

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL023-215	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 03/12/2020
NAME OF PROVIDER OR SUPPLIER SANDRA'S HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 1856 STONY POINT ROAD SHELBY, NC 28150		
(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 survey was completed on 3/12/20. The complaint was not substantiated (Intake # NC161502). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.	V 000	RECEIVED MAR 30 2020 DHSR-MH Licensure Sect	
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 record review and interviews, the facility failed to ensure each staff member had no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry (HCPR) prior to hire for 1 of 3 sampled staff (Staff #1). The findings are: Record review on 3/4/20 for Staff #1 revealed: - Hire Date: 12/24/19. - HCPR check dated 12/28/19, not prior to hire. Interview on 3/5/20 with the Executive Director	V 131	<i>The corrective measure: prior to employment administrative staff plans to access the Health Care Personnel Registry noting each incident of access in the appropriate business file.</i> <i>Any new hires will be advised of this requirement during interview. This plan is effective immediately not to proceed 60 days past 3.4.20. This plan is a preventive measure to ensure the problem ever occurs again. In addition director will formulate a check list for new hire packet which will include HCPR check prior to employment.</i> <i>Director and appointed administration staff will monitor upon each new hire and during each internal audit for compliance which will be at least once a month. Dianne Huitt, ED</i>	

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

Dianne Huitt

TITLE *Executive Director*

(X6) DATE *3.13.20*

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V 131	Continued From page 1 revealed: -The facility was licensed for several months before clients moved in. Staff were hired and trained for the licensure process, but it took a long time to open for clients, she had to rehire staff. -She was aware of the requirement of HCPR prior to hire and would make sure HCPR checks were completed more timely.	V 131		
V 133	G.S. 122C-80 Criminal History Record Check G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT. (a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter. (b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this	V 133		

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V 133	Continued From page 2 section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection	V 133		

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V 133	Continued From page 3 (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency. (c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant: (1) The level and seriousness of the crime. (2) The date of the crime. (3) The age of the person at the time of the conviction. (4) The circumstances surrounding the commission of the crime, if known. (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled. (6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed. (7) The subsequent commission by the person of a relevant offense. The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant. (d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for: (1) The failure of the provider to employ an	V 133		

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V 133	Continued From page 4 individual on the basis of information provided in the criminal history record check of the individual. (2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section. (e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40,	V 133		

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V 133	Continued From page 5 Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5. (f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor. (g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met: (1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10. (2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.) This Rule is not met as evidenced by: Based on record review and interviews, the	V 133			

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V 133	Continued From page 6 facility failed to request a criminal background check within five days of a conditional offer of employment for 1 of 1 sampled former staff (Former Staff (FS) #3). The findings are: Record review on 2/4/20 for FS #3 revealed: -Hire Date: 12/16/19 -Criminal Background check ordered on 3/5/20, not within 5 days of hire. Interview on 2/12/20 with the Executive Director revealed: -She did not keep a copy of the original criminal background check from 12/2019 because there was nothing on it. She had no other evidence of the background check. -She was aware of the requirement within 5 days of hire and moving forward will keep a copy of all checks.	V 133	<i>The corrective measure: Administrative Staff plans to conduct a criminal background for each employee within 5 days of hire. The administrative staff will print and keep confirmation of the results to be filed in employee record.</i> <i>The preventive measure is to review file for completion AEB check list on new hire information.</i> <i>The director and/or assigned adm. staff will monitor at each new hire process. Each time new staff is hired</i> <i>Deanne Hutt, ED</i>	
V 318	130 .0102 HCPR - 24 Hour Reporting 10A NCAC 130 .0102 INVESTIGATING AND REPORTING HEALTH CARE PERSONNEL The reporting by health care facilities to the Department of all allegations against health care personnel as defined in G.S. 131E-256 (a)(1), including injuries of unknown source, shall be done within 24 hours of the health care facility becoming aware of the allegation. The results of the health care facility's investigation shall be submitted to the Department in accordance with G.S. 131E-256(g). This Rule is not met as evidenced by:	V 318		

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V 318	Continued From page 7 Based on interviews and record review, the facility failed to report allegations of abuse to the North Carolina Health Care Professional Registry (HCPR) within 24 hours of becoming aware of an allegation of abuse against 1 of 3 sampled staff (Staff #1). The findings are: Review on 3/6/20 of Internal Investigation regarding incident on 2/17/20 completed on 2/19/20 by the Director revealed: -"After receiving the report of the disruption within the home, Director was advised that consumer had become very verbally and physically aggressive toward staff [Staff #1]. Director interviewed [FS #3] over the phone on 2/18/20. [FS #3] reported, 'that child' when asked what happened [FS #3] gave brief and limited information regarding the incident. [FS #3] stated it was 'too much'. [FS #3] did not report any observation that would implement staff as the aggressor. She stated staff constantly tried to avoid the escalation by asking the consumer to calm down. Director interviewed [Client #2] AEB [as evidenced by] using open-ended questioning to gather her perception of the incident. [Client #2] reported that consumer involved assaulted staff used profanity and abusive comments 'like she always does'. [Client #2] reported when consumer involved attached staff, she went into her 'safe zone'. [Client #2] also added 'it was [FC #4]. [Client #2] denied ever seeing [Staff #1] hit, punch, slap or attack [FC #4]. Director interviewed [Client #1] on 2/18/20. [Client #1]'s first response was '[FC #4]'. [Client #1] reported she felt fearful and concerned. [Client #1] reported as soon as things started up 'I went where I felt safe.' [Client #1] denied seeing any physical contact from either parties involved at the time of the interview. Director spoke with [Staff #1] the night of the	V 318	<i>The corrective measure: Director has completed all required reporting information. Director will make sure the inserted information is submitted completely. Director will ensure to follow all allegations of abuse or neglect is reported to HCPR check with in 24 hrs. Director and/or assigned Administrative Staff will ensure all allegations are reported to DSS of County named, guardian, MCO etc. Police To prevent future errors staff as installed Video cameras to monitor the facility 24 hrs. Director has implemented additional training for all staff. This process will be monitored by quality management including LP, QPAD and director. The team will monitor, review and take Proactive measures to avoid future non-compliance, quality improvements + safe of each consumer + staff. Deanne Hunt, ED</i>	

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V 318	Continued From page 8 incident when she reported she was attached AEB being pushed, punched, hit with open hand and closed fist by [FC #4] after asking her to leave the kitchen while staff was preparing food. Staff reported consumer cursed her, told her 'my mom told me to f**k you up'. Staff reported being pushed out the door down the stairs where she fell to the ground and was struck several times about her body. Staff reported when she tried to run to her car consumer tried to break the windows out of her car with the mop. On 2/19/20 Director spoke with [Staff #1] again to gather more information. [Staff #1] reported consumer was very violent and unable to contain. 'She kept coming after me the more I tried to get away from her'. [Staff #1] denied assaulting consumer in any way. [Staff #1] suffered cuts, scars, scrapes and bruises about her body from the incident." Review on 3/6/20 of Incident Report dated 2/17/20 written by Staff #1 revealed: -"Staff advised consumer to go to her appointed reflection time. Consumer asked could she call crisis because she felt her and another consumer had indifferences. Staff asked another staff member to process with consumer while dinner was getting prepared. Consumer processed and quickly went back to room and slammed door. Another consumer wanted to process and consumer 1 [FC #4] got upset. She came out of her room and began screaming and talking very disrespectfully to staff and peers. When asked to come out of kitchen so staff could prepare meal consumer pushed staff and cussing and screaming. Staff tried to ignore the situation but consumer continued to come at staff. Staff tried to restrain consumer. Consumer followed staff outside and pushed staff down steps and broke door handle. Staff 2 called police and director	V 318		

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V 318	Continued From page 9 and Staff 1 told the other staff to also call QP to let her know about incident as well." Review on 3/6/20 of incident Report dated 2/17/20 written by the Director revealed: -"Director received a call from program manager who reported a physical altercation between consumer and possible staff. Director immediately reported to the facility. Director overserved local police were on the scene. Consumer was inside the facility. Staff member involved was outside the facility. Staff reported consumer was non-compliant with rules of the facility when asked to excuse herself from the kitchen while staff was preparing dinner. Staff reported consumer pushed her. Staff reported consumer began using profanity towards her with loud and aggressive tone. Staff reported consumer assaulted her AEB (as evidenced by) hitting her about her body and punching her in the face. Consumer reported staff attempted to hold her down and away from her. Consumer later said staff hit her. Staff made report to police for IVC. Director contacted guardian, mother, QP and LP. Director contacted local help line including rapid response. Director followed up with police, guardian and mother. Staff was placed on three day suspension pending further investigations. Director completed IRIS report. Director interviewed 2nd staff member and the staff member involved. Staff denied allegations. Director encouraged staff member to seek medical attention for her scars and body pain. Staff advised more training will be required if and when she returns to work." Record review on 3/4/20 for Client #1 revealed: -Admitted on 12/4/19 with Unspecified eating Disorder, Depression, Schizencephaly, Seizure	V 318			

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V 318	Continued From page 10 Disorder, Obsessive Compulsive Disorder and Anorexia Nervosa. -Age 17 years. Interview on 3/5/20 with Client #1 revealed: -Things are going better now that [FC #4] is gone." "[FC #4] was loud and always on edge." -"My first night here-got to my room-locked the door-[FC #4] called me a faggot-retard and threatened to hit me. [FC #4] was not too physically aggressive she was mostly verbally aggressive. When things didn't go her [FC #4] way, someone was going to get it ...it was usually me." -"[FC #4] and [FC #3] had fights." -"[On 2\17\20] we were sitting at the table with [Staff #1] ...[FC #4] walked by the table and into the kitchen. [Staff #1] told her not to go into the kitchen and then she [Staff #1] went into the kitchen. I saw [FC #4] hit [Staff #1] with her hand. [Client #2] and I went to the day room. Tried not to focus on altercation. [FS #3] and [Staff #1] were in the kitchen/dining room. [Client #2] and I went out front. [FS #3] came to check on us and went back in. I heard [FC #4] yelling the 'B' word and [Staff #1] yelling 'stop, stop'. I've seen a lot of crap in my life-not a lot scares me. I was just annoyed." -"[She] felt safe with staff here. Staff are great." Record review on 3/4/20 for Client #2 revealed: -Admitted on 12/16/19 with Conduct Disorder and rule out Mood Disorder. -Age 15 years. Interview on 3/4/20 with Client #2 revealed: -This was her first group home and she had been there since 12/16/19. -Staff treated her well.	V 318		

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V 318	Continued From page 11 -FC #4 would come out of her room yelling, threatening staff. Staff would try to ask her what was wrong and to stop yelling. -FC #4 would get really mad. "Staff had to raise their voice to get her attention but didn't yell at her just to yell at her." -FC #4 called the police 5 times-took a long time for them to come. -"[FC #4] hit [the Director] then tore up the house." -"[FC #3] didn't get along with [FC #4]. [FC #3] had to be taken outside cause they were going to fight. They got into altercations often. [FC #4] kept talking trash. [FC #3] was mad and broke the window out of the back door- was sent to the hospital." -"[FC #4] got mad over simple things. She bullied others verbally. Staff got real frustrated and called [the Director]." -"[Staff #1] reached over [FC #4] and [FC #4] pushed her-not supposed to be in the kitchen. Then the phone rang and [FC #4] tried to answer it-not supposed to be in the kitchen or answer the phone. [FS #3] was there but left when police arrived." -The only time she didn't feel safe at the group home was the first night she got there. -"It was an everyday thing with [FC #4]. She would say something to provoke peers and staff. The longest we went without any conflict was about 1 week." Record review on 3/4/20 for Former Client (FC) #4 revealed: -Admitted on 12/4/19 with Intermittent Explosive Disorder, Bipolar Disorder, Attention Deficit Hyperactivity Disorder, Diabetes, Oppositional Defiant Disorder and History of neglect. -Age- 14 years. -Diagnostic Assessment dated 8/7/19- foster care	V 318		

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SANDRA'S HOUSE

**1856 STONY POINT ROAD
SHELBY, NC 28150**

(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 318	Continued From page 12 since age 6, 32 previous placements, anger issues, impulsive behaviors, history of damaging property and assaulting others. Interview on 3/9/20 with FC #4 revealed: -"Some staff talked to me bad-tell me that I was disrespectful and I'm retarded and stupid. They'd use the 'P' word, the 'B' word and A-hole when arguing." -"[FC #3] and I got along except 1 day-she left the next day. Just verbal altercations with [Client #1] and [Client #2]. Staff just watched." -On 2/17/20, "the other 2 girls were outside and [Staff #1] told me to go inside-yelled at me-I asked her not to yell at me. She told all girls to go to their rooms-I said no. I went into the kitchen to fix my plate-other girls were sitting at the table. [Staff #1] told them to go to their room then she pushed my shoulder. I told her not to touch me. I lightly pushed her stomach to move her-she grabbed my ponytail-picked me up and threw me back down on the floor 4 times. [FS #3] just watched-called her boyfriend to come pick her up-not worried about me. I pushed [Staff #1] down the steps and she told [FS #3] to lock the doors. [Staff #1] grabbed the mop outside and swung at me like a bat so I ran towards the road. [Staff #1] started calling me names. Police came after about an hour. Had to wait from another cop to take me to the hospital." Interview on 3/5/20 with Staff #1 revealed: -She began working as direct care staff on 2nd shift the end of December. -"Everyday was an issue with [FC #4]. She got attention by being irate. She didn't like that she had to follow rules. Her mood was up and down." -One the day of the incident (2/17/20), they had been on an outing to the park. " [FC #4] wanted to process with other staff-wanted to process with	V 318		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL023-215	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 03/12/2020
NAME OF PROVIDER OR SUPPLIER SANDRA'S HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 1856 STONY POINT ROAD SHELBY, NC 28150		
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V 318	Continued From page 13 her crisis team. She went outside with [FS #3] to process but came back inside-slammed door. [FC #4] went to the bathroom and came out angry. [FC #4] went into the kitchen and grabbed a bowl. She told [FC #4] she wasn't supposed to be in the kitchen. [FC #4] said 'if you touch me I'm going to kick your m**r f***g ass and began to hit her with the broom/mop-pushed her down steps. She tried to grab [FC #4]'s hands to keep her from attacking her. [FS #3] called the police." Interview on 3/5/20 with the Director revealed: -Staff #1 was "good with the kids". She was temporarily suspended pending investigation. -Was not aware that her IRIS (Incident Response Improvement System) report was not completed in the system. Because it was not completed she was not aware that notification of allegation was included in submission to meet 24 hour requirement. -Planned to contact DMH (Division of Mental Health) customer service for assistance with IRIS reporting so that she would be in compliance with rules.	V 318		