

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-959	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 03/12/2020
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NAME OF PROVIDER OR SUPPLIER PRECIOUS HAVEN #3 COMET	STREET ADDRESS, CITY, STATE, ZIP CODE 975 COMET CIRCLE FAYETTEVILLE, NC 28314
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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>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on March 12, 2020. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children and Adolescents.</p>	V 000		
V 539	<p>27F .0102 Client Rights - Living Environment</p> <p>10A NCAC 27F .0102 LIVING ENVIRONMENT</p> <p>(a) Each client shall be provided:</p> <p>(1) an atmosphere conducive to uninterrupted sleep during scheduled sleeping hours, consistent with the types of services being provided and the type of clients being served; and</p> <p>(2) accessible areas for personal privacy, for at least limited periods of time, unless determined inappropriate by the treatment or habilitation team.</p> <p>(b) Each client shall be free to suitably decorate his room, or his portion of a multi-resident room, with respect to choice, normalization principles, and with respect for the physical structure. Any restrictions on this freedom shall be carried out in accordance with governing body policy.</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interviews, the facility failed to provide accessible areas for personal privacy, affecting one of three audited clients (#1). The findings are:</p> <p>Review on 3/10/20 and 3/11/20 of client #1 's record revealed:</p>	V 539		

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

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V 539	<p>Continued From page 1</p> <ul style="list-style-type: none"> -17 year old female. -Admission date 12/17/19. -Diagnoses of Major Depressive Disorder, Conduct Disorder, Attention Deficit Hyperactivity Disorder, Alcohol Use Disorder and Cannabis Use Disorder. -Individual support plan (ISP) completed 12/15/19 with no identified strategies of a camera being used. <p>Observations during a tour of the facility on 3/10/20 at approximately 12:50pm revealed:</p> <ul style="list-style-type: none"> -A surveillance camera in the corner of the right ceiling in the hallway. -A screen for viewing on a table in the living room. -The inside of Client #1's bedroom on the viewing screen in the living area. <p>Interview on 3/10/20 the Qualified Professional stated:</p> <ul style="list-style-type: none"> -He had not been aware the camera was pointing in Client #1's bedroom. -He only inspects the facility when the clients are not there. <p>Interview on 3/10/20 the Licensee stated:</p> <ul style="list-style-type: none"> -She had been the only one who could access the cameras remotely. -She would ensure the camera was adjusted so that it is not pointed toward Client #1's bedroom. 	V 539		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p>	V 736		

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V 736	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observations on 3/10/20 at approximately 12:50pm revealed:</p> <ul style="list-style-type: none"> -Client #2's ceiling in her bedroom was covered with dust. -Client #1's four drawer dresser had a broken drawer. -Hall bathroom had mildew/mold spots on ceiling above the shower in two areas. -Caulk around tub in hall bathroom was black. -Hall bathroom had 1 inch hole behind the door. -Hall light fixture did not have a globe on it. -Return vent in hall was rusty; and 1 inch hole in wall above the vent. <p>Interview on 3/10/20 the Qualified Professional stated:</p> <ul style="list-style-type: none"> -He had noticed the spots on the bathroom ceiling this past weekend but he was unsure how long it had been there. <p>Interview on 3/10/20 the Licensee stated:</p> <ul style="list-style-type: none"> -She would schedule maintenance to fix the issues at the facility. 	V 736		