

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL066-024 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED C 06/20/2019 |
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| NAME OF PROVIDER OR SUPPLIER FAMILY ADVANTAGE LLC | STREET ADDRESS, CITY, STATE, ZIP CODE 3104 HWY 301 N GARYSBURG, NC 27831 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>A complaint survey was completed 6/20/19. Intake #NC00152290 was unsubstantiated. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Level III for Children and Adolescents.</p> | V 000 | | |
| V 132 | <p>G.S. 131E-256(G) HCPR-Notification, Allegations, & Protection</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY</p> <p>(g) Health care facilities shall ensure that the Department is notified of all allegations against health care personnel, including injuries of unknown source, which appear to be related to any act listed in subdivision (a)(1) of this section. (which includes:</p> <p>a. Neglect or abuse of a resident in a healthcare facility or a person to whom home care services as defined by G.S. 131E-136 or hospice services as defined by G.S. 131E-201 are being provided.</p> <p>b. Misappropriation of the property of a resident in a health care facility, as defined in subsection (b) of this section including places where home care services as defined by G.S. 131E-136 or hospice services as defined by G.S. 131E-201 are being provided.</p> <p>c. Misappropriation of the property of a healthcare facility.</p> <p>d. Diversion of drugs belonging to a health care facility or to a patient or client.</p> <p>e. Fraud against a health care facility or against a patient or client for whom the employee is providing services).</p> <p>Facilities must have evidence that all alleged acts are investigated and must make every effort to protect residents from harm while the</p> | V 132 | | |

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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| V 132 | <p>Continued From page 1</p> <p>investigation is in progress. The results of all investigations must be reported to the Department within five working days of the initial notification to the Department.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure the Department was notified of all allegations of abuse against health care personnel for one of one Licensee. The findings are:</p> <p>Review on 6/12/19 of former client (FC#1)'s record revealed:</p> <ul style="list-style-type: none"> - admitted to the facility on 4/15/19 & discharged on 5/28/19 - diagnoses of Post Traumatic Stress Disorder; Attention Deficit Hyperactivity Disorder & Disruptive Mood Dysregulation Disorder <p>Review on 6/13/19 of the facility's investigation dated 5/27/19 faxed to the Division of Health Service Regulation revealed:</p> <ul style="list-style-type: none"> - "On May 27, 2019 therapist spoke with clients and staff questioning Licensee/Qualified Professional (QP) interactions with clients....about reports made of him being aggressive and abusive to clients such as pulling hair, hitting, etc....Counselor listened as staff assured her Licensee/QP had not been aggressive or abusive | V 132 | | |

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| V 132 | <p>Continued From page 2</p> <p>with clients...Licensee/QP had placed [FC#1] on level 1 for inappropriate behaviors of disrespecting self and others and behaviors of aggressive while on a community outing. Clients reported Licensee/QP did not become aggressive or abusive toward any clients...[FC#1] reported he wanted out of the group home to a staff person and stated he was going to act out the next time Licensee/QP worked he was going to act out so he could be discharged...Counselor put in extra time to observe clients and staff interactions..."</p> <p>During interview on 6/13/19 FC#1's Department of Social Service (DSS) guardian reported:</p> <ul style="list-style-type: none"> - she did not have any concerns about abuse of FC#1 <p>During interview on 6/14/19 client #2's DSS guardian reported:</p> <ul style="list-style-type: none"> - she had no concerns about client #2's care - she visited the facility in May 2019 - she witnessed FC#1 having behaviors - the Licensee handled the behaviors appropriately <p>During interview on 6/12/19 the Licensee/QP reported:</p> <ul style="list-style-type: none"> - he was responsible for notifying the Health Care Personnel Registry (HCPR) - he did not notify HCPR | V 132 | | |
| V 298 | <p>27G .1706 Residential Tx. Child/Adol - Operations</p> <p>10A NCAC 27G .1706 OPERATIONS</p> <p>(a) Each facility shall serve no more than a total of 12 children and adolescents.</p> <p>(b) Family members or other legally responsible persons shall be involved in development of plans</p> | V 298 | | |

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| V 298 | <p>Continued From page 3</p> <p>in order to assure a smooth transition to a less restrictive setting.</p> <p>(c) The residential treatment staff secure facility shall coordinate with the local education agency to ensure that the child's educational needs are met as identified in the child's education plan and the treatment plan. Most of the children will be able to attend school; for others, the facility will coordinate services across settings such as alternative learning programs, day treatment, or a job placement.</p> <p>(d) Psychiatric consultation shall be available as needed for each child or adolescent.</p> <p>(e) If an adolescent has his 18th birthday while receiving treatment in the facility, he may remain for six months or until the end of the state fiscal year, whichever is longer.</p> <p>(f) Each child or adolescent shall be entitled to age-appropriate personal belongings unless such entitlement is counter-indicated in the treatment plan.</p> <p>(g) Each facility shall operate 24 hours per day, seven days per week, and each day of the year.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to coordinate services with other agencies for one of two former clients (FC#1). The findings are:</p> <p>Review on 6/12/19 of former client (FC#1)'s record revealed:</p> <ul style="list-style-type: none"> - admitted to the facility on 4/15/19 & discharged on 5/28/19 - diagnoses of Post Traumatic Stress Disorder; | V 298 | | |
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| V 298 | <p>Continued From page 4</p> <p>Attention Deficit Hyperactivity Disorder & Disruptive Mood Dysregulation Disorder</p> <ul style="list-style-type: none"> - email sent to Department of Social Services guardian dated 5/28/19 "please give me a call" (from House Manager (HM)) <p>During interview on 6/14/19 a representative with the police department reported:</p> <ul style="list-style-type: none"> - the police responded to the facility on 5/27/19 - it was in reference to FC#1 being on the train tracks - a police report was not completed due to issue being resolved - FC#1 was hospitalized <p>During interview on 6/13/19 FC#1's DSS guardian reported:</p> <ul style="list-style-type: none"> - client #1 had homicidal ideation's on different occasions while at the facility - they were notified by the hospital and not the facility of the homicidal ideations - the hospital also notified the agency of FC#1's discharge from the facility <p>Attempted telephone calls to the Licensee from 6/17/19 - 6/20/19...</p> <p>During interview on 6/20/19 the HM reported:</p> <ul style="list-style-type: none"> - the Licensee left on 6/17/19 & went out of the country - she was left in charge - FC#1 had several homicidal ideation episodes, however the DSS guardian was made aware - the DSS social worker was also made aware of FC#1's discharge - the DSS social worker did not return phone calls in a timely manner - she would send emails to reach her - after she sent the DSS guardian an email to | V 298 | | |

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| V 298 | Continued From page 5 call her on 5/28/19...the guardian made contact - she informed the DSS guardian the facility planned to discharge FC#1 due to his threats to return to the train tracks once released from the hospital - she did not have verification the DSS guardians were made aware of FC#1's homicidal ideation's - she planned to document future contacts with all guardians | V 298 | | |