STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL066-024	A. BUILDING: _____ B. WING _____	R-C 01/16/2020

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FAMILY ADVANTAGE LLC	3104 HWY 301 N GARYSBURG, NC 27831

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V 000	INITIAL COMMENTS A complaint and follow up survey was completed on January 16, 2020. The complaint was unsubstantiated (NC#00158548). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Level III for Children and Adolescents. Refer to Survey Event ID #2BQM11 dated 1/16/20 for citations.	V 000		
V 298	27G .1706 Residential Tx. Child/Adol - Operations 10A NCAC 27G .1706 OPERATIONS (a) Each facility shall serve no more than a total of 12 children and adolescents. (b) Family members or other legally responsible persons shall be involved in development of plans in order to assure a smooth transition to a less restrictive setting. (c) The residential treatment staff secure facility shall coordinate with the local education agency to ensure that the child's educational needs are met as identified in the child's education plan and the treatment plan. Most of the children will be able to attend school; for others, the facility will coordinate services across settings such as alternative learning programs, day treatment, or a job placement. (d) Psychiatric consultation shall be available as needed for each child or adolescent. (e) If an adolescent has his 18th birthday while receiving treatment in the facility, he may remain for six months or until the end of the state fiscal year, whichever is longer. (f) Each child or adolescent shall be entitled to age-appropriate personal belongings unless such entitlement is counter-indicated in the treatment	V 298		

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V 298	Continued From page 1 plan. (g) Each facility shall operate 24 hours per day, seven days per week, and each day of the year. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to coordinate services with other professional for 1 of 2 former clients (FC #4). The findings are: Review on 1/9/20 of FC #$'s record revealed: - admission date 6/5/19 - diagnoses of Oppositional Defiant Disorder (DO), Attention Deficit Hyperactivity DO (ADHD), other Conduct DO, Seizures, Disruptive Mood Dysregulation DO, Reading and Math DO, and Asthma - an Admissions Determination note dated 6/5/19 with: - "Symptoms: Client's (FC#$) are as follows does not complete task, disruptive, defiance and other problematic behaviors, such as hostility, negativism, impulsiveness, tantrums, argumentativeness, especially with authority figures, blaming others for his mistakes and being resentful and deliberately attempting to annoy people...steals and destroys property, provokes others to fight, verbally and physically abusive. He does not listen. He often yells, curse. He is easy to anger. - a Discharge Summary dated 1/7/20 with: - "...Client (FC#$) continues to struggle with his verbal and physical aggression...continues to struggle with his impulsivity and being able to respond	V 298		

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appropriately...continues to struggle with his ADHD symptoms and being able to express himself appropriately...Client continue to disrupt all placement with destructing property, defiant behaviors and claiming that he is being abused and neglected in prior placements. Client has over 100 incidents in the last 60 days...Client continue to have over $7000.00 of damage of property to the home..."

During an interview on 1/9/20, the Licensee reported that the Surveyor would have to go to the police department because they just heard of a complaint that FC#4 had killed an animal in the neighborhood.

During interviews on 1/9/20 and 1/13/20, the House Manager (HM) reported:
- she received a phone call shortly after midnight from staff #4 who reported the police had come to the door saying a neighbor had complained that (FC #4) killed a neighborhood dog. The complainant said he beat the dog's head then laid him in the road.
- the police told staff #4 that they found the dog caged up and beat in the side of the head.
- she interviewed FC#$ who stated he did not do anything to the dog, then said "Well, I didn't beat the dog, I didn't kill the dog, I was humping the dog."
- she reported that FC#4 had sex with the dog

During an interview on 1/13/20, staff #4 reported:
- police came to the door on 12/16/19 at 12:06am
- they reported a neighbors dog had been killed. They thought the dog had been bashed in the head. They asked if the boys knew anything about it. All said no

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V 298	Continued From page 3 - she then said she and the police only spoke with client #2 that night - police didn't name anyone but said they thought FC#4 had something to do with it During an interview on 1/15/20, a Captain at the local police office reported: - they got a call from the dog's owner at 11:40pm on 12/16/19 - the owner found the dog on the side of the road at 11:30pm and the dog was dead - she reported no-one saw what happened but the dog's injuries did not look consistent with being hit by a car and the scene looked staged - the owner said someone told her they saw the kids playing with the dog earlier in the day (during daylight) - the investigation was ongoing but he understood the client in question (FC#4) was no longer living at the facility. No arrests had been made During an interview on 1/10/20, FC#4's guardian reported: - the facility had been good at communicating with her about FC#4 and felt they had done everything they could to try and work with him - the Licensee had told her about the incident with the dog and police just before the client left the facility. She did not have the date but thought it was sometime in December - she had not been told anything about FC#4 humping or having sex with the dog During an interview on 1/10/20, the Licensed Professional reported: - the Licensee had told her a dog in the neighborhood had gotten hit by an 18-wheeler - she did not know anything about FC#4 saying he had sex with the dog	V 298		

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V 298	Continued From page 4 During an interview on 1/10/20, the Qualified Professional (QP) reported: - she had worked as QP for the facility for approximately 6 or 7 weeks - she loudly stated she did not know anything about the dog other than it was found dead and the neighbor said FC#4 killed it - FC#4 said he did not kill the dog - when asked, she adamantly said she knew nothing about him having sex with the dog. - she then said she did not believe it and loudly demanded to know who told me he had sex with the dog - when I explained that FC#4 told the HM himself she said "Oh wow, I didn't know that. During an exit interview on 1/16/20, the HM reported: - she thought all staff had been informed of the details of the incident - she had not submitted a level II incident report because the Licensee told her to wait until they heard back from the police and they never did. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 298		
V 367	27G .0604 Incident Reporting Requirements 10A NCAC 27G .0604 INCIDENT REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS (a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III	V 367		

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incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information:
(1) reporting provider contact and identification information;
(2) client identification information;
(3) type of incident;
(4) description of incident;
(5) status of the effort to determine the cause of the incident; and
(6) other individuals or authorities notified or responding.
(b) Category A and B providers shall explain any missing or incomplete information. The provider shall submit an updated report to all required report recipients by the end of the next business day whenever:
(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or
(2) the provider obtains information required on the incident form that was previously unavailable.
(c) Category A and B providers shall submit, upon request by the LME, other information obtained regarding the incident, including:
(1) hospital records including confidential information;
(2) reports by other authorities; and
(3) the provider's response to the incident.
(d) Category A and B providers shall send a copy

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V 367	Continued From page 6 of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18). (e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary via electronic means and shall include summary information as follows: (1) medication errors that do not meet the definition of a level II or level III incident; (2) restrictive interventions that do not meet the definition of a level II or level III incident; (3) searches of a client or his living area; (4) seizures of client property or property in the possession of a client; (5) the total number of level II and level III incidents that occurred; and (6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph. This Rule is not met as evidenced by: 'Based on record review and interview, the facility failed to submit and finalize Level II incident	V 367		

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V 367	Continued From page 7 reports to the LME (Local Management Entity) within 72 hours of becoming aware of the incident. Review on 1/10/20 of Incident reports at the facility revealed the following reports were recorded as Level I: - 1/4/20: FC #4 flipped a loveseat, hit an outlet where a heater was plugged in which caused it to emit a flame and sparks and short circuited all outlets on that wall - 12/18/19: FC #4 kicked in an office door ripping the door frame off - 12/16/19: Police came to the facility because of a complaint that a neighborhood dog was killed and one of the clients (FC#4) was being accused - 12/13/19: FC#4 bruised his shin but claimed it was broken. He was taken to the hospital for x-ray which came back negative - 12/10/19: FC#4 threw a rock thru the living room window, punched numerous holes in the walls, used racial profanity and police were called - 11/20/19: FC#4 slammed a door off it's hinges - 11/11/19: client #1 picked up a chair and threw it at the tv damaging it and threw a staff phone on the wall smashing it - 9/11/19: FC#4 assaulted client #1 and gave him a busted lip - 9/6/19: FC#5 punched a peer in the back 4 times Review on 1/9/20 of information submitted by the House Manager revealed 3 reports had been entered with information into the IRIS (Incident Response Improvement System) but had not been finalized and therefore had not been submitted to the LME. These incidents were dated: 12/13/19, 12/10/19, 12/21/19.	V 367		

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V 367	Continued From page 8 During an interview on 1/15/20, a captain at the local Sheriff's Department revealed the had responded to at least 22 calls at the facility in the last year. During an interview on 1/9/20, the House Manager reported she had submitted the three Level II incident reports and thought they had gone thru because she had a confirmation number. She later learned a supervisor had to add comments to the report and submit before it is actually received by the LME. She stated she would go back and finalize each incident report. She reported she had not submitted the incident about the dog because the Licensee told her to wait for the police to give them more information. The police had never gotten back to them so she had not submitted a report. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 367		