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| V 000 | INITIAL COMMENTS<br><br>A complaint and follow up survey was completed on 7/11/2019. The complaint was unsubstantiated (intake #NC152704). Deficiencies were cited.<br><br>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children and Adolescents.<br><br>A sister facility is identified in this report. The sister facility will be identified as sister facility A. Staff and/or clients will be identified using the letter of the facility and a numerical identifier. | V 000 | | |
| V 107 | 27G .0202 (A-E) Personnel Requirements<br><br>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS<br>(a) All facilities shall have a written job description for the director and each staff position which:<br>(1) specifies the minimum level of education, competency, work experience and other qualifications for the position;<br>(2) specifies the duties and responsibilities of the position;<br>(3) is signed by the staff member and the supervisor; and<br>(4) is retained in the staff member's file.<br>(b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility:<br>(1) is at least 18 years of age;<br>(2) is able to read, write, understand and follow directions;<br>(3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and | V 107 | | |

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| V 107 | Continued From page 1<br>(4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry.<br>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based upon the offense in relationship to the job for which the applicant is applying.<br>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.<br>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.<br><br>This Rule is not met as evidenced by:<br>Based on record reviews and interviews, the facility failed to maintain a file for each individual employee indicating the training, experience and other qualifications for the position affecting 1 of 4 surveyed paraprofessional staff (the Administrator/Owner (A/O)). The findings are:<br><br>Review on 6/18/2019 of the facility's license application for 2019 revealed:<br>- The A/O was listed as the contact person for the facility with a title of "Administrator." | V 107 | | |

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| V 107 | Continued From page 2 | V 107 | | |

Review on 7/9/2019 of the facility's policy and procedure manual revealed:
- A "Leadership Structure" policy that revealed: "The delegation of Management Authority for Black and Associates Global, Inc is as follows:
- The CEO (Chief Executive Officer)/Administrator (the A/O) of Black and Associates Global, Inc shall have all authority for overall management and operation of the agency.
- The CEO/Administrator (the A/O) shall oversee and manage direct service provision, day-to-day operations, administrative issues and other functions ..."

Attempted review on 6/27/2019 of the A/O's employee record revealed:
- There was no employee record for the A/O.

Further interviews with the Qualified Professional (QP) on 7/9/2019 and 7/10/2019 revealed:
- The A/O informed the QP that the school she had attended no longer had the A/O's records;
- The A/O was going to try to obtain copies of her high school diploma and associate degree;
- The A/O did not provide direct care for or perform any interventions with clients;
- The A/O interacted with clients when she took food to the facility and purchased clothing for clients;
- Clients wanted to talk to the A/O at those times;
- Parents of clients called the A/O at times to talk to her about clients at the facility;
- The A/O was responsible for the staffing schedules for the facility and sister facility A;
- The QP did not believe the facility should be cited for the A/O not having a personnel file because he knew owners of other businesses (other licensed mental health facilities) who were not directly involved with client care and who had never been required to provide the owners'

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| V 107 | Continued From page 3<br>employee records during Division of Health Service Regulation (DHSR) surveys;<br>- No DHSR Surveyor had ever asked for the A/O's employee record during past DHSR surveys;<br><br>Interviews on 6/28/2019 and 7/9/2019 with the A/O revealed:<br>- The A/O did not have an employee record, and had never been required to have one by DHSR;<br>- The A/O's highest degree earned was an associate degree in the accounting field;<br>- The A/O was not an Associate Professional (AP) or QP;<br>- The A/O did not work directly with clients at the facility;<br>- The A/O role and duties included billing, staff scheduling, purchasing items and groceries, and ensuring that each facility's maintenance needs were met;<br>- The A/O would get copies of any reports related to staff performance issues;<br>- As the Owner of the facility, the A/O assisted with investigations related to allegations against facility staff of abuse, neglect or exploitation, but the APs and the QP had direct oversight of facility staff. | V 107 | | |
| V 109 | 27G .0203 Privileging/Training Professionals<br><br>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS<br>(a) There shall be no privileging requirements for qualified professionals or associate professionals.<br>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.<br>(c) At such time as a competency-based | V 109 | | |

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| V 109 | Continued From page 4<br>employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.<br>(d) Competence shall be demonstrated by exhibiting core skills including:<br>(1) technical knowledge;<br>(2) cultural awareness;<br>(3) analytical skills;<br>(4) decision-making;<br>(5) interpersonal skills;<br>(6) communication skills; and<br>(7) clinical skills.<br>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.<br>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.<br>(g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.<br><br>This Rule is not met as evidenced by:<br>Based on record reviews, observation and interviews, 1 of 1 Qualified Professional (QP) failed to demonstrate knowledge, skill and abilities required by the population served. The findings are:<br><br>Cross reference: 10A NCAC 27G .0204 Competencies and Supervision of | V 109 | | |

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| V 109 | Continued From page 5<br>Paraprofessionals (V110). Based on record reviews and interviews, 1 of 4 surveyed paraprofessional staff (the Administrator/Owner (A/O)) failed to demonstrate competence required by the population served.<br><br>Review on 6/27/2019 of the QP's employee record revealed:<br>- Hire date: 7/1/2006;<br>- A job description for the position of Qualified Professional, signed by the QP and A/O on 7/1/2006, that noted responsibilities of: " ... will provide monthly supervision and training as needed to all non-Q's ... will coordinate supervision for each consumer while in the community and/or the facility to provide a safe and healthy environment ... will link, coordinate, and monitor each consumer in their supervision and training of services by their PP (paraprofessional). It is also the duty and responsibility of the Qualified Professional to report all incidents of suspected abuse, neglect, mistreatment, and/or exploitation to his/her supervisor ... The Qualified Professional shall report directly to the Administrator (the A/O) of Black and Associates Global, Inc Program ..."<br><br>Review on 7/9/2019 of the facility's policy and procedure manual revealed:<br>- A "Leadership Structure" policy that revealed: "The delegation of Management Authority for Black and Associates Global, Inc is as follows: ... The QP shall have authority to manage and supervise all direct service staff servicing our agency and provide clinical supervision and training ..."<br><br>Interview on 6/27/2019 while reviewing the video recording with the QP revealed: | V 109 | | |

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| V 109 | Continued From page 6<br>- The QP was waiting for the local Department of Social Services (DSS) Investigator to send a report regarding the incident involving staff #1 punching client #A-4, but he had not received a report yet;<br>- "From what I see there ... It's like they were play fighting in my estimation ..."<br>- When asked if 'play fighting' with clients was appropriate, he replied "We do not encourage play fighting ... It's not something the agency encourages at all ... There should be no horse playing at all ..."<br><br>Further interviews with the QP on 7/9/2019 & 7/10/2019, and observation on 7/9/2019 revealed:<br>- He thought the date he had first learned of the video was on 5/31/2019 when the DSS Investigator showed it to him and the A/O;<br>- The QP was responsible for reporting to relevant authorities and completing investigations into allegations against staff of abuse, neglect, harm or exploitation;<br>- He did not think that a report regarding staff #1 punching client #A-4 was needed because the DSS Investigator had not called it "abuse";<br>- " ... Her (the DSS Investigator) words were that they had some concerns ..."<br>- " ... When I saw the video ... in my judgement, they are play fighting and it really should not have happened ... I don't think it was deliberate ... He's (staff #1) a young person and he's involved in some of the same things they are, they like to play with him ... We thought it was horse play and not anything deliberate ... It was just playing. He (staff #1) did a bolo swing like that (demonstrating roundhouse punch) ... [Client #A-4] got right up ...It was just a play thing they were doing... That's how I looked at it ..."<br>- The QP and the A/O met with staff #1 and discussed "the importance of not horse playing | V 109 | | |

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with any of the children ... He (staff #1) has to refrain ... We had a meeting and discussed it with all the staff ... No one should be horse playing with the clients because it could have repercussions ... I know that the way it looks on the video, but we understand that staff maintain that decorum ..."
- " ... We have differences in how we characterize it. You say fighting, I say horse playing ..."

Interviews on 6/28/2019 and 7/9/2019 with the A/O revealed:
- The QP had direct oversight of facility staff.

Review on 7/10/2019 of the Plan of Protection (POP) dated 7/10/2019 written by the QP revealed:
- What will you immediately do to correct the above rule violations in order to protect clients from further risk or additional harm? Describe your plans to make sure the above happens.
- "Effective immediately July 10, 2019 and continuing, Black and Associates will ensure that supervision by a Qualified Professional (QP) is provided to all paraprofessionals and Associate Professionals on a monthly basis.
- The QP will document all staff supervision on a monthly basis and it will be available for review."

On 7/10/2019, the Surveyor requested that additional details be added to the POP regarding who would be providing supervision to the A/O and QP in order to address clinical decision-making, including the frequency of that supervision. No addendum to the POP was provided by the time of exit.

This facility served adolescents with serious behavioral and emotional disturbances requiring removal from home to a community-based

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residential setting in order to facilitate treatment. The Administrator/Owner's role involved having authority for overall management and operation of the agency, which included staff scheduling, and therefore directly impacted client care and services. Client #A-4's Guardian reported that a copy of the video had been sent to the A/O on 5/28/2019, but the A/O stated that she had not received it. The A/O was presented with video evidence of staff #1 punching client #A-4 by a local DSS Investigator on 5/31/2016. The A/O made the decision to move staff #1 from sister facility A to the facility rather than remove staff #1 from contact with all clients while an investigation was completed. No documentation was presented during the survey to demonstrate that any retraining, consultation or disciplinary action was completed for staff #1.

The QP's role involved direct oversight of all clinical services provided to clients in the facility and sister facility A. Both facilities were licensed as 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children and Adolescents facilities and served clients with similar backgrounds and treatment needs. A video revealing staff #1 punching client #A-4 repeatedly was shown to the QP by a local DSS Investigator on 5/31/2019. The QP did not provide evidence that action was taken to ensure clients' safety following an allegation of abuse by staff #1. There was no evidence that an investigation had taken place. The QP allowed staff #1 to be transferred to the facility and continue working directly with clients who had treatment needs similar to those at sister facility A. The QP stated that he had interpreted staff #1 punching client #A-4 as "horse playing" or "play fighting" rather than abuse, and therefore did not take actions to report or investigate. This deficiency constitutes a Type A1 rule violation for serious neglect and

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| V 109 | Continued From page 9<br>must be corrected within 23 days. An administrative penalty of $2,000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of $500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day. | V 109 | | |
| V 110 | 27G .0204 Training/Supervision Paraprofessionals<br><br>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS<br>(a) There shall be no privileging requirements for paraprofessionals.<br>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.<br>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.<br>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.<br>(e) Competence shall be demonstrated by exhibiting core skills including:<br>(1) technical knowledge;<br>(2) cultural awareness;<br>(3) analytical skills;<br>(4) decision-making;<br>(5) interpersonal skills;<br>(6) communication skills; and<br>(7) clinical skills.<br>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional. | V 110 | | |

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This Rule is not met as evidenced by:
Based on record reviews and interviews, 1 of 4 surveyed paraprofessional staff (the Administrator/Owner (A/O)) failed to demonstrate competence required by the population served. The findings are:

Reviews on 6/18/2019 and 6/21/2019 of client #1's record revealed:
- Admission date: 5/28/2019
- Diagnoses: Conduct Disorder (D/O); Problems with primary support group; Problems related to the social environment; Educational problems; Economic Problems; Problems related to interactions with the legal system; Other psychological and environmental problems;
- Age: 16
- A "Clinical Assessment" dated 5/22/2019 that revealed: "[Client #1] is a 15 year-old African American male who is currently placed at [the local Juvenile Detention Center] since March 26th after a probation violation ...Member has displayed physical aggression as well as property destruction in the home when upset. He has also ran away from home on several occasions. He also refuses to follow any directives given by his mother and even curses at her. There have been safety concerns in the home and it is not safe for member to return home at this time ...", and multiple out of home placements.

Reviews on 6/18/219 and 6/21/2019 of client #2's record revealed:
- Admission date: 5/24/2019;

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| V 110 | Continued From page 11<br>- Diagnoses: Disruptive Mood Dysregulation D/O; Major Depressive D/O, mild; and Conduct D/O, unspecified onset;<br>- Age: 12<br>- A "Clinical Assessment" dated 4/17/2019 that revealed a history of placement at a psychiatric residential treatment facility (PRTF), acute hospitalizations, low frustration tolerance; inattention, anger, defensive, and sarcastic, has poor eye contact, disruptive behaviors that were both self-harming and property destruction, throw a brick through a group home window, attempted to throw a brick through van windshield and trying to cut himself with a colored pencil, school suspension for assaulting a peer and a bus assistant after another kid spit on him, placement in the foster care system followed by admission to a PRTF for suicidal ideation with plans to cut himself and sit in traffic, physical fights with peers which he initiated, and multiple AWOL (absent without leave) behaviors;<br>- The Clinical Assessment further revealed two previous psychological evaluations with IQ scores of 59 and 60 and recommendations that client #2 be referred for a review of his previous valuations and testing to clarify his diagnosis.<br><br>Reviews on 6/18/2019 & 6/21/2019 of client #3's record revealed:<br>- Admission date: 4/6/2019<br>- Diagnoses: Conduct Disorder, adolescent onset type; Problems with primary support group; Problems related to the social environment; Educational problems; Problems with access to healthcare; Problems related to interactions with the legal system; Other psychological and environmental problems;<br>- Age: 15<br>- An undated, unsigned "Universal Residential Services Application" form noted a history of | V 110 | | |

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fighting with peers, arguing with staff, disrespect, conflict with mother, Division of Social Services (DSS) involvement due to conflict with mother, use of alcohol and marijuana, suspicion of gang involvement, and "criminal activity", including placement in juvenile detention following conviction for felony common law robbery;
- A treatment plan dated 3/28/2019 noted further history of running away from home and placements, physically assaulting sister, threats to kill sister, DSS Child Protective Services (CPS) involvement following alleged physical abuse by mother, and involvement with Division of Juvenile Justice (DJJ) since 6th grade for fighting at school;

Review on 6/19/2019 of client #A-4's record revealed:
- Admission date: 4/26/2018
- Diagnoses: Disruptive Mood Dysregulation Disorder (D/O); Conduct D/O; and Adrenoleukodystrophy;
- Age: 16
- An assessment dated 4/26/2018 that revealed current placement at a psychiatric residential treatment facility (PRTF) with a history of truancy and "serious aggression and depression. Mom reports that [client #1]'s behaviors have been occurring since he was 5 years old. [Client #A-4] has suicidal and homicidal tendencies. He was suspended from school multiple times ..."
- A comprehensive clinical assessment (CCA) dated 11/29/2018 revealed additional history of "defiance, impulsive behaviors, aggression, HI (homicidal ideation) & SI (suicidal ideation), attempted to choke mother; SIB (self-injurious behavior) requiring therapeutic holds during hospitalization due to scratching his arm, also punched a hole in the wall at [a PRTF] , depressed mood ...", father died when client #1

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| | MHL041-781 | A. BUILDING: _____ B. WING _____ | R-C 07/11/2019 |

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|---|---|
| OUR HOME-AUNT ZOLA'S | 408 ANDREW STREET GREENSBORO, NC 27406 |

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| V 110 | Continued From page 13<br>was 13 years old, running away, played with fire, suspended for fighting, and past inpatient treatment at multiple psychiatric hospitals and PRTFs.<br><br>Review on 6/27/2019 of a video recording revealed:<br>- The video was from a social media site post with client #A-4's name listed as the person who posted it;<br>- The video was recorded at sister facility A;<br>- The time stamp at the top of the screen was "3:14 PM", but no date was present;<br>- The video file was a total of 2 minutes and 2 seconds long;<br>- There were 5 separate scenes with multiple clips of the same scenes in the file;<br>- Scene 2 had 2 identical clips (#3 & #4) that revealed (on the front lawn of sister facility A) staff #1 and client #A-4 in boxing stances and punching each other<br>- Scene 3 had 1 clip (#5) that revealed staff #1 and client #A-4 in the same location as scene 2, again in boxing stances and punching each other.<br><br>Review on 6/27/2019 of staff #1's employee record revealed:<br>- Hire date: 5/19/2013;<br>- Despite multiple requests throughout the survey, no supporting documentation was provided to demonstrate that professional boundaries and conduct had been addressed with staff #1.<br><br>Reviews on 6/19/2019, 6/21/2019 and 7/8/2019 of the North Carolina Incident Response Improvement System (IRIS) revealed:<br>- There was no documentation that the Health Care Personnel Registry (HCPR) had been notified of an allegation of abuse related to staff #1 punching client #A-4, or that an investigation | V 110 | | |

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| V 110 | Continued From page 14<br>was conducted.<br><br>Attempted review on 6/27/2019 of the Administrator/Owner's (A/O) employee record revealed:<br>- There was no employee record for the A/O.<br><br>Review on 6/18/2019 of the facility's license application for 2019 revealed:<br>- The A/O was listed as the contact person for the facility with a title of "Administrator."<br><br>Review on 7/9/2019 of the facility's policy and procedure manual revealed:<br>- A "Leadership Structure" policy that revealed: "The delegation of Management Authority for Black and Associates Global, Inc is as follows:<br>- The CEO (Chief Executive Officer)/Administrator (the A/O) of Black and Associates Global, Inc shall have all authority for overall management and operation of the agency.<br>- The CEO/Administrator (the A/O) shall oversee and manage direct service provision, day-to-day operations, administrative issues and other functions ..."<br><br>Interviews on 6/18/2019, 6/21/2019 and 7/10/2019 with client #A-4's Guardian revealed:<br>- The Guardian had obtained the video from client #1's social media webpage;<br>- There were approximately 6 videos of client #A-4 fighting other boys and staff #1;<br>- The Guardian sent copies of the videos to the A/O at 4:05PM on 5/28/2019, but did not hear back from the A/O until after the local Department of Social Services (DSS) Investigator contacted the A/O (on 5/31/2019);<br>- The A/O was staff #1's mother;<br>- The A/O told the Guardian that she did not see the Guardian's video message. | V 110 | | |

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| V 110 | Continued From page 15<br><br>Interview on 6/27/2019 with staff #1 while reviewing the videos revealed:<br>- Staff #1 verified that he and client #A-4 had been the individuals fighting in scenes 2 and 3 of the video;<br>- Staff #1 had been "sparring" or "play fighting" with client #A-4 in the video;<br>- Client #A-4 had not been injured in the fight: "I definitely checked him over."<br>- "It was just a bad decision ... That day, I just made a poor decision to engage ..."<br>- When asked if an investigation had been completed regarding staff #1 fighting with client #A-4, he replied that the Administrator and the QP had talked to him about the incident;<br>- The last day he had worked at sister facility A was 5/30/2019;<br>- Staff #1 was moved from sister facility A to the facility to work with clients there beginning the week of 6/3/2019.<br><br>Interview on 6/27/2019 while reviewing the video recording with the QP revealed:<br>- The QP identified staff #1 and client #A-4 were the individuals in scenes 2 and 3 of the video;<br>- The QP first viewed the videos when a local DSS Investigator showed them to the QP and the Administrator several weeks ago;<br>- The A/O immediately removed staff #1 from sister facility A's schedule and moved him to the facility to work.<br><br>Further interviews with the QP on 7/9/2019 & 7/10/2019 revealed:<br>- The A/O did not provide direct care for or perform any interventions with clients;<br>- The A/O interacted with clients when she took food to the facility and purchased clothing for clients; | V 110 | | |

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- Clients wanted to talk to the A/O at those times;
- Parents of clients called the A/O at times;
- The A/O was responsible for the staffing schedules for the facility and sister facility A;
- The QP did not believe the facility should be cited for the A/O's competence as she was not directly involved with clients and her personnel record had never been requested in past DHSR surveys.

Interview on 6/27/2019 with the A/O (who arrived while the Surveyor was reviewing the undated video recordings with the QP) revealed:
- The DSS Investigator had shown the videos to the A/O and QP on a Friday three weeks ago (5/31/2019);
- The A/O did not think that she needed to remove staff #1 from the schedule entirely;
- The impression that the A/O got from talking to the DSS Investigator was that she did not need staff #1 at the facility where the 'play fighting' occurred (sister facility A);
- The A/O had not received a copy of the video from client #A-4's Guardian.

Further interviews on 6/28/2019 and 7/9/2019 with the A/O revealed:
- The A/O was not an AP or QP;
- The A/O did not work directly with clients at the facility;
- The A/O role and duties included billing, staff scheduling, purchasing items and groceries, and ensuring that each facility's maintenance needs were met;
- The A/O would get copies of any reports related to staff performance issues;
- As the Owner of the facility, the A/O assisted with investigations related to allegations against facility staff of abuse, neglect or exploitation, but the Associate Professionals and the QP had

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| V 110 | Continued From page 17<br>direct oversight of facility staff.<br><br>This deficiency is cross referenced into 10A NCAC 27G .0203 Competencies of Qualified Professionals and Associate Professionals (V109) for a Type A1 rule violation and must be corrected within 23 days. | V 110 | | |