

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL047-131	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/19/2019
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NAME OF PROVIDER OR SUPPLIER HOPE GARDENS TREATMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1958 TURNPIKE ROAD RAEFORD, NC 28376
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on June 19, 2019. A deficiency was cited. The complaint was substantiated. (Complaint ID #NC00152590.)</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents.</p>	V 000		
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <p>(a) There shall be no privileging requirements for paraprofessionals.</p> <p>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p> <p>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(e) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision</p>	V 110		

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

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V 110	<p>Continued From page 1</p> <p>plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to assure 1 of 4 audited staff (#1) demonstrated the knowledge, skills and abilities required by the population served affecting 2 of 3 audited clients (#1 & #2.) The findings are:</p> <p>Review on 6/13/19 of Staff #1's personnel file revealed:</p> <ul style="list-style-type: none"> - Hire date of 10/9/15 - Functioned as Team Lead for staff working from 4:00 PM to 12 midnight - Received most recent training in alternatives to restrictive intervention on 1/11/19. - Minutes (signed by Staff #1) documenting he received an update and review on facility policy and procedure in the most recent biweekly supervision dated 5/24/19. The supervision review included: <ul style="list-style-type: none"> a) "Operations - Staff is not allowed to enter a client's room without another staff being present at room door. Only in emergency situations shall two staff be in a client's room at the same time. Strict adherence to this procedure is required." b) "Staff-Client interactions - Staff must always remain professional and present a tone or response that may not incite client behaviors. Always provide a way and a sense of hope. Staff must be self-aware enough to know when to step away from a situation that they cannot emotionally handle. c) CPI (Crisis Prevention) - Verbal De-escalation 	V 110		

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V 110	<p>Continued From page 2</p> <p>techniques</p> <p>d) Clinical Inservice - Behavioral Management plans</p> <p>Review on 6/13/19 of Staff #2's personnel file revealed:</p> <ul style="list-style-type: none"> - Hire date of 3/24/19 - Works as staff from 4:00 PM to 12 midnight <p>Review on 6/13/19 of Staff #3's personnel file revealed:</p> <ul style="list-style-type: none"> - Hire date of 2/24/19 - Works as staff at different times, however, on 6/10/19 worked from 4:00 PM to 12 midnight. <p>Review on 6/13/19 of Staff #4's personnel file revealed:</p> <ul style="list-style-type: none"> - Hire date of 3/24/19 - Works as Staff Lead and worked from 4:00 PM to 12 midnight. <p>Review on 6/13/19 of Client #1's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 8/6/18 - Diagnoses of Disruptive Mood Dysregulation Disorder; Autism Spectrum Disorder per History; Conduct Disorder - Childhood Onset Type; Attention Deficit Hyperactivity Disorder - Combined Presentation; Child Physical Abuse. <p>Review on 6/13/19 of Client #2's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 4/26/19 - Diagnoses of Unspecified Bipolar and Related Disorder; Conduct Disorder - Childhood Onset and Attention Deficit Hyperactivity Disorder, Combined (by History) <p>Review on 6/13/19 of information in the State's complaint tracking system revealed local police received an allegation Staff #1 physically assaulted a client in the facility. The report</p>	V 110		

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V 110	<p>Continued From page 3</p> <p>documented on 6/10/19 around 8:00 PM the following was alleged to have occurred:</p> <ul style="list-style-type: none"> - The staff "slapped" a client "as hard as he could across the face." - Staff #1 "pushed" the client back in his room and had his (Staff #1) hands around his (client's) neck." - Client "exhibited difficulty to speak and was overheard once to have screamed 'Stop choking me.'" <p>Additional review on 6/13/19 of the complaint data revealed Staff #1 was also alleged to have verbally insulted another client and restricted his rights. Review revealed on 6/10/19 around 10:00 PM the following was alleged to have occurred:</p> <ul style="list-style-type: none"> - Staff #1 found Client #2 lying on his mattress on the floor in his room. The client was asleep. - Staff #1 "entered the room, removed the mattress from the floor and forced [Client #2] on the bed frame to sleep all night." - Staff #1 called Client #2 a "f-a-g-ot, n-g-er and "for the past two months told Client #2 as well as all clients - "The only reason you are here is because your parents don't love you." <p>Further review on 6/13/19 of the complainant's data revealed:</p> <ul style="list-style-type: none"> - Staff #2 also alleged another staff in the facility, Staff #3, was witness to the incident. - local police were in possession of a recorded version of the "verbal abuse." - No report of the above allegations of physical and verbal abuse had been made to the facility's management staff. <p>Interview on 6/14/19 with the Executive Director revealed:</p> <ul style="list-style-type: none"> - Facility management had no knowledge of the incidents. They became aware of the above 	V 110		

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V 110	<p>Continued From page 4</p> <p>abuse allegations when local police arrived with the local Child Protection Services representative to investigate the incidents.</p> <ul style="list-style-type: none"> - The reporter making the allegations initially misidentified the client who was alleged to have been slapped and choked by Staff #1. (Clients have same first name but different last names.) - Client #1 was the client involved in the alleged physical abuse incident. - Police informed them Staff #2 was the on-site witness and reported the incident. - Management was currently investigating the allegations. - Staff #1 was immediately suspended. He was also detained by police. - Four staff and the facility nurse were scheduled to work from 4:00 PM to 12 midnight on 6/10/19, the night the incident allegedly occurred. - The facility nurse and therapist met separately with the client Client #1 on 6/13/19 after the facility management became aware of the incident. - Written statements were obtained from all staff and clients present. <p>Client interviews:</p> <ol style="list-style-type: none"> 1. Client #1 was interviewed on 6/14/19. He stated: <ul style="list-style-type: none"> - He asked Staff #1 for some of his food and tried to take the sack containing the food. - Staff #1 pushed him and slapped him on the face. - The slap was not hard and he was not in pain. However, he got a small scratch on his arm when Staff #1 grabbed him to push him back in his room. - He said he did not report it because he did not know if Staff #1 was "playing" when he slapped him across both sides of his face. 2. Client #2 was interviewed on 6/14/19. He 	V 110		

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V 110	<p>Continued From page 5</p> <p>stated:</p> <ul style="list-style-type: none"> - Staff #1 took the mattress out of his room for a few minutes because he had it on the floor. - Staff #1 did not know he was just exercising on the mattress on the floor. - Client #1 was "having a behavior" and Staff #1 tried to calm him down. - He has never seen Staff #1 slap a client. <p>3. One client reported Staff #1 was "playing" with Client #1 and was "rubbing his head" trying to get client to calm down and go back to his room. He stated "[Staff #1] plays with us like that all the time. You can ask any client here."</p> <p>4. Another client reported</p> <p>5. Five clients in the area said they did not see anything.</p> <p>Staff interviews:</p> <p>1. Staff #1:</p> <ul style="list-style-type: none"> - During the survey period from 6/13/19 - 6/19/19, Staff #1 was not available for interview. <p>2. Staff #2:</p> <ul style="list-style-type: none"> - Interviews were attempted on 6/14/19; 6/17/19 and 6/19/19 with Staff #2, the staff identified as making the report. - Message was left and Staff #2 did not return calls. <p>3. Staff #3 was interviewed on 6/17/19. During interview staff reported:</p> <ul style="list-style-type: none"> - She overheard Client #1 yelling at Staff #1. - Client #1 "was instigating, trying to 'eg' him (Staff #1) on. - Client #1 came out of this room "acting like he was going to hit [Staff #1]" - Staff #1 was "blocking him (Client #1) and backing him into his room." He held Client #1's arms when he backed him into the room. - Staff #2 was near her at the other end of the 	V 110		

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V 110	<p>Continued From page 6</p> <p>hallway talking to Client #2.</p> <ul style="list-style-type: none"> - "I got up and ran over so [Staff #1] wouldn't be by himself while he was in the room (Client #1's.) I heard [Staff #1 talking to him, trying to calm him down. I just stood there while [Staff #1] talked to him. - Client #1 held his arm up. The client's arm had a "little scratch on it." Staff #1 told the client "That's what happens when you try to fight staff." - Staff #2 asked her did she that - he said Staff #1 slapped Client #1. "I said no." - She has witnessed staff "horseplaying" with the clients. She said "I don't condone that." - However, she had never seen staff abuse a client or she would have reported it. She said "I'm not trying to get on the registry." <p>Review on 6/15/19 of the facility's internal review of the incident revealed the following staff documentation of the incident:</p> <ol style="list-style-type: none"> 1. Staff #1 reported: <ol style="list-style-type: none"> a. "adamantly" denied all allegations and had not been in "any type of physical altercation with any consumers." b. Confirmed he took Client #2's mattress for "approximately two minutes" because the client was lying on his mattress on the floor instead of the bed. c. He directed Staff #2 to return the mattress to Client #2 and the client "slept on his mattress on the bed for the rest of the night." 2. Staff #2 reported: <ol style="list-style-type: none"> a. He was standing in the unit near Client #1's room. b. He overheard Staff #1 tell Client #1 to return to his room. c. Client #1 refused and Staff #1 got up and slapped and choked him. d. Staff #1 then went to Client #1's room. However, he did not go into the client's room to 	V 110		

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V 110	<p>Continued From page 7</p> <p>check and was therefore unaware of what occurred at that point.</p> <p>2. Staff #4 reported:</p> <p>a. Staff #1 "perform a therapeutic intervention" on Client #1 due to the client's "noncompliant, physically aggressive behavior."</p> <p>b. Staff #1 "escorted" the client to his room from the common area.</p> <p>- Two other staff present in the area reported they did not witness any staff hit, or choke any consumer nor were they aware of any consumer or staff stating such an incident occurred.</p> <p>3. Nurse's report documented:</p> <p>- Client #1 had a "very small scratch on the L (left) arm about the size as big as the tip of a pen(barely noticeable.) A small scratch on L shoulder blade."</p> <p>- Additional small bruises were located on the client's arm, elbow and knee areas, reported by client to have been received while outside playing football.</p> <p>Review on 6/14/19 of the facility staff documentation of client behaviors revealed:</p> <p>- No staff documentation on Client #1's behavior reports of the Staff #1 intervening when Client #1 had a "behavior" on 6/10/19.</p> <p>- No incident report of Staff #1's intervention with Client #1, described by Staff #4 as "escort" and "restrictive intervention."</p> <p>Interview on 6/18/19 with the Facility Director confirmed:</p> <p>- The facility is a "hands-off" facility.</p> <p>- During client behaviors, "Staff should document what they saw if they saw anything."</p> <p>- Staff are required to document when they see a staff implement a physical intervention on a client.</p> <p>- The facility's videotape of the activities that occurred in the client area on 6/10/19 were in the</p>	V 110		

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V 110	Continued From page 8 possession of the local police. Consequently, management had not been able to review the video to complete the investigation of the allegation. - If the above occurred, staff did not follow facility policy and procedure.	V 110		