

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL041-890	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 09/19/2019
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NAME OF PROVIDER OR SUPPLIER MAJESTIC SOLUTIONS, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 1115 CENTENNIAL STREET HIGH POINT, NC 27262
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V 000	<p>INITIAL COMMENTS</p> <p>A Complaint and Follow-Up Survey was completed on September 19, 2019. The complaint was substantiated (intake #NC00155136). Deficiencies were cited.</p> <p>This facility is licensed for the following service category:</p> <p>- 10A NCAC 27G .1300: Residential Treatment Level II for Children or Adolescents</p>	V 000		
V 111	<p>27G .0205 (A-B) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to:</p> <ol style="list-style-type: none"> (1) the client's presenting problem; (2) the client's needs and strengths; (3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission; (4) a pertinent social, family, and medical history; and (5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs. <p>(b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter referred to as the "plan," strategies to address the</p>	V 111		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 111	<p>Continued From page 1</p> <p>client's presenting problem shall be documented.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to complete an assessment prior to the delivery of services, including the client ' s presenting problems, needs, strengths, admitting diagnoses, social history, family history, medical history, evaluations and other relevant information; for one (client #1) of one client surveyed. The findings are:</p> <p>Review on 9-19-19 of client #1 ' s facility record revealed:</p> <ul style="list-style-type: none"> - admitted 3-1-19 - 14 years old - diagnosed with: <ul style="list-style-type: none"> - Intermittent Explosive Disorder - Conduct Disorder - Generalized Anxiety Disorder - Depressive Disorder, Unspecified - No Admission Assessment <p>Interview on 9-19-19 with the Director revealed:</p> <ul style="list-style-type: none"> - he had an admission assessment - it was not in client #1 ' s facility record - client #1 had been residing in the facility since March, 2019 <p>Further interview with the Director failed to reveal how staff working with client #1 could access and refer to the information in the admission</p>	V 111		

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V 111	Continued From page 2 assessment, if it was not in client #1 ' s facility record.	V 111		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to insure a treatment plan was	V 112		

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V 112	<p>Continued From page 3</p> <p>developed, that included interventions and strategies for desirable outcomes to be achieved, for one (client #1) of one client surveyed. The findings are:</p> <p>Review on 9-19-19 of client #1 ' s facility record revealed:</p> <ul style="list-style-type: none"> - admitted 3-1-19 - 14 years old - diagnosed with: <ul style="list-style-type: none"> - Intermittent Explosive Disorder - Conduct Disorder - Generalized Anxiety Disorder - Depressive Disorder, Unspecified - most recent treatment/goal plan in his facility record was 6-25-19: <ul style="list-style-type: none"> - reunite with family - "Improve his ability to manage his anger ..." - "Improve his emotional stability ..." - practice self-soothing techniques - taking medications as prescribed - identify triggers to his outbursts - communicate his thoughts and feelings - learn and implement effective coping strategies 4 of 7 days <ul style="list-style-type: none"> - no goal, intervention of strategy related to eloping from the facility or respecting authority figures <p>Interview on 9-18-19 with client #1 revealed:</p> <ul style="list-style-type: none"> - he does leave the facility against staff instruction - sometimes he just stays at school and neither rides the bus nor rides with staff, just hangs out for awhile with friends - reports he supposed to ride the school bus to the facility - usually walks from school to the facility unsupervised 	V 112		

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V 112	<p>Continued From page 4</p> <ul style="list-style-type: none"> - reports the police don ' t usually do much, "sometimes they won ' t search for me unless it ' s the middle of the night, or I ' ve been gone 24 hours" <p>Interview on 9-18-19 with staff #1 revealed:</p> <ul style="list-style-type: none"> - "[client #1] is running away pretty much everyday" - has been doing this for at least a month or more - "he could be gone for as little as 30 minutes or all day" <p>Interview on 9-19-19 with the local police department captain revealed:</p> <ul style="list-style-type: none"> - the problem with client #1 running away has been going on since around May of 2019 (exact date not provided) - facility staff call the police department immediately - facility staff don ' t leave the facility to look for clients - she believes the running away has resulted in more than 20 police calls in the last month <p>Interview on 9-19-19 with the Director revealed:</p> <ul style="list-style-type: none"> - client #1 ' s treatment team meets monthly to review his treatment plan - client #1 ' s treatment/goal plan was reviewed and updated in August, of 2019 (exact date not provided) but the strategies, goals and interventions were unchanged from the 6-25-19 update - client #1 ' s biggest issues were his running away unsupervised almost every day, and his disrespect for authority - client #1 frequently tries to provoke staff into putting their hands on him so he can either fight them, or claim he was assaulted - client #1 shows no respect for facility rules 	V 112		

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V 112	Continued From page 5 and will: <ul style="list-style-type: none"> - attempt to smoke in the facility - cook food at all hours of the night - refuse to get in the facility van to be transported to and from school - cusses staff calling them bi**h Further interview with the Director failed to reveal why there was no current goal, intervention or strategy in client #1 ' s treatment/goal plan, to address the frequent running away from the facility, or his frequent disrespect for authority figures.	V 112		