

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL079-132</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  R-C <b>12/17/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>FAYETTEVILLE STREET COMMUNITY LIVING HOMES</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>855 MORGAN ROAD EDEN, NC 27288</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 289	Continued From page 1  diagnoses; (4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses; (5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or (6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e) (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL).  This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to provide services to adults as required by their license affecting 1 of 3 clients (#3). The findings are:	V 289	facility to reside without proper documents. Administrator and PP will also ensure that all documentation/communication will be conducted by administrator, PP and administrative staff members only. All documentation will be addressed appropriately and timely. Administrator and PP will ensure that all follow up will be addressed in a timely manner and that staff members are properly trained with additional training granted as needed.	12-18-19

DHSR - Mental Health

JAN 22 2020

Lic. & Cert. Section

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER  
**FAYETTEVILLE STREET COMMUNITY LIVING HOMES**

STREET ADDRESS, CITY, STATE, ZIP CODE  
**855 MORGAN ROAD  
EDEN, NC 27288**

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V 000	INITIAL COMMENTS  A complaint and follow up survey was completed on 12/17/2019. The complaint was unsubstantiated (intake #NC158863). A deficiency was cited.  This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 289	27G .5601 Supervised Living - Scope  10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other	V 289	Fayetteville Street Community Living Home is a residential facility that we believe provides the best care possible for residents with a developmental disability. FSC Home goal strives to enhance the lives of residents by providing a strong support system that would strengthen their provision of hope to live as independently as possible. FSC Home services are carried out with quality respect, commitment, and integrity for every resident. Fayetteville Street Community Living Home serves as a catalyst in the community for improving the quality of life of the persons served in our residential facility. FSC Home will ensure that those entering the home for residential assistance will be age appropriate as stated by the license of the facility. PP and Administrator will not allow anyone under the age of 18 be admitted into the Group Home.	12-18-19

Division of Health Service Regulation

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

*Robin Williams*

TITLE

*Administrator*

(X6) DATE

*12-18-19*

STATE FORM

6899

DZFP11

If continuation sheet 1 of 4

November 8, 2019

Ce-Aeira White, Administrative Assistant  
Fayetteville Street Community Living Home  
855 Morgan Road  
Eden, NC 27288

RE: Request for Letter of Support to Waive Age Restrictions to Permit Placement of [REDACTED] at the Fayetteville Street Community Living Home # 3 site, Licensed Per 10A NCAC 27G .5600C

Dear: Ms. White:

Cardinal Innovations Healthcare ("Cardinal Innovations") has received the request from Fayetteville Street Community Living Home ("FSCLH") for a letter to support its proposed application to waive the age limitations applicable to its Fayetteville Street Community Living Home # 3 ("Home # 3"), so it can accept placement of [REDACTED] a 17 ¼ year old Cardinal Innovations member [REDACTED]. Home # 3 is licensed under 10A NCAC 27G .5601(c)(3) as a three-person DD Supervised Living facility for adults.

According to Cardinal Innovations' records, [REDACTED] is diagnosed with Mild Intellectual Disabilities, Generalized Anxiety Disorder, and Attention Deficit-Hyperactivity Disorder, Predominantly Hyperactive Type. This site currently has two residents in placement. FSCLH reports that one of the residents is 50 years old [REDACTED] and is diagnosed with Schizophrenia – Unspecified. The second resident reportedly is 24 years old [REDACTED] and is diagnosed with Intellectual Developmental Disorder, Attention Deficit-Hyperactivity Disorder, Schizophrenia, and Autistic Disorder. For its part, Cardinal Innovations also is aware that [REDACTED] has a past history of having been sexually abused. However, FSCLH reports that neither of the residents at Home # 3 has any history of sexual assault or sexualized behaviors.

FSCLH indicates that [REDACTED] Legally Responsible Person (LRP) has given permission for him to be placed at Home # 3. Further, FSCLH reports that the LRPs for the two current residents also have consented to [REDACTED] placement at Home # 3. In addition, FSCLH reports that there are no known reasons why [REDACTED] would not interact well with the current residents; and that if a concern does arise, FSCLH can utilize a respite facility to help stabilize the situation.

Relevant documentation further indicates that Home # 3 was first licensed in 2017. The facility's only annual survey thus far was conducted by the N.C. Department of Health Service Regulation (the "DHSR") in September 2018. That survey revealed no deficiencies. The DHSR also completed a complaint survey for the facility in November 2018; however, that review did not substantiate the complaint, and no deficiencies were cited.

Cardinal Innovations' Quality Management Department conducted an N.C. Department of Health and Human Services AFL Review for one of FSCLH's unlicensed AFL sites in October 2019. The facility scored 100% on that evaluation, and the Quality Management Department gave its recommendation in favor of permitting FSCLH to add the site to its contract with Cardinal Innovations.

This writer spoke with [REDACTED] attending psychiatrist, Dr. Tyehimba Hunt Harrison today. Dr. Harrison confirmed that she supports the placement of [REDACTED] at Home # 3.

Based on a careful review of all of the foregoing information, Cardinal Innovations supports FSCLH's proposed waiver request permission for the placement of nearly 18 year old C.S. at Home # 3.

Cardinal Innovations greatly appreciates your dedication to the individuals you serve, and looks forward to continued work with KMG. If you have any questions regarding this decision, you may contact your assigned Network Specialist, Jody Meacham, at 919-904-0481.

Sincerely,

DocuSigned by:

*Wendy Welch, MD, MBA, CHCQM*

**Wendy Welch, MD, MBA, CHCQM**

Chief Medical Officer

Cardinal Innovations Healthcare

cc: Onika Wilson, Director of Quality Management  
Chantay Cooper, Director, Utilization Management  
Michael Norton, Regional QM Manager – Northern Region  
Lynn Widener, Regional Network Manager – Alamance Caswell and Triad Regions  
Jodi Meacham, Network Specialist – Alamance Caswell Region  
PMT Provider File