STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL092-526	A. BUILDING: _____ B. WING _____	01/09/2020

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MEREDITH AUTISM PROGRAM	3800 HILLSBOROUGH STREET, LEDFORD HALL RALEIGH, NC 27607

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V 000	INITIAL COMMENTS An annual survey was completed on 1/9/2020. Deficiencies were cited. The facility is licensed for the following service category 10A NCAC 27G. 2400 Day Services for DD, Developmental Delayed or Atypical Developmental Children.	V 000		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on interview and record review the facility failed to ensure Health Care Personnel Registry (HCPR) was completed for three of three audited staff (Program Director, Staff #2 and staff #3). The findings are: Record review on 1/9/2020 of the Program Director revealed: - Hire date was April of 1998. - No evidence of a HCPR completed prior to employment. Record review on 1/9/2020 of staff #2 revealed:	V 131		

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V 131	Continued From page 1 - Hire date of July 2013. - No evidence of a HCPR completed prior to employment. Record review on 1/9/2020 of staff #3 revealed: - Hire date July 2013. - No evidence of a HCPR completed prior to employment. During interview on 1/9/19 The Program Director stated: -The Human Resource Department within the college completed all pre employment screenings. -They run criminal checks along with other offender checks prior to employment. -Was not aware of an HCPR that needed to be completed. On 1/9/2020 The Program Director provided surveyor with completed HCPR checks for staff.	V 131		
V 210	27G .2403(A-D) DD Day Services for Children - Operations 10A NCAC 27G .2403 OPERATIONS (a) Hours. Developmental day services for preschool children shall be available for a minimum of eight hours per day (exclusive of transportation time), five days per week, twelve months a year. (b) Daily Training Activities. Activities shall be planned around the following principles: (1) Group and individual activities, related to individual outcome plans, shall be scheduled daily. (2) Both free play and organized recreational activities shall be provided. No more than one-third of the daily schedule shall be	V 210		

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V 210	Continued From page 2 designated for both of these activities combined. (c) Grouping of children. Grouping shall allow for attending to the individual needs of each child and reflect developmentally appropriate practices. (d) Family Services: (1) Parents shall be provided the opportunity to observe their child in the program. (2) The center shall provide or secure opportunities for parents to attend parent training seminars. This Rule is not met as evidenced by: Based on interview the facility failed to ensure services shall be available for a minimum of eight hours per day, five days a week, twelve months a year. The findings are: During interview on 1/9/2020 The Program Director stated: -They currently operate Monday through Thursday 9:00 AM- 5:00 PM. -The operate on Fridays 9:00 AM- 12:00 PM. -The center had always operated those hours. -They close a half day on Fridays so family's can utilize the time for training's and therapies. -Their primary pay source is private insurance and they usually do not approve more than 32 hours a week. -Was not aware of the requirements to open five days a week for at least eight hours. -Will look into submitting a waiver to adjust the operating hours.	V 210		

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V 536	Continued From page 3	V 536		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented. (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered. (d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (e) Formal refresher training must be completed by each service provider periodically (minimum annually). (f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule. (g) Staff shall demonstrate competence in the following core areas: (1) knowledge and understanding of the people being served;	V 536		

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V 536	Continued From page 4 (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). (h) Service providers shall maintain documentation of initial and refresher training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where they attended; and (C) instructor's name; (2) The Division of MH/DD/SAS may review/request this documentation at any time. (i) Instructor Qualifications and Training Requirements: (1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions. (2) Trainers shall demonstrate competence	V 536		

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V 536	Continued From page 5 by scoring a passing grade on testing in an instructor training program. (3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule. (5) Acceptable instructor training programs shall include but are not limited to presentation of: (A) understanding the adult learner; (B) methods for teaching content of the course; (C) methods for evaluating trainee performance; and (D) documentation procedures. (6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach. (7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually. (8) Trainers shall complete a refresher instructor training at least every two years. (j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where attended; and (C) instructor's name.	V 536		

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V 536	Continued From page 6 (2) The Division of MH/DD/SAS may request and review this documentation any time. (k) Qualifications of Coaches: (1) Coaches shall meet all preparation requirements as a trainer. (2) Coaches shall teach at least three times the course which is being coached. (3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction. (l) Documentation shall be the same preparation as for trainers. This Rule is not met as evidenced by: Based on interview and record review the facility failed to ensure an Alternative to Restrictive Interventions training approved by the Division of MH/DD/SAS was completed for three of three audited staff (Program Director, Staff #2 and staff #3). The findings are: Record review on 1/9/2020 of the Program Director revealed: - Hire date was April of 1998. - No evidence of an Alternative to Restrictive Intervention training completed. Record review on 1/9/2020 of staff #2 revealed: - Hire date of July 2013. - No evidence of an Alternative to Restrictive Intervention training completed Record review on 1/9/2020 of staff #3 revealed: - Hire date July 2013.	V 536		

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V 536	Continued From page 7 - No evidence of an Alternative to Restrictive Intervention training completed. During interview on 1/9/19 The Program Director stated: -They do multiple training's and continuing education classes through out the year. -Lots of their training involve verbal de- escalation methods best used with the population they serve. -Not aware the training's had to be approved by NC Division of MH/DD/SAS. -They are very pro active in staying on top of the latest studies and methods used to best serve their clients. -Will look into researching other training's that meet the requirements or submit their training curriculum to be approved.	V 536		