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	MHL076-001	A. BUILDING: _____ B. WING _____	10/17/2019

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ALPHA HOUSE	373 HILL STREET ASHEBORO, NC 27203

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V 000	INITIAL COMMENTS A complaint survey was completed on October 17, 2019. The complaint was substantiated (intake #NC00155483). Deficiencies cited. This facility is licensed for the following service category: 10A NCAC 27G. 5600E Supervised Living for Substance Abuse Adults	V 000		
V 106	27G .0201 (A) (8-18) (B) GOVERNING BODY POLICIES 10A NCAC 27G .0201 GOVERNING BODY POLICIES (a) The governing body responsible for each facility or service shall develop and implement written policies for the following: (8) use of medications by clients in accordance with the rules in this Section; (9) reporting of any incident, unusual occurrence or medication error; (10) voluntary non-compensated work performed by a client; (11) client fee assessment and collection practices; (12) medical preparedness plan to be utilized in a medical emergency; (13) authorization for and follow up of lab tests; (14) transportation, including the accessibility of emergency information for a client; (15) services of volunteers, including supervision and requirements for maintaining client confidentiality; (16) areas in which staff, including nonprofessional staff, receive training and continuing education; (17) safety precautions and requirements for facility areas including special client activity areas; and (18) client grievance policy, including procedures	V 106		

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V 106	Continued From page 1 for review and disposition of client grievances. (b) Minutes of the governing body shall be permanently maintained. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility management failed to adhere to its transportation policy. The findings are: Review on 10/17/19 of the facility's service receipts for the van revealed: -Serviced dated 6/4/19 regular maintenance service. -Serviced dated 8/6/19 for filter and oil stabilizer. -Van serviced 8/6/19. Observation on 10/17/19 at 11:15 a.m. of the facility's van revealed: -Twelve seat van. -Driver seat material torn with metal rod exposed. -Driver seat arm torn with metal rod exposed. -Passenger seat torn with metal rod exposed. -First row seating was dirty, stained and cushion torn with metal exposed. -First row and seat next to the door seatbelt and plastic covering was broke and not working. -Second row seating near door seatbelt was broken. Interview on 10/17/19 with Clients available #1, #2, #3, #5, #7, #9 revealed: -They had no problems with the van. -They felt safe driving in the van. -Confirmed the facility needed a new van due to wear and tear on the inside of the van. -Staff transported clients to programs and other	V 106		

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V 106	Continued From page 2 appointments. Interview on 10/17/19 with Staff #1 revealed: -He worked various shifts. -He transported clients to programs. -The van was serviced a few times. -The Lead Staff would take van for service. -He had no problems with the van. -"Its running pretty smooth." Interview on 10/17/19 with the Administrative Staff revealed: -She worked as support staff at the women's facility since December 2018. -Moved to administrative staff as of 5/2019 at the women's facility. -She transported clients at the women's facility. -The van was shared with the men's facility. -She had no problems with the van. -The van was serviced. -She felt safe driving the van. Interview on 10/17/19 with the Administrator/Qualified Professional revealed: -The Lead Support Staff took van for service. -The Lead Support Staff was responsible for maintenance of the van. -Lead Support Staff currently on vacation. -Confirmed inside the van had not been fixed regarding wear and tear. -The van sliding door was fixed. -There would be a possible merge with another organization that would provide funding for a new van. -The Lead Support Staff would continue to monitor and serviced the van. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 106		

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V 110	Continued From page 3	V 110		
V 110	27G .0204 Training/Supervision Paraprofessionals 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter. (c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served. (d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (e) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. (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. This Rule is not met as evidenced by:	V 110		

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V 110	Continued From page 4 Based on record reviews and interviews one of three staff (#3) failed to demonstrate the knowledge, skills and abilities required by the population served. The findings are: Review on 10/17/19 of staff #3's record revealed: -No record to review. Interview on 10/17/19 with the Administrative Staff revealed: -She was employed 12/18 as Support Staff. -Promoted to Administrative Staff 5/2019. -She worked at the women's facility. -She did not work in the men's facility. -She did the shopping for both houses up until a month ago. -She denied allowing visitors to come to the facility. -She admitted that she took clients cell phones away during community meetings. -She reported clients were using their phones during meetings. -Admitted she attended the meeting as a participant and not staff. -She did not know clients could use phones in the meetings. Interview on 10/17/19 with the Administrator/Qualified Professional revealed: -The administrative staff worked at the women's facility. -The administrative staff did not work at the men's facility. -There was no report by clients that the administrative staff had visitors over the house. -Clients cell phone use during community meetings was determined by the facilitator. -Facility staff whether participant or transport staff should not implement facility rules in community meetings.	V 110		

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V 110	Continued From page 5 -Staff allowed to take clients phones away if house rules were broken but not during meetings. -Clients had to turn cell phones in at night. -"We don't have the right to take phones away while in meetings."	V 110		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (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. (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. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (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 (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff	V 290		

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V 290	Continued From page 6 need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body. (d) In facilities which serve clients whose primary diagnosis is substance abuse dependency: (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 (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to assess and document client's capability of having unsupervised time in the community and home in the treatment or habilitation plan affecting two of three audited clients (#1, #6 and #7). The findings are: Review on 10/17/19 of client #1's record revealed: -Admission date of 11/20/18. -Diagnoses of Alcohol Use Disorder, Severe and Cannabis Use Disorder. -Treatment Plan dated 11/27/18. -There was no unsupervised time assessment for home and community in the record. Review on 10/17/19 of client #6's record revealed: -Admission date of 5/14/19. -Diagnoses of Alcohol Use Disorder, Severe, Cannabis Use Disorder, Severe and Unspecified Depressive Disorder.	V 290		

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V 290	Continued From page 7 -Treatment Plan dated 5/20/19. -There was no unsupervised time assessment for home and community in the record. Review on 10/17/19 of client #7's record revealed: -Admission date of 7/30/19. -Diagnoses of Alcohol Dependence, Depressive Disorder and Generalized Anxiety Disorder. -Treatment Plan dated 9/30/19. -There was no unsupervised time assessment for home and community in the record. Interview on 10/17/19 with the Administrator/Qualified Professional revealed: -For the first day's clients were not allowed unsupervised time. -Clients not allowed to stay in the facility without supervision. -Clients received passes to leave the facility without supervision. -She was responsible for completing assessments for unsupervised time. -Confirmed assessments were not completed for unsupervised time for clients #1, #6 and #7.	V 290		