STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL026-952	A. BUILDING: _____ B. WING _____	07/03/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ADRIENNE'S HOUSE	4528 CHAMBERSBURG ROAD FAYETTEVILLE, NC 28314

(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 A complaint survey was completed on July 3, 2019. The complaint was substantiated (intake #NC00152887). A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.	V 000		
V 293	27G .1701 Residential Tx. Child/Adol - Scope 10A NCAC 27G .1701 SCOPE (a) A residential treatment staff secure facility for children or adolescents is one that is a free-standing residential facility that provides intensive, active therapeutic treatment and interventions within a system of care approach. It shall not be the primary residence of an individual who is not a client of the facility. (b) Staff secure means staff are required to be awake during client sleep hours and supervision shall be continuous as set forth in Rule .1704 of this Section. (c) The population served shall be children or adolescents who have a primary diagnosis of mental illness, emotional disturbance or substance-related disorders; and may also have co-occurring disorders including developmental disabilities. These children or adolescents shall not meet criteria for inpatient psychiatric services. (d) The children or adolescents served shall require the following: (1) removal from home to a community-based residential setting in order to facilitate treatment; and (2) treatment in a staff secure setting. (e) Services shall be designed to: (1) include individualized supervision and structure of daily living;	V 293		

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V 293	Continued From page 1 (2) minimize the occurrence of behaviors related to functional deficits; (3) ensure safety and deescalate out of control behaviors including frequent crisis management with or without physical restraint; (4) assist the child or adolescent in the acquisition of adaptive functioning in self-control, communication, social and recreational skills; and (5) support the child or adolescent in gaining the skills needed to step-down to a less intensive treatment setting. (f) The residential treatment staff secure facility shall coordinate with other individuals and agencies within the child or adolescent's system of care. This Rule is not met as evidenced by: Based on record review and interviews the facility failed to coordinate with other individuals within the child or adolescent's system of care for one of one former client (FC) #4). The findings are: Review on 07/03/19 of FC #3's record revealed: - 13 year old male. - Admission date 07/30/18. - Transfer to a sister facility effective 06/15/19 (Saturday). - Diagnoses of Attention Deficit Hyperactivity Disorder-Combined Presentation, Other Neurodevelopmental Disorder, Oppositional Defiant Disorder and Disruptive Mood	V 293		

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V 293	Continued From page 2 Dysregulation Disorder. Review on 07/03/19 of a facility "Internal Residential Transfer" signed by the Director and dated 06/03/19 revealed: - "[FC #4] will be transferred from Adrienne's House which is located at 4528 Chambersburg Rd. (road) to the [Sister Facility] which is an affiliate of S & T WeCare. This facility is located at [sister facility address], this move was discussed during previous CFT (Child and Family Team) meeting with the consumer and his father based on age difference and bullying behaviors that the consumer had been displaying. Once the bed became available the move would be conducted based on compatibility." Interview on 07/03/19 FC #4 stated: - He was 13 years old. - He had lived within the agency for approximately one year. - He was not sure of the date he was transferred to the sister facility. - He was moved to a sister facility due to his age. - He was doing well at the new facility. Interview on 07/03/19 FC #4's guardian stated: - A facility transfer had been discussed several months ago for FC #4. - No specific date of the transfer was mentioned. - She had called the facility on the weekend of 06/15/19 and 06/16/19 and discovered FC #4 had been transferred. - The guardian nor her husband was aware FC #4 had been transferred to the sister facility until they called. - She was concerned FC #4 was transferred and the guardian had to find out by calling the facility. Interview on 07/03/19 the Administrative Staff	V 293		

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V 293	Continued From page 3 stated: - The facility typically had clients from 8 to 12/13 years old. - FC #4 had been bullying others and a transfer was made to a sister facility with older clients. - The transfer had been discussed FC #4's guardian and care coordinator. - FC #4 was transferred to a sister facility on the weekend. - She was told by staff FC #4's guardian was notified of the sister facility demographics when she called. - She understood coordination with the guardian should be made when a transfer was completed.	V 293		