

PRINTED: 05/15/2019
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-523	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/14/2019
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NAME OF PROVIDER OR SUPPLIER RALEIGH METHADONE TREATMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 6118 SAINT GILES STREET RALEIGH, NC 27612
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(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 000	INITIAL COMMENTS An Annual Survey was completed 05/14/19. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .3600 Outpatient Opioid Treatment. Facility census: 126	V 000		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented. (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered. (d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (e) Formal refresher training must be completed by each service provider periodically (minimum annually).	V 536	1. NCI training is scheduled for RMTC on June 6, 2019 Charmine Lightner, NCI Instructor (919-389-3283) 2. Mandatory attendance is required for the following staff: RN, LPN, 3 Counselors Program Director, Receptionist. 3. NCI will be a mandatory part of scheduled annual trainings 4. The program director will monitor staff training schedule on a quarterly basis for upcoming training requirements	6/6/19

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 536	<p>Continued From page 1</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <ol style="list-style-type: none"> (1) Documentation shall include: <ol style="list-style-type: none"> (A) who participated in the training and the outcomes (pass/fail); (B) when and where they attended; and (C) instructor's name; (2) The Division of MH/DD/SAS may 	V 536		

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V 536	<p>Continued From page 2</p> <p>review/request this documentation at any time.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p>	V 536		

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V 536	<p>Continued From page 3</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p> <p> </p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 6 of 7 audited staff (Registered Nurse, Licensed Practical Nurse, Counselor #1 & #2, Program Director and Receptionist) had training in Alternative to Restrictive Interventions. The findings are:</p> <p> </p> <p>Record Reviews on 5/14/19 of the agency personnel records revealed:</p> <p>a. Registered Nurse:</p> <ul style="list-style-type: none"> - hired 7/05/16 - no evidence of training in Alternative to 	V 536		
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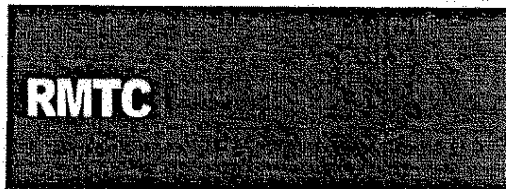
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V 536	<p>Continued From page 4</p> <p>Restrictive Interventions present.</p> <p>b. Licensed Practical Nurse:</p> <ul style="list-style-type: none"> - hired 12/26/17 - no evidence of training in Alternative to Restrictive Interventions present. <p>c. Counselor #1</p> <ul style="list-style-type: none"> - hired 8/13/18 - no evidence of training in Alternative to Restrictive Interventions present. <p>d. Counselor #2:</p> <ul style="list-style-type: none"> - hired- 5/23/17 - no evidence of current training in Alternative to Restrictive Interventions present. <p>e. Program Director:</p> <ul style="list-style-type: none"> - hired- 2/4/19 - no evidence of training in Alternative to Restrictive Interventions present. <p>f. Receptionist:</p> <ul style="list-style-type: none"> - hired- 5/19/09 - no evidence of current training in Alternative to Restrictive Interventions present. <p>During an interview on 5/14/19, the Program Director reported they had arranged to have someone come in to do this training last month but he had to cancel. She would reschedule immediately.</p>	V 536		

Sellati - Raleigh Methadone Treatment Center
6118 St. Giles
Raleigh, North Carolina 27612



Phone: (919) 781-5507
Fax: (919) 882-8117

Fax

To: NC HHS From: RMTC

Fax: 919-715-8078 Date: 5/28/2019

Phone: 919-855-3831 Pages: 4

Re: Plan of Correction cc: Dana Louise Reeves
audit may 14, 2019

- Urgent For Review Please Comment Please Reply Please Recycle

•Comments:

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5/28/2019

Mail - Kathy Moore - Outlook

RMTC - Plan of Correction - 2019-05-28

Kathy Moore

Tue 5/28/2019 10:35 AM

To: Danalouise.Reeves@dhhs.nc.gov <Danalouise.Reeves@dhhs.nc.gov>

Cc: Luly Hawkins <lhawkins@sellatico.com>; Teri Rowe <trowe@sellatico.com>; Gloria Yocum <gyocum@sellatico.com>

📎 1 attachments (112 KB)

raleigh_methadone_treatment_center_plan of correction - 05.28.2019.pdf;

RE: Annual Survey Completed May 14, 2019

Raleigh Methadone Treatment Center

6118 St. Giles Street

Raleigh, NC 27612

MHL# 092-523

email: lhawkins@sellatico.com

Please accept the attached plan of correction cited violation of 10A NCAC 27E .0107 - Training on Alternatives to Restrictive Interventions.

Please let me know if you need any additional information.

Thank you

Kathy Moore, LPC, CSAC

Program Director

RMTC

6118 St Giles St.

Raleigh NC 27612

Phone: 919.781.5507

Fax: 919.882.8117

www.methadonetreatmentcenters.com

FAX COVER SHEET

TO

COMPANY

FAX NUMBER 19197158078

FROM RMTC Group 1

DATE 2019-05-28 10:47:01 EDT

RE RMTC - PLAN OF CORRECTION - 2019-05-28

COVER MESSAGE

*Kathy Moore, LPC, CSAC
Program Director
RMTC
6118 St Giles St.
Raleigh NC 27612
Phone: 919.781.5507
Fax: 919.882.8117
www.methadonetreatmentcenters.com*

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Evidence Based Protective Interventions

EBPI

EVIDENCE BASED PROTECTIVE INTERVENTIONS

PARTICIPANT

This certifies that

FLETCHER BURNETTE

*has fulfilled all the requirements for competency in
the Approved Restrictive Intervention Curriculum*

EBPI INTERVENTIONS - PREVENT

SUBJECT TO ANNUAL CERTIFICATION

PREVENT TRAINER

CERTIFICATION DATE:

06/06/2019

THIS CERTIFICATE EXPIRES ONE YEAR FROM THE CERTIFICATION DATE, AT THE END OF THAT MONTH, AND CANNOT EXCEED May 31, 2020.

Document: 20190522181

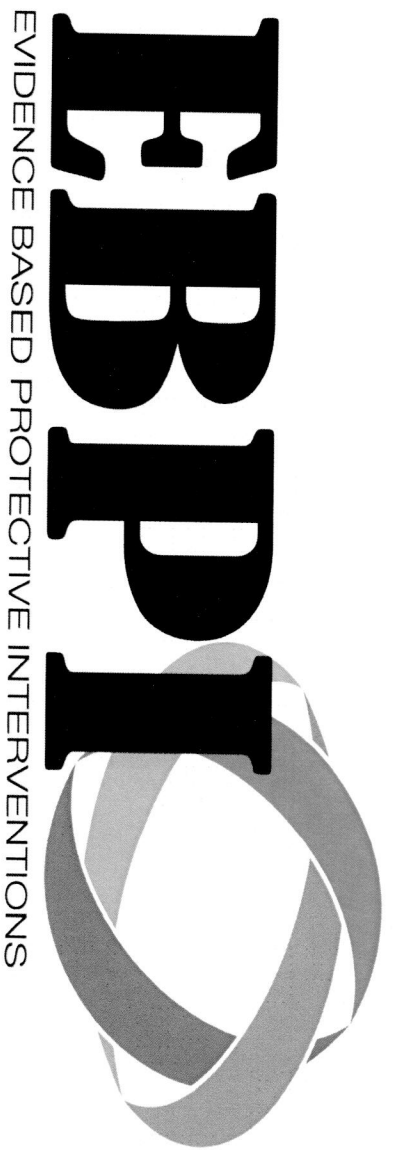
PRINTED: May 22,

2019



Richard McDonald
Richard McDonald CEO

Evidence Based Protective Interventions



Document: 20190522181

PRINTED: May 22,

2019 

PARTICIPANT

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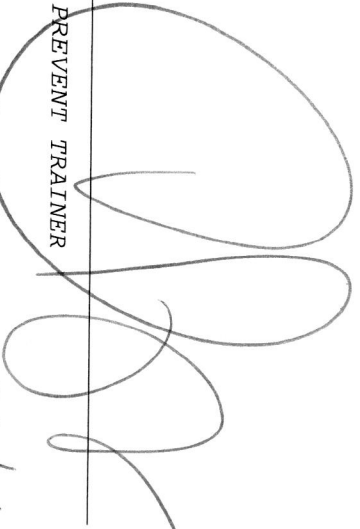
MONIQUE CURTIS

has fulfilled all the requirements for competency in

the Approved Restrictive Intervention Curriculum


EBPI INTERVENTIONS - PREVENT

SUBJECT TO ANNUAL CERTIFICATION


PREVENT TRAINER

CERTIFICATION DATE: 2/27/2019

THIS CERTIFICATE EXPIRES ONE YEAR FROM THE CERTIFICATION DATE, AT THE END OF THAT MONTH, AND CANNOT EXCEED MAY 31, 2020.


Richard McDonald CEO

Evidence Based Protective Interventions

EBPI

EVIDENCE BASED PROTECTIVE INTERVENTIONS

Document: 20190522181

PRINTED : May 22,

2019

PARTICIPANT

This certifies that

JOHN HILL

has fulfilled all the requirements for competency in

the Approved Restrictive Intervention Curriculum

EBPI INTERVENTIONS - PREVENT

SUBJECT TO ANNUAL CERTIFICATION

PREVENT TRAINER

CERTIFICATION DATE:

10/16/2019

Richard McDonald CEO

THIS CERTIFICATE EXPIRES ONE YEAR FROM THE CERTIFICATION DATE, AT THE END OF THAT MONTH, AND CANNOT EXCEED MAY 31, 2020.

Evidence Based Protective Interventions

EBPI

EVIDENCE BASED PROTECTIVE INTERVENTIONS

Document: 20190522181

PRINTED : May 22 ,

2019

PARTICIPANT

This certifies that

MICHELLE JONES-CONYERS

has fulfilled all the requirements for competency in

the Approved Restrictive Intervention Curriculum

EBPI INTERVENTIONS - PREVENT

SUBJECT TO ANNUAL CERTIFICATION

PREVENT TRAINER

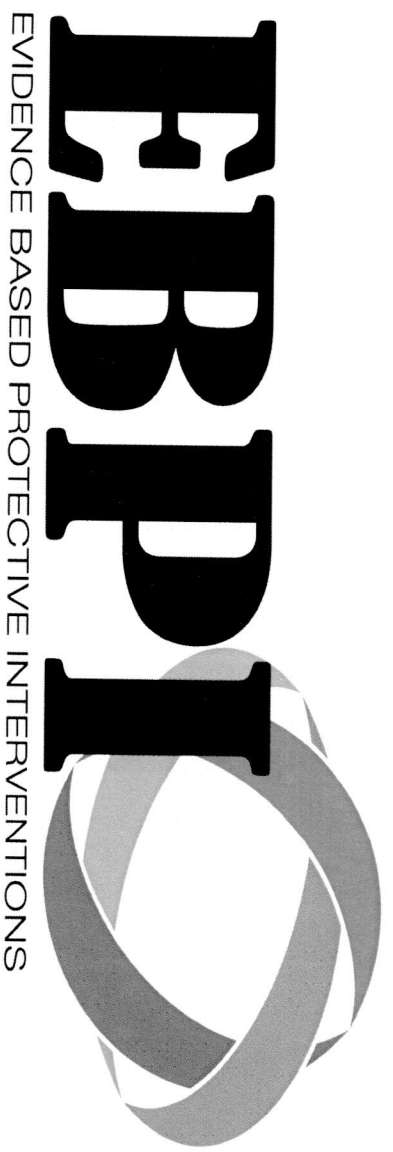
CERTIFICATION DATE:

06/06/2019

Richard McDonald CEO

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Evidence Based Protective Interventions



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PRINTED: May 22,

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PARTICIPANT

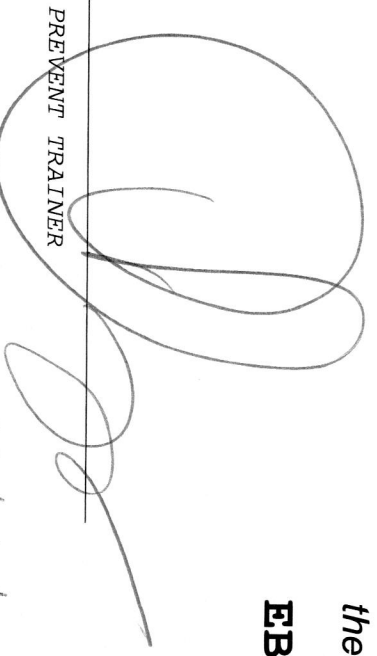
This certifies that

GAYLA LANGFORD

*has fulfilled all the requirements for competency in
the Approved Restrictive Intervention Curriculum*

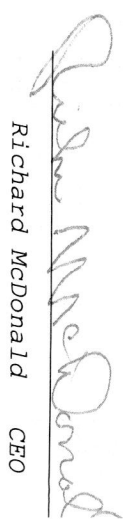
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PREVENT TRAINER


CERTIFICATION DATE: 06/06/2019

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Richard McDonald CEO

Evidence Based Protective Interventions

EBPI

EVIDENCE BASED PROTECTIVE INTERVENTIONS

PARTICIPANT

This certifies that

KATHLEEN MOORE

has fulfilled all the requirements for competency in

the Approved Restrictive Intervention Curriculum

EBPI INTERVENTIONS - PREVENT

SUBJECT TO ANNUAL CERTIFICATION

PREVENT TRAINER

CERTIFICATION DATE:

10/16/2019

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Document: 20190522181

PRINTED : May 22,

10/2019

Richard McDonald
Richard McDonald CEO

Evidence Based Protective Interventions

EBPI

EVIDENCE BASED PROTECTIVE INTERVENTIONS

Document: 20190522181

PRINTED: May 22,

2019

PARTICIPANT

This certifies that

MYNOVIA SALES

has fulfilled all the requirements for competency in

the Approved Restrictive Intervention Curriculum

EBPI INTERVENTIONS - PREVENT

SUBJECT TO ANNUAL CERTIFICATION

PREVENT TRAINER

CERTIFICATION DATE:

06/04/2019

Richard McDonald CEO

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