

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL080-173</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/01/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ACE PROGRAM</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1155 CHILDREN'S CIRCLE ROCKWELL, NC 28138</b>
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V 000	INITIAL COMMENTS  An annual survey was completed on 8/1/19. Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G .1300 Residential treatment for Adolescents and Children.	V 000		
V 118	27G .0209 (C) Medication Requirements  10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications. (4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR	V 118	<p>DHSR - Mental Health</p> <p>AUG 12 2019</p> <p>Lic. &amp; Cert. Section</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*[Handwritten Signature]*

TITLE

*[Handwritten Signature]*

(X6) DATE

**8/8/19**

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V 118	<p>Continued From page 1</p> <p>file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure the MARS were kept accurate and current affecting 1 of 3 clients (#3). The findings are:</p> <p>Review on 7/31/19 of client #3's record revealed: -admission date of 4/25/19 with diagnoses of Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder, Central Auditory Processing Disorder and Encounter for Mental Health Services for Perpetrator of Nonparent Child Abuse; -physician's order dated 7/2/19 for Adderall 20mg one tablet twice daily.</p> <p>Observation on 7/31/19 at 2:17pm of client #3's medications on site revealed Adderall 20mg one tablet twice daily.</p> <p>Review on 7/31/19 of client #3's MARs from 5/1/19-7/31/19 revealed the following: -facility used weekly MARS for clients; -on client #3's MARs for the weeks of 5/1-5/5, 5/6-5/12, 5/13-5/19, 5/20-5/26 and 5/27-6/2 the medication Adderall had the following dosage instructions: 200mg one tablet twice daily; -5/1/19-6/2/19 dosing dates documented as administered.</p> <p>Interview on 8/1/19 with the Qualified Professional revealed:</p>	V 118	<p>QP will review medication logs weekly to ensure accuracy. QP will provide individual group supervision to staff in regards to medication documentation in the MARs.</p> <p>8/19/19</p>

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V 118	Continued From page 2  -not aware of the error on the mg for Adderall for client #3; -documentation error; -will ensure issue addressed.	V 118		
V 120	27G .0209 (E) Medication Requirements  10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.  This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure the medications were stored separately for external and internal use affecting 1 of 3 clients (#3). The findings are:  Review on 7/31/19 of client #3's record revealed:	V 120		

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V 120	<p>Continued From page 3</p> <p>-admission date of 4/25/19 with diagnoses of Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder, Central Auditory Processing Disorder and Encounter for Mental Health Services for Perpetrator of Nonparent Child Abuse;</p> <p>-physician's order dated 7/20/19 for Mupirocin 2% ointment apply three times daily.</p> <p>Observation on 7/31/19 at 2:17pm of client #3's medications on site revealed Mupirocin 2% ointment apply three times daily stored in a plastic bag with client #3's internal medications.</p> <p>Interview on 8/1/19 with the Qualified Professional revealed:</p> <p>-not aware of improper storage of client #3's ointment;</p> <p>-will ensure issue addressed and corrected.</p>	V 120	<p><i>GP will check medication storage weekly and at staff changeover to ensure appropriate storage.</i></p> <p><i>GP will provide appropriate supervision to staff about medication storage.</i></p>	
V 364	<p>G.S. 122C- 62 Additional Rights in 24 Hour Facilities</p> <p>§ 122C-62. Additional Rights in 24-Hour Facilities.</p> <p>(a) In addition to the rights enumerated in G.S. 122C-51 through G.S. 122C-61, each adult client who is receiving treatment or habilitation in a 24-hour facility keeps the right to:</p> <p>(1) Send and receive sealed mail and have access to writing material, postage, and staff assistance when necessary;</p> <p>(2) Contact and consult with, at his own expense and at no cost to the facility, legal counsel, private physicians, and private mental health, developmental disabilities, or substance abuse professionals of his choice; and</p> <p>(3) Contact and consult with a client advocate if there is a client advocate.</p>	V 364		

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V 364	<p>Continued From page 4</p> <p>The rights specified in this subsection may not be restricted by the facility and each adult client may exercise these rights at all reasonable times.</p> <p>(b) Except as provided in subsections (e) and (h) of this section, each adult client who is receiving treatment or habilitation in a 24-hour facility at all times keeps the right to:</p> <p>(1) Make and receive confidential telephone calls. All long distance calls shall be paid for by the client at the time of making the call or made collect to the receiving party;</p> <p>(2) Receive visitors between the hours of 8:00 a.m. and 9:00 p.m. for a period of at least six hours daily, two hours of which shall be after 6:00 p.m.; however visiting shall not take precedence over therapies;</p> <p>(3) Communicate and meet under appropriate supervision with individuals of his own choice upon the consent of the individuals;</p> <p>(4) Make visits outside the custody of the facility unless:</p> <p>a. Commitment proceedings were initiated as the result of the client's being charged with a violent crime, including a crime involving an assault with a deadly weapon, and the respondent was found not guilty by reason of insanity or incapable of proceeding;</p> <p>b. The client was voluntarily admitted or committed to the facility while under order of commitment to a correctional facility of the Division of Adult Correction of the Department of Public Safety; or</p> <p>c. The client is being held to determine capacity to proceed pursuant to G.S. 15A-1002; A court order may expressly authorize visits otherwise prohibited by the existence of the conditions prescribed by this subdivision;</p> <p>(5) Be out of doors daily and have access to</p>	V 364		

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V 364	<p>Continued From page 5</p> <p>facilities and equipment for physical exercise several times a week;</p> <p>(6) Except as prohibited by law, keep and use personal clothing and possessions, unless the client is being held to determine capacity to proceed pursuant to G.S. 15A-1002;</p> <p>(7) Participate in religious worship;</p> <p>(8) Keep and spend a reasonable sum of his own money;</p> <p>(9) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes; and</p> <p>(10) Have access to individual storage space for his private use.</p> <p>(c) In addition to the rights enumerated in G.S. 122C-51 through G.S. 122C-57 and G.S. 122C-59 through G.S. 122C-61, each minor client who is receiving treatment or habilitation in a 24-hour facility has the right to have access to proper adult supervision and guidance. In recognition of the minor's status as a developing individual, the minor shall be provided opportunities to enable him to mature physically, emotionally, intellectually, socially, and vocationally. In view of the physical, emotional, and intellectual immaturity of the minor, the 24-hour facility shall provide appropriate structure, supervision and control consistent with the rights given to the minor pursuant to this Part. The facility shall also, where practical, make reasonable efforts to ensure that each minor client receives treatment apart and separate from adult clients unless the treatment needs of the minor client dictate otherwise. Each minor client who is receiving treatment or habilitation from a 24-hour facility has the right to:</p> <p>(1) Communicate and consult with his parents or guardian or the agency or individual having legal</p>	V 364		

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V 364	<p>Continued From page 6</p> <p>custody of him;</p> <p>(2) Contact and consult with, at his own expense or that of his legally responsible person and at no cost to the facility, legal counsel, private physicians, private mental health, developmental disabilities, or substance abuse professionals, of his or his legally responsible person's choice; and</p> <p>(3) Contact and consult with a client advocate, if there is a client advocate.</p> <p>The rights specified in this subsection may not be restricted by the facility and each minor client may exercise these rights at all reasonable times.</p> <p>(d) Except as provided in subsections (e) and (h) of this section, each minor client who is receiving treatment or habilitation in a 24-hour facility has the right to:</p> <p>(1) Make and receive telephone calls. All long distance calls shall be paid for by the client at the time of making the call or made collect to the receiving party;</p> <p>(2) Send and receive mail and have access to writing materials, postage, and staff assistance when necessary;</p> <p>(3) Under appropriate supervision, receive visitors between the hours of 8:00 a.m. and 9:00 p.m. for a period of at least six hours daily, two hours of which shall be after 6:00 p.m.; however visiting shall not take precedence over school or therapies;</p> <p>(4) Receive special education and vocational training in accordance with federal and State law;</p> <p>(5) Be out of doors daily and participate in play, recreation, and physical exercise on a regular basis in accordance with his needs;</p> <p>(6) Except as prohibited by law, keep and use personal clothing and possessions under appropriate supervision, unless the client is</p>	V 364		
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V 364	<p>Continued From page 7</p> <p>being held to determine capacity to proceed pursuant to G.S. 15A-1002;</p> <p>(7) Participate in religious worship;</p> <p>(8) Have access to individual storage space for the safekeeping of personal belongings;</p> <p>(9) Have access to and spend a reasonable sum of his own money; and</p> <p>(10) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes.</p> <p>(e) No right enumerated in subsections (b) or (d) of this section may be limited or restricted except by the qualified professional responsible for the formulation of the client's treatment or habilitation plan. A written statement shall be placed in the client's record that indicates the detailed reason for the restriction. The restriction shall be reasonable and related to the client's treatment or habilitation needs. A restriction is effective for a period not to exceed 30 days. An evaluation of each restriction shall be conducted by the qualified professional at least every seven days, at which time the restriction may be removed. Each evaluation of a restriction shall be documented in the client's record. Restrictions on rights may be renewed only by a written statement entered by the qualified professional in the client's record that states the reason for the renewal of the restriction. In the case of an adult client who has not been adjudicated incompetent, in each instance of an initial restriction or renewal of a restriction of rights, an individual designated by the client shall, upon the consent of the client, be notified of the restriction and of the reason for it. In the case of a minor client or an incompetent adult client, the legally responsible person shall be notified of each instance of an initial restriction or renewal of a restriction of rights and of the reason for it. Notification of the designated individual or legally</p>	V 364		
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V 364	<p>Continued From page 8</p> <p>responsible person shall be documented in writing in the client's record.</p> <p>This Rule is not met as evidenced by: Based on interviews and records review, the facility failed to ensure each minor client had the right to make and receive telephone call affecting 3 of 3 clients (#1, #2 and #3). The findings are:</p> <p>Review on 7/31/19 of client #1's record revealed: -admission date of 6/10/19; -diagnoses of Attention Deficit Hyperactivity Disorder(ADHD) and Oppositional Defiant Disorder(ODD); -treatment plan dated 5/21/19 documented no restrictions on making phone calls.</p> <p>Review on 7/31/19 of client #2's record revealed: -admission date of 6/28/19; -diagnoses of ADHD by History and Conduct Disorder; -treatment plan dated 6/18/19 documented no restrictions on making phone calls.</p> <p>Review on 7/31/19 of client #3's record revealed: -admission date of 4/25/19; -diagnoses of ODD, ADHD, Central Auditory Processing Disorder and Encounter for Mental Health Services for Perpetrator of Nonparent Child Abuse; -treatment plan dated 5/23/19 documented no restrictions on making phone calls.</p>	V 364	<p><i>Op will remind staff 8/19/19 of client rights in regards to communication with family. This will be done in individual &amp; group supervision</i></p>	

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V 364	<p>Continued From page 9</p> <p>Interview on 8/1/19 with client #1 revealed: -facility has "Phases" clients move up as their behaviors get better; -Phase 1 when come in; -Phase 1 can not make any phone calls; -can start making phone calls on Phase 2; -can receive phone calls on any Phase.</p> <p>Interview on 8/1/19 with client #2 revealed: -have Phase system; -can't make any phone calls on Phase 1; -people can call and can take call; -Phase 1 lasts at least a week when admitted; -can drop to Phase 1 if bad behaviors; -was on Phase 2, then dropped to Phase 1; -dropped to Phase 1 because was off task, got in trouble; -only drop one Phase at a time.</p> <p>Interview on 8/1/19 with client #3 revealed: -can only make phone calls on Phase 2 and above; -on Phase 1, can only receive phone calls; -on Phase 3 now.</p> <p>Interview on 8/1/19 with the Qualified Professional revealed: -not aware of client rights violation; -will address issue and correct.</p>	V 364		
V 536	<p>27E .0107 Client Rights - Training on Alt to Rest. Int.</p> <p>10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions.</p>	V 536		

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V 536	<p>Continued From page 10</p> <p>(b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> <li>(1) knowledge and understanding of the people being served;</li> <li>(2) recognizing and interpreting human behavior;</li> <li>(3) recognizing the effect of internal and external stressors that may affect people with disabilities;</li> <li>(4) strategies for building positive relationships with persons with disabilities;</li> <li>(5) recognizing cultural, environmental and organizational factors that may affect people</li> </ol>	V 536		

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V 536	<p>Continued From page 11</p> <p>with disabilities;</p> <p>(6) recognizing the importance of and assisting in the person's involvement in making decisions about their life;</p> <p>(7) skills in assessing individual risk for escalating behavior;</p> <p>(8) communication strategies for defusing and de-escalating potentially dangerous behavior; and</p> <p>(9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name;</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p>	V 536		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL080-173</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>08/01/2019</b>
NAME OF PROVIDER OR SUPPLIER  <b>ACE PROGRAM</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1155 CHILDREN'S CIRCLE ROCKWELL, NC 28138</b>		
(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 536	<p>Continued From page 12</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p>	V 536		

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V 536	<p>Continued From page 13</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to ensure demonstrate competency in alternatives to restrictive interventions and formal refresher training was completed by staff at least annually for 2 of 2 staff (#1, #2) and the Qualified Professional(QP). The findings are:</p> <p>Review on 7/31/19 of personnel records revealed: -staff #1 was hired on 6/2/17 with the job title of Intervention Specialist and last completed training in CPI (Nonviolent Crisis Intervention) on 7/25/18 with no current certification of updated training; -staff #2 was hired on 8/23/18 with the job title of Intervention Specialist and completed training in CPI (Nonviolent Crisis Intervention) on 11/14/18; -the QP was hired on 8/6/99 and last completed training in CPI (Nonviolent Crisis Intervention) on 7/25/18 with no current certification of updated training.</p> <p>Interview on 7/31/19 with Human Resources staff revealed: -have CPI training once a month; -staff #1 and the QP were scheduled for the July</p>	V 536	<p>Training is scheduled 8/19/19 for 8/15/19 and both staff are attending.</p>	8/19/19
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V 536	<p>Continued From page 14</p> <p>2019 CPI refresher training; -the CPI instructor had a family emergency and had to cancel the July 2019 training; -the QP and staff #1's CPI will expire this date(7/31/19); -they are on the schedule for the August 2019 CPI training; -the next CPI training will be held 8/19/19.</p> <p>Review on 7/31/19 of facility incident reports from 5/1/19-7/31/19 revealed: -incident dated 7/3/19 client #1 and client #2 got into a physical altercation; -client #2 was punched in the nose and had a nose bleed; -staff tried to intervene.</p> <p>Review on 8/1/19 of the facility policy on restrictive interventions revealed no use of physical restraints by staff at the facility were allowed.</p> <p>Interviews on 7/8/19 with clients #1 and #2 revealed: -in living room, were arguing, client #2 threw a picture frame at client #1; -staff were in office watching cameras; -got into a fight; -staff could not do anything; -happened in front living room and then outside on front porch; -client #1 did not have any injuries; -staff #1 did step in front of client #1 to stop fight; -client #2 had a nose bleed where client #1 punched him; -staff telling clients to stop fighting; -staff talked to them afterwards; -no more fights since; -both feel safe at the facility.</p>	V 536		
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V 536	<p>Continued From page 15</p> <p>Interview on 8/1/19 with client #3 revealed; -not here during fight between client #1 and #2; -feel staff need to separate clients when they are arguing; -respond quicker.</p> <p>Interview on 8/1/19 with staff #1 revealed: -do not restrain at this facility -client #1 and client #2 were bickering back and forth; -client #2 threw a picture frame at client #1; -client #1 and #2 got into a fight; -client #2's nose was busted; -told them to stop; -when saw blood on client #2, stepped in front of client #1; -took client #2 to hospital for his nose; -QP talked to them about if see clients not getting along, intervene, separate, prevent fights.</p> <p>Interview on 8/1/19 with staff #2 revealed: -client #2 had been antagonizing client #1 all day; -they were in living room together; -client #2 threw a picture frame at client #1; -client #1 got up in client #2's face, talk back and forth; -happened fast, client #1 threw first punch; -tried to intervene; -staff #1 stepped in front of client #1; -client #2 had a bloody nose; -QP talked about try to intervene as soon as can, if two peers hostile, intervene, talk to them, process -no more fights.</p> <p>Interview on 8/1/19 with the QP revealed: -since fight, discussed and supervised staff on</p>	V 536		



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V 536	Continued From page 16  how to intervene to prevent things from escalating between clients to physical altercations; -do not restrain but can do processing, de-escalation techniques, call campus police; -instructed staff if they hear clients arguing, ask if everything alright, find out what is going on, try to get clients to talk through it; -had no more fights since.	V 536		