

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL012-119	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/11/2019
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NAME OF PROVIDER OR SUPPLIER THE ENOLA GROUP / MOUNTAIN SIDE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 2175 MOUNTAIN SIDE DRIVE MORGANTON, NC 28655
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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	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on June 11, 2019. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Adults of all Disability Groups-Alternative Family Living.</p>	V 000		
V 290	<p>27G .5602 Supervised Living - Staff</p> <p>10A NCAC 27G .5602 STAFF</p> <p>(a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs.</p> <p>(b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time.</p> <p>(c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present:</p> <p>(1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or</p> <p>(2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients</p>	V 290		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 290	<p>Continued From page 1</p> <p>present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body.</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:</p> <p>(1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and</p> <p>(2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to ensure that the client's treatment plan documented that the client can remain in the community without supervision for specified periods of time, affecting 1 of 2 clients (#2). The findings are:</p> <p>Record review on 6/11/19 for Client #2 revealed: -Admitted on 4/20/10 with diagnoses of mild Mental Retardation, and moderate delay in adaptive behavior skills. -Treatment plan dated 1/3/19 did not indicate that Client #2 could be unsupervised for periods of time in the community.</p> <p>Client #2 could not be interviewed because he was on vacation with his family at the time of this survey.</p> <p>Interview on 6/11/19 with the AFL provider</p>	V 290		

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V 290	<p>Continued From page 2</p> <p>revealed:</p> <ul style="list-style-type: none"> -Client #2 was very proactive about his health. He was up every morning and took a daily walk in the neighborhood. He was gone approximately 30 minutes and stayed within the neighborhood. She did not accompany him on his walks. -Client #2 was very independent. -There had been no incidents that had occurred within the last year with Client #2. -Client #2 was very familiar with the neighbors in the neighborhood. <p>Interview on 6/11/19 with the Qualified Professional revealed:</p> <ul style="list-style-type: none"> -Client #2 was high functioning and most goals addressed the development of independent living skills. -Client #2 went on walks in the neighborhood unsupervised. The AFL provider knew how long he would be gone. -Client #2 knew "stranger danger" and the neighbors knew him and looked out for him. Client #2 knew how to access help if he needed it. -They felt that Client #2 was capable of being unsupervised during his neighborhood walks but had not formally assessed him for that nor included that in his treatment plan. 	V 290		