopeWay.</p> <p>a. Scheduled on:</p> <p>i. 05/02/2019</p> <p>b. To be conducted by:</p> <p>i. DO, MRO, FAPA - Chief Executive Officer & Chief Medical Officer</p> <p>ii. MSN, APRN, FNP-C, CPCO - Chief</p>	V 512		

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V 512	<p>Continued From page 12</p> <p>Compliance Officer</p> <p>c. Policies & Procedures to be reviewed:</p> <p>i. CTS - 035: Keeping Clients Safe from Abuse, Neglect, and/or Exploitation</p> <p>ii. EC - 002: Incident Reporting and Management</p> <p>iii. HR - 002: Code of Conduct</p> <p>iv. HR - 014: Social Media and Networking</p> <p>v. LD - 003: Investigating and Reporting of Abuse and Exploitation</p> <p>vi. RI - 004: Client Rights</p> <p>9) Implement quarterly review of P&P, state statute, expectations, and consequences at department staff meetings.</p> <p>a. Scheduled:</p> <p>i. Quarterly</p> <p>b. To be conducted by:</p> <p>i. Department leaders</p> <p>c. Topics to be discussed/reviewed:</p> <p>i. Policies & Procedures:</p> <p>1. CTS - 035: Keeping Clients Safe from Abuse, Neglect, and/or Exploitation</p> <p>2. EC - 002: Incident Reporting and Management</p> <p>3. HR - 002: Code of Conduct</p> <p>4. HR - 014: Social Media and Networking</p> <p>5. LD - 003: Investigating and Reporting of Abuse and Exploitation</p> <p>6. RI - 004: Client Rights</p> <p>ii. Employee Handbook:</p> <p>1. Pages 15 -17: Internet Access, Right to Monitor, Responsibilities and Obligations, Email, Confidentiality of Electronic Mail, Social Media and Networking, Telephones, Fax and Copy Machines</p> <p>iii. 10A NCAC 27D .0304 Protection from Harm, Abuse, Neglect, and Exploitation</p> <p>iv. Expectations of staff members' adherence to HopeWay policies, procedures, and practices, as well as to 10A NCAC 27D .0304.</p>	V 512		

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V 512	<p>Continued From page 13</p> <p>v. Consequences, up to and including termination, for staff members who fail to adhere to HopeWay policies, procedures, and practices, as well as failure to adhere to 10A NCAC 27D .0304.</p> <p>10) Implement quarterly auditing to ensure compliance with mandatory in-service attendance and quarterly reviews at department staff meetings.</p> <p>a. Scheduled:</p> <p>i. Quarterly</p> <p>b. To be conducted by:</p> <p>i. Director of Human Resources</p> <p>c. Items to be audited:</p> <p>i. Quarterly staff meetings agenda and sign in sheets</p> <p>1. Agenda to include review of</p> <p>2. Policies & Procedures:</p> <p>a. CTS - 035: Keeping Clients Safe from Abuse, Neglect, and/or Exploitation</p> <p>b. EC - 002: Incident Reporting and Management</p> <p>c. HR - 002: Code of Conduct</p> <p>d. HR - 014: Social Media and Networking</p> <p>e. LD - 003: Investigating and Reporting of Abuse and Exploitation</p> <p>f. RI - 004: Client Rights</p> <p>3. Employee Handbook:</p> <p>a. Pages 15 -17: Internet Access, Right to Monitor, Responsibilities and Obligations, Email, Confidentiality of Electronic Mail, Social Media and Networking, Telephones, Fax and Copy Machines</p> <p>4. 10A NCAC 27D .0304 Protection from Harm, Abuse, Neglect, and Exploitation</p> <p>5. Expectations of staff members' adherence to HopeWay policies, procedures, and practices, as well as to 10A NCAC 27D .0304.</p> <p>6. Consequences, up to and including termination, for staff members who fail to adhere</p>	V 512		

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V 512	<p>Continued From page 14</p> <p>to HopeWay policies, procedures, and practices, as well as failure to adhere to 10A NCAC 27D .0304.</p> <p>ii. Mandatory staff meetings agenda and sign in sheets"</p> <p>Former Client #1 had diagnoses of Depression and Anxiety Disorder and presented to the facility with post-partum depression, anxiety, psychosis and suicidal ideation. Former Client #2 had diagnoses of Major Depressive Disorder and Borderline Personality Disorder. FC #1 was exploited by staff #1 who engaged in inappropriate interactions with FC #1 that were sexual in nature by touching, hugging, lifting up client with legs wrapped around him and placing FC #1's hand on genital. Staff #2 also exploited FC #1 by having her buy food for her, exchanging contact information and attempting to get money from her after FC #1 was discharged. In addition, FS #3 exchanged phone numbers with FC #1, exchanged photos with FC #2 via social media and had conversation outside of FC #2's treatment. The facility subjected these clients to exploitation. This deficiency constitutes a Type A1 rule violation for serious exploitation and must be corrected within 23 days. An administrative penalty of \$3,000 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.</p>	V 512		