

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL074-231	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/24/2019
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

PARADIGM II

**1216-A MASTERS LANE
GREENVILLE, NC 27833**

(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 An annual survey was completed on July 24, 2019. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C, Supervised Living for Adults with Developmental Disabilities.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure fire and disaster drills were held quarterly and repeated on each shift. The findings are: Review on 7/16/18 of the facility's fire and disaster drill documentation revealed: - No disaster drill documented for 2nd shift for the first quarter (January - March) of 2019. - No fire drill documented for 3rd shift for the first	V 114		

RECEIVED

AUG 21 2019

DHSR-MH Licensure Sect

Division of Health Service Regulation

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

TITLE

(X6) DATE

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V 114	Continued From page 1 quarter (January - March) of 2019. - No fire or disaster drill documented for 1st shift for the third quarter (July - September) of 2018. During interview on 7/16/19 Home Manager 1 stated the facility operated with three shifts: - 1st shift 7:00 am - 3:00 pm. - 2nd shift 3:00 pm - 11:00 pm. - 3rd shift 11:00 pm - 7:00 am. - Weekend staff worked 12 hour shifts, 7:00 am - 7:00 pm and 7:00 pm - 7:00 am. - Sometimes staff would "split" the weekend 12 hour shifts with each other. - Fire drills were completed monthly for each shift. During interview on 7/24/19 the Program Manager stated she would ensure fire and disaster drills were held quarterly and across all shifts.	V 114		
V 364	G.S. 122C- 62 Additional Rights in 24 Hour Facilities § 122C-62. Additional Rights in 24-Hour Facilities. (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: (1) Send and receive sealed mail and have access to writing material, postage, and staff assistance when necessary; (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 (3) Contact and consult with a client advocate if there is a client advocate.	V 364		

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V 364	Continued From page 2 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. (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: (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; (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; (3) Communicate and meet under appropriate supervision with individuals of his own choice upon the consent of the individuals; (4) Make visits outside the custody of the facility unless: 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; 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 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; (5) Be out of doors daily and have access to facilities and equipment for physical exercise	V 364		

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V 364	Continued From page 3 several times a week; (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; (7) Participate in religious worship; (8) Keep and spend a reasonable sum of his own money; (9) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes; and (10) Have access to individual storage space for his private use. (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: (1) Communicate and consult with his parents or guardian or the agency or individual having legal custody of him; (2) Contact and consult with, at his own expense	V 364		

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V 364	Continued From page 4 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 (3) Contact and consult with a client advocate, if there is a client advocate. 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. (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: (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; (2) Send and receive mail and have access to writing materials, postage, and staff assistance when necessary; (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; (4) Receive special education and vocational training in accordance with federal and State law; (5) Be out of doors daily and participate in play, recreation, and physical exercise on a regular basis in accordance with his needs; (6) Except as prohibited by law, keep and use personal clothing and possessions under appropriate supervision, unless the client is being held to determine capacity to proceed pursuant to G.S. 15A-1002; (7) Participate in religious worship; (8) Have access to individual storage space for	V 364		

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V 364	Continued From page 5 the safekeeping of personal belongings; (9) Have access to and spend a reasonable sum of his own money; and (10) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes. (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 responsible person shall be documented in writing in the client's record.	V 364		

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V 364	<p>Continued From page 6</p> <p>This Rule is not met as evidenced by: Based on record reviews, observations and interviews, the facility failed to ensure that restriction of clients' access to personal property was documented and reviewed as required for 1 of 3 audited clients (Client #2). The findings are:</p> <p>Review on 7/16/19 of client #2's record revealed: - 26 year old male admitted to the facility 10/29/13. - Diagnoses included Autistic Disorder, Severe Intellectual/Developmental Disability, and Attention Deficit Disorder. - "Short Range Goals/Interventions . . . Effective Date: 4/1/2019" included "Short Range Goal . . . 10b. [Client #2] will refrain from tearing/ripping his clothes when given two or less verbal prompts daily for 3 consecutive months throughout the plan year." - Residential services strategies "Staff will . . . 3. Teach [Client #2] not to pick at his buttons, tags, zipper, or seam to his pants or shirts. 4. Inform [Client #2] by saying, [Client #2] please do not touch the _____. You will damage you clothes. 5. Physically prompt [Client #2] not to touch or pull on those areas. Staff will guide [Client #2]'s hand away if he continues to touch these areas, and will continue to let him know that he does not want to mess up his clothes. 6. Will monitor [Client #2] while he is in the restroom to ensure that he does not pull at the seam of his pants since this is where the pants ripping takes place. While in the restroom, staff will prompt [Client #2] to use the bathroom, and will remind him not to bother with the seam, zipper, tag and or anything on his pants that he can tear." - No documentation by the Qualified Professional of the detailed reason for the restriction of Client</p>	V 364		

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V 364	Continued From page 7 #2's right to access to his personal property, no evaluation of the restriction at least every 7 days, and no written statement by the Qualified Professional to state the reason for the renewal of the restriction. Observation on 7/16/19 at approximately 9:30 revealed: - The bedroom closet shared by Client #2 and Client #4 was locked. - A locked storage cabinet inside the closet. During interview on 7/16/19 House Manager 1 stated the closet was locked because "one of the boys [Client #4] likes to come in here and mess with the clothes." Client #4 had a key to access the closet when he needed to do so, but staff would monitor him. The cabinet inside the closet contained overflow medications and the clients' records and was kept locked. During interview on 7/24/19 the Program Manager stated the clients' extra, out of season, clothing was kept in the closet. The clothing they wore daily was stored in the drawers in their bedroom. The locked cabinet inside the closet contained overflow medications and client records.	V 364		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.	V 736		

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V 736	<p>Continued From page 8</p> <p>This Rule is not met as evidenced by: Based on observation and interview the Licensee failed to maintain the facility in a clean and attractive manner. The findings are:</p> <p>Observations of the facility on 7/16/19 at approximately 9:30 am revealed:</p> <ul style="list-style-type: none"> - Scuffs on the walls approximately 8 inches from the floor in Client #1's bedroom and the bedroom shared by Clients #2 & #4. - The cover on the overhead light in the hall bathroom was broken. - The white vinyl laminate on the kitchen cabinet doors was "bubbling" away from the structure of the door. - Objects that appeared consistent in shape and size with dead insects inside the overhead light fixture in the kitchen. - A large brownish-gray stain on the living room ceiling. - The fireplace screen in the living room had a heavy coating of dust. <p>During interview on 7/24/19, the Qualified Professional stated they were aware of some of the cited issues.</p>	V 736		

Appendix 1-B: Plan of Correction Form

Plan of Correction

Please complete all requested information and email completed Plan of Correction form to:

Plans.Of.Correction@dhhs.nc.gov

Provider Name: Paradigm II Provider Contact Person for follow-up: Jeannette Barnett, Program Director		Phone: 252-561-8112 Fax: 252-561-7455 Email: jbarnett@paradigmnc.org
Address: 1216A Masters Lane Greenville NC		Provider # MHL074-231

Finding	Corrective Action Steps	Responsible Party	Time Line
V114 27G .0207 Emergency Plans and Supplies a) A written fire plan for each facility and area wide disaster plan shall be developed and shall be approved by the appropriate local authority b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. c) Fire and disaster drills in a 24 hours facility shall be held at least quarterly and shall be repeated for each shift. Drills should be conducted under conditions that simulate fire emergencies. Rule not met by: 1. No fire and disaster drill documented for 3 rd shift for the 4 th quarter 2. No disaster drill documented for 1 st shift for the second quarter	1. All drills have been completed according to policy and procedure. The drills in question were in the drill book, however staff was not given an opportunity to produce the drills while the surveyor was present, as they were not notified of the "missing documentation/drills" until closing of the survey. 2. Staff will continue to utilize assignment chart for scheduled drills to ensure all shifts are covered per policy and procedure.	Jeannette Barnett Program Director	Implementation Date: Projected Completion Date: 7/16/2019
V364 G.S. 122C-62 Additional Rights in 24 Hour Facilities Rule not met by: 1. Based on record reviews, observations and interviews, the facility failed to ensure that	1. Client #2 has been provided with a key to the closet so that they are able to access their clothing and personal items.	Jeannette Barnett Program Director	Implementation Date: Projected Completion Date: 9/15/2019

<p>restriction of clients' access to personal property was documented and reviewed as required for 1 of 3 audited clients.</p>			<p>Implementation Date:</p>
<p>V736 27G.0303 (c) Location and Exterior Requirements: Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p> <p>Rule was not met based on:</p> <ol style="list-style-type: none"> 1. Scuffs on the walls approximately 8 inches from the floor in Client #1 bedroom and the bedroom shared by Client #2 and 4 2. The cover on the overhead light in the hall bathroom was broken 3. The white vinyl laminate on the kitchen cabinet doors was "bubbling" away from the structure of the door. 4. Objects that appeared consistent in shape and size with dead insects inside the overhead light fixture in the kitchen. 5. A large brownish-gray stain on the living room ceiling. 6. The fireplace screen in the living room had a head a heavy coating of dust 	<ol style="list-style-type: none"> 1. Walls have been painted and wiped down. Staff will ensure that walls to interior home will be kept clean at all times. 2. The cover will be replaced. Environmental checklists will continue to be completed monthly to document any issues/concerns. 3. The laminate will be replaced/repared. Environmental checklists will continue to be completed monthly to document any issues/concerns. 4. The bugs inside the light fixture have been cleaned out. Environmental checklists will continue to be completed monthly to document any issues/concerns. 5. The ceiling will be painted. 6. The screen to the fireplace has been cleaned and is free of dust. Staff will continue to ensure that all areas of the home remain free of dust. 	<p>Jeannette Barnett Program Director</p>	<p>Implementation Date:</p> <p>Projected Completion Date: 9/15/2019</p>
			<p>Implementation Date:</p> <p>Projected Completion Date:</p>
			<p>Implementation Date:</p> <p>Projected Completion Date:</p>