

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL067-034</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>11/19/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MCCULLEN HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1001 HENDERSON DRIVE JACKSONVILLE, NC 28540</b>
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(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	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on November 19, 2019. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living/Alternative Family Living.</p>	V 000		
V 112	<p><b>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</b></p> <p><b>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</b></p> <p>(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.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(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.</p>	V 112		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to develop and implement strategies in the treatment/habilitation plan to address the client's needs affecting 3 of 3 clients (#1, #2 and #3). The findings are:</p> <p>Review on 11/19/19 of client #1's record revealed: -51 year old male. -Admission date of 3/16/03. -Diagnoses of Impulse Control Disorder, Cerebral Palsy, Moderate Intellectual Disability, Paraphilic Disorder, Attention Deficit Hyperactivity Disorder.</p> <p>Review on 11/19/19 of client #1's Individual Support Plan dated 9/18/19 revealed: "-Long Range Outcome 2: [Client #1], with support, will continue to develop appropriate health and safety skills. -Where am I now in Relationship to the Outcome? [Client #1] does require awake staff to ensure his safety.....[Client #1] will get up in the middle of the night and wander around the house or go outside of the home. [Client #1] receives 24-hour supervision from awake staff... -What Others Need to Know to Best Support Me [Client #1], needs constant supervision and one on one supports...[Client #1] has one on one provider and 24 hour supervision at all times... [Client #1] had psychological assessment 11/9/14 that recommended awake supervision..."</p> <p>During interview on 11/19/19 client #1 revealed: -Staff #9 lived at the facility. -He would wake up in the middle of the night.</p> <p>Review on 11/19/19 of client #2's record revealed: -31 year old male. -Admission date of 3/26/18.</p>	V 112		

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V 112	<p>Continued From page 2</p> <p>-Diagnoses of Autism Spectrum Disorder, Intellectual Disability Moderate, Intermittent Explosive Disorder, Artificial Heart Valve, Constipation, Gastroesophageal Reflux Disease.</p> <p>Review on 11/19/19 of client #2's Individual Support Plan dated 11/01/19 revealed: "-Long Range Outcome 3: [Client #2], with support, will learn independent skills -Where am I now in Relationship to the Outcome? [Client #2] requires 24-hour supervision to ensure his safety at all times... [Client #2] will get up in the middle of the night to sneak food from kitchen and eat until he becomes sick. [Client #2] receives 24-hour supervision from awake staff..."</p> <p>Client #2 was able to communicate on 11/19/19, but unable to directly answer questions.</p> <p>Review on 11/19/19 of client #3's record revealed: -26 year old male. -Admission date of 12/28/18. -Diagnoses of Enlers-Danlos Syndrome, Sotos Syndrome, Severe Intellectual Developmental Disability, Schizophrenia, Unspecified, Urinary Incontinence.</p> <p>Review on 11/19/19 of client #'3 Individual Support Plan dated 10/01/19 revealed: "-Long Range Outcome 2: [Client #3], with support, will continue to develop appropriate health and safety skills -Where am I now in Relationship to the Outcome? [Client #3] requires 24-hour supervision from awake staff...[Client #3] requires a high level of supports due to mental health, poor decision making, aggressive outbursts and safety concerns. [Client #3] receives 24-hour</p>	V 112		

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V 112	<p>Continued From page 3</p> <p>supervision from awake staff..."</p> <p>During interview on 11/19/19 client #3 revealed: -Staff #9 lived at the facility. -He would wake up in the middle of the night. -The staff were awake and sometimes asleep.</p> <p>During interview on 11/19/19 staff #3 revealed: -He had worked at the facility for less than a year. -Staff #8 lived at the facility. -He had worked the overnight shift and he did not sleep because the clients got up at night.</p> <p>During interview on 11/19/19 staff #4 revealed: -He worked the overnight shift at the facility. -He did not sleep often. -He would "dose off." -He did not think it mattered if staff slept. -He was unsure of the requirements if he was supposed to be awake staff.</p> <p>During interview von 11/19/19 the Human Rights Specialist stated: -Staff would usually sleep during overnight shift when clients went to sleep. -Staff would sleep on one of the two sofas in the living room during the overnight shift. -Only one staff worked overnight.</p> <p>During interview on 11/19/19 the Director revealed: -Staff #9 lived at the facility. -In the evenings two staff worked at the facility until the clients went to bed. -The staff were awake staff at night but were allowed to "nap" at night.</p>	V 112		