



723 Aquadale Rd.  
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[www.eliteservicesofstanly.com](http://www.eliteservicesofstanly.com)

December 31, 2019

Gina McLain  
Facility Compliance Consultant I  
Mental Health Licensure & Certification Section  
NC Division of Health Service Regulation  
2718 Mail Service Center  
Raleigh, NC 27699-2718

Re: Elite Care Services, Inc.  
Complaint and Follow up Survey completed on 12/20/19  
Coggins Group Home, 235 Coggins Ave, Albemarle, NC 28001  
MHL # 084-090

Dear Ms. McLain,

Enclosed please find Elite Care Service's Plan of Correction addressing deficiencies cited during the Complaint and Follow up Survey completed on December 20, 2019 at the Coggins Group Home.

Please feel free to contact me or Mr. Christopher Bennett, CEO, at the number below if you have any questions regarding this Plan of Correction.

Thank you for your feedback and support.

Sincerely,

A handwritten signature in cursive script that reads "Joann McRae".

Joann McRae, MSW, QA  
Elite Care Services, Inc.  
723 Aquadale Road  
Albemarle, NC 28001  
704-982-4068

CC: Christopher Bennett, CEO

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL084-090</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____		(X3) DATE SURVEY COMPLETED  <b>R 12/20/2019</b>
NAME OF PROVIDER OR SUPPLIER  <b>COGGINS GROUP HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>235 COGGIN AVENUE ALBEMARLE, NC 28001</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 000	INITIAL COMMENTS  A complaint and follow up survey was completed on 12/20/19. The complaint was substantiated (Intake #NC 157707). A deficiency was cited.  This facility is licensed for the following service category: 10A NCAC 27G .560)C Supervised Living for Adults with Developmental Disabilities.	V 000	<p style="color: blue; text-align: center;">DHSR - Mental Health</p> <p style="color: red; text-align: center;">JAN 6 2020</p> <p style="color: blue; text-align: center;">Lic. &amp; Cert. Section</p>		
V 108	27G .0202 (F-I) Personnel Requirements  10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious	V 108	Elite continues to be committed to providing quality care and promoting a safe environment for its members and staff. In order to make improvements the following training will be provided to staff to meet the needs of its members and to prevent this from occurring again: Sexual Behaviors awareness training will be provided by Cyndi Reinhardt, MS, LPC. The training will include: <ul style="list-style-type: none"> <li>Mindful intervention &amp; reporting</li> <li>Guidelines and signs to be aware of with members with inappropriate sexual behaviors</li> <li>Risky situations to be avoided</li> <li>Populations or members that require extra supervision</li> <li>Importance of comprehensive clinical oversight</li> <li>Clear communication with outpatient therapists and updating support staff on positive behavioral support strategies.</li> <li>Training will include program Team Leaders, QP and Direct Care staff. All new employees will receive the training materials to be reviewed by the QP during orientation and prior to working with members with these behaviors. Ongoing training will occur as needed and at least annually.</li> <li>Training will be monitored by the QP and filed in the employee personnel file.</li> </ul>	1/9/20 & 1/13/20	

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

*Joann McKeen*

TITLE *Quality Assurance* (X6) DATE *12/31/19*

STATE FORM

6899

HGQ711

If continuation sheet 1 of 4

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<p>V 108</p>	<p>Continued From page 1</p> <p>and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure staff completed training to meet the mh/dd/sa needs of the client for 2 of 4 staff (#3 and #4) and 1 of 1 former staff(FS#5). The findings are:</p> <p>Review on 12/11/19 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>-admission date of 8/16/19;</li> <li>-diagnoses of Intellectual Developmental Disabilities Mild, Attention Deficit Hyperactivity Disorder and Anti-Personality Disorder;</li> <li>-treatment plan dated 8/16/19 documented client #1 was "grossly sexually inappropriate with male and female staff," exhibited inappropriate sexual confrontation, had sexual behaviors, had a history of touching females inappropriately, rubbed his genital and masturbated in public.</li> </ul> <p>Review on 12/11/19 and 12/18/19 of personnel records revealed:</p> <ul style="list-style-type: none"> <li>-staff #3 was hired on 4/30/18 with the job title of Direct Care and there was no documentation of training on clients with inappropriate sexual behaviors and sexual aggression present in the record;</li> <li>-staff #4 was hired on 10/7/19 with the job title of Direct Care and there was no documentation of training on clients with inappropriate sexual behaviors and sexual aggression present in the record;</li> <li>-FS#4 was hired on 7/13/18, terminated on 10/26/19 and there was no documentation of</li> </ul>	<p>V 108</p>		
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V 108	<p>Continued From page 2</p> <p>training on clients with inappropriate sexual behaviors and sexual aggression present in the record.</p> <p>Interview on 12/18/19 with staff #3 revealed:</p> <ul style="list-style-type: none"> <li>-worked as needed at the facility with client #1;</li> <li>-client #1 invaded her personal space a lot;</li> <li>-tried to take her phone away from her;</li> <li>-twice blocked her in a room;</li> <li>-threatened to molest her;</li> <li>-stopped working with him at that facility;</li> <li>-threatened to rape of her female co-workers; -</li> <li>not completed training in clients with sexual behaviors.</li> </ul> <p>Interview on 12/18/19 with staff #4 revealed:</p> <ul style="list-style-type: none"> <li>-worked a few times at the facility with client #1;</li> <li>-worked third shift one time with client #1;</li> <li>-tried to touch her, took her purse and phone; -</li> <li>told her he was going to put his penis in her anus;</li> <li>-felt uncomfortable working with him;</li> <li>-did not work with him again;</li> <li>-had done her training at the sister facility where client #1 used to reside;</li> <li>-was around client #1 before and he did not act in that manner towards her.</li> </ul> <p>Interview on 12/18/19 with the Qualified Professional revealed:</p> <ul style="list-style-type: none"> <li>-thought she talked to staff about client #1's behaviors;</li> <li>-initially client #1 did not exhibit these behaviors; -</li> <li>made changes and had male staff working with client #1 at the facility who had training in sexual behaviors;</li> <li>-client #1 was in the hospital and was not returning to the facility;</li> <li>-will ensure all staff have required trainings to handle client behaviors.</li> </ul>	V 108	
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V 108	<p>Continued From page 3</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 108		
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