

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL098-198</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/05/2020</b>
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NAME OF PROVIDER OR SUPPLIER <b>KYSEEM'S UNITY GROUP HOME LLC #4</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>408 TARBORO STREET E WILSON, NC 27893</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint and follow up survey was completed on March 5, 2020. The complaint was unsubstantiated (intake # NC00161473). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p>	V 000		
V 108	<p><b>27G .0202 (F-I) Personnel Requirements</b></p> <p><b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b></p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <p>(1) general organizational orientation;</p> <p>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</p> <p>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</p> <p>(4) training in infectious diseases and bloodborne pathogens.</p> <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying,</p>	V 108	<p style="text-align: center;">DHSR-Mental Health</p> <p style="text-align: center;">APR 02 2020</p> <p style="text-align: center;">Lic. &amp; Cert. Section</p>	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 108	<p>Continued From page 1</p> <p>reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure 3 of 3 audited staff (#1, #2, and #3) received training to meet the mental health needs of the clients. The findings are:</p> <p>Review on 3/04/20 of staff #1's personnel record revealed: - Title of Personal Care Services Provider. - Hire date 7/05/19, start date 10/03/19. - No documented training to meet the mental health needs of the clients served.</p> <p>During interview on 3/04/20 staff #1 stated she had received training specific to individual client needs.</p> <p>Review on 3/04/20 of staff #2's personnel record revealed: - Title of Personal Care Services Provider. - Hire dated 8/24/19, start date 11/01/29. - No documented training to meet the mental health needs of the clients served.</p> <p>During interview on 3/04/20 staff #2 stated she had received training specific to individual client needs.</p> <p>Review on 3/04/20 of staff #3's personnel record revealed: - Title of Personal Care Services Provider.</p>	V 108	<p>KUGH acknowledges that the staff received trainings on meeting the mental health needs of the clients. KUGH received the certificates from the trainer and these have been added to the staff charts.</p> <p>Going forward, when a class is taken by staff, there will be an attendance log and a copy of the certificates will be obtained from the trainer. We will have our QA consultant audit staff charts at least quarterly to ensure that the required trainings are in their chart and will alert the executive director and/or qualified professional of any staff who are not in compliance. They will be given 7 days to come into compliance or will be removed from the work schedule.</p>	5/4/2020

Division of Health Service Regulation

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V 108	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>- Hire date 8/09/19, start date 9/2019.</li> <li>- No documented training to meet the mental health needs of the clients served.</li> </ul> <p>During interview on 3/04/20 staff #3 stated he had received training specific to individual client needs.</p> <p>During interview on 3/05/20 Facility Director/Licensee stated each of the clients served at the facility had mental health diagnoses and behavioral issues. He understood the requirement for staff to receive training to meet the mental health needs of the clients.</p>	V 108		
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <ul style="list-style-type: none"> <li>(a) There shall be no privileging requirements for paraprofessionals.</li> <li>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</li> <li>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</li> <li>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</li> <li>(e) Competence shall be demonstrated by exhibiting core skills including:               <ul style="list-style-type: none"> <li>(1) technical knowledge;</li> <li>(2) cultural awareness;</li> <li>(3) analytical skills;</li> <li>(4) decision-making;</li> </ul> </li> </ul>	V 110		

Division of Health Service Regulation

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V 110	<p>Continued From page 3</p> <p>(5) interpersonal skills; (6) communication skills; and (7) clinical skills. (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews 3 of 3 audited staff (#1, #2, and #3) failed to demonstrate the knowledge, skills, and abilities required by the population served. The findings are:</p> <p>Review on 3/04/20 of client #4's record revealed: - 39 year old female admitted 1/05/13. - Diagnoses included Intellectual Disability, Bipolar Disorder, and Borderline Personality Disorder.</p> <p>Review on 3/02/20 of Level II incident report for client #4 "Date of Incident: 2/26/20" revealed: - "The consumer has been in behavior most of the month but the weekend of 2/21/2020 behaviors was worst and unsafe for the client and staff. The consumer continuously threatens to kill herself, continuously fell on the floor, not assisting staff in helping her off the floor, potentially having staff to hurt their backs as she continuously dropped her weight when staff tried to get her off the floor....." - Attached "Statement Form" dated 2/24/20 and signed by staff #1 included client fell to the floor</p>	V 110	<p>KUGH will ensure that all staff are able to demonstrate the knowledge, skills, and abilities required to work with residents who have a mental and/or developmental disabilities. We had our staff participate in a refresher training on March 2, 2020 on how to properly lift and prevent falls with our residents.</p> <p>Going forward, the staff will receive this training upon hire and annually. We realize that each year staff will need to know how to properly lift where they do not add injury to a consumer who has already experienced a fall. Staff will have another refresher using the Relias software during April 2020.</p> <p>We will have our QA consultant audit staff charts at least quarterly to ensure that the required trainings are in their chart and will alert the executive director and/or qualified professional of any staff who are not in compliance. They will be given 7 days to come into compliance or will be removed from the work schedule.</p>	5/4/2020

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V 110	<p>Continued From page 4</p> <p>while in the bathroom and hallway at 8:00 am and on the back porch at 9:00 am, refusing assistance to get up each time; " . . . Staff tried to assist [client #4] up by holding her hands pulling her up . . . "</p> <p>- Attached "Statement Form" dated 2/25/20 and signed by staff #1 included " . . . Staff went into [client #4's] room . . . discovered [client #4] on the floor . . . tried to help her up by pulling her by the arms . . . "</p> <p>- Attached "Statement form" dated 2/26/20 and signed by staff #1 included " . . . staff pulled [client #4] up by her arms . . . staff heard a loud thump . . . [client #4] had fallen off the toilet . . . pulled [client #4] up once again by her arms . . . Staff helped [client #4] stand up by pulling her by the arms . . . Staff got her up by pulling her up by the arms . . . 2 staff and 2 clients took [client #4] to the van . . . "</p> <p>Review on 3/02/20 of client #4's record from a regional acute care hospital revealed:</p> <p>- Date of admission 2/26/20 " . . . ED [Emergency Department] Provider Notes . . . has been falling a lot. . . C/o [Complains of] L [left] shoulder pain. . . "</p> <p>- ". . . Chief Complaint . . . Anterior dislocation of left shoulder . . . "</p> <p>- ". . . weight 120.7 kg [kilograms] . . . " (279 pounds).</p> <p>During interview on 3/02/20 client #4 stated:</p> <p>- She dislocated her left shoulder when she fell in her bedroom.</p> <p>- She did not remember what day or what time it was when she fell in her bedroom; she could not remember who helped her get up.</p> <p>- Staff #1 and staff #3 helped her get up from the floor by lifting her from behind, with their hands under her armpits; they had also helped her up by</p>	V 110		
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V 110	<p>Continued From page 5</p> <p>pulling her hands while standing in front of her. - Her shoulder was "re-located" when she was admitted to the hospital.</p> <p>Review on 3/04/20 of staff #1's personnel record revealed: - Title of Personal Care Services Provider. - Hire date 7/05/19, start date 10/03/19. - Documented "Proper Lifts/Falls Prevention" training dated 3/02/20.</p> <p>During interview on 3/04/20 staff #1 stated: - She had been trained in proper lifts and falls prevention. - When client #4 fell or "flopped" onto the floor, she would have client #4 to pull her knees in close and she would "try to lift her under her arms" from one side. - Client #4 would use her weight to resist assistance to get off the floor.</p> <p>Review on 3/04/20 of staff #2's personnel record revealed: - Title of Personal Care Services Provider. - Hire dated 8/24/19, start date 11/01/29. - Documented "Proper Lifts/Falls Prevention" training dated 3/02/20.</p> <p>During interview on 3/04/20 staff #2 stated: - She had been trained in proper lifts and falls prevention. - When client #4 would fall she would "grab her hands and put them on her walker, then stand behind her and lift her" with her hands on client #4's waist. - Client #4 would use her weight to resist assistance to get off the floor.</p> <p>Review on 3/04/20 of staff #3's personnel record revealed:</p>	V 110		

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V 110	<p>Continued From page 6</p> <ul style="list-style-type: none"> <li>- Title of Personal Care Services Provider.</li> <li>- Hire date 8/09/19, start date 9/2019.</li> <li>- Documented "Proper Lifts/Falls Prevention" training dated 3/02/20.</li> </ul> <p>During interview on 3/04/20 staff #3 stated:</p> <ul style="list-style-type: none"> <li>- He had been trained in proper lifts and falls prevention.</li> <li>- Client #4 would "fall out" and "throw herself on the floor" if she did not want to do something; she would "fight against you when you trying to help her."</li> <li>- He assisted client #4 to get off the floor several times.</li> <li>- On 2/23/20 he and staff #2 assisted client #4 by getting on each side of her and raising her up; "told her to use her legs, we had her walker pulled behind her so she could sit on it."</li> </ul> <p>During interview on 3/05/20 the Facility Director/Licensee stated client #4 had been falling more frequently and all staff had been trained in Proper Lifts and Falls Prevention on 3/02/20, after client #4's shoulder was dislocated and she was admitted to the hospital. Pulling client #4 by her arms was not an appropriate way to assist her from the floor. Client #4 was seen by her Physician the week prior to the survey and the Physician discussed admitting her to a rehabilitation center to improve her mobility, but client #4 refused further mobility training.</p>	V 110		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>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</p>	V 131		

Division of Health Service Regulation

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V 131	<p>Continued From page 7</p> <p>health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to complete Health Care Personnel Registry (HCPR) checks prior to hire for 3 of 3 audited staff (#1, #2, and #3). The findings are:</p> <p>Review on 3/04/20 of staff #1's personnel record revealed: - Title of Personal Care Services Provider. - Hire date 7/05/19, start date 10/03/19. - HCPR check dated 9/24/19.</p> <p>Review on 3/04/20 of staff #2's personnel record revealed: - Title of Personal Care Services Provider. - Hire date 8/24/19, start date 11/01/19. - HCPR check dated 10/20/19.</p> <p>Review on 3/04/20 of staff #2's personnel record revealed: - Title of Personal Care Services Provider. - Hire date 8/09/19, start date 9/2019. - HCPR check dated 4/30/19.</p> <p>During interview on 3/05/20 the Facility Director/Licensee stated staff #3 left the Licensee's employ for approximately 2 months and returned in August 2019; when he returned a new HCPR check was completed. Employees did not begin work until after they had completed</p>	V 131	<p>KUGH completed the HCPR checks prior to the start of the staff in the home versus their hire dates. Going forward, we will along with other items completed at orientation/hire we will complete the HCPR at this time. We acknowledge that our previous method was not in compliance with the rule requirements and changes have been implemented.</p> <p>We will have our QA consultant audit staff charts at least quarterly to ensure that the HCPR are in their chart and will alert the executive director and/or qualified professional of any staff who are not in compliance.</p>	5/4/2020



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V 131	Continued From page 8  orientation and required training. He did not complete HCPR checks until he was sure the employee was going to "work out."	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 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	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 9</p> <p>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 (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.</p> <p>(c) Action. - If an applicant's criminal history</p>	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 10</p> <p>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:</p> <ol style="list-style-type: none"> <li>(1) The level and seriousness of the crime.</li> <li>(2) The date of the crime.</li> <li>(3) The age of the person at the time of the conviction.</li> <li>(4) The circumstances surrounding the commission of the crime, if known.</li> <li>(5) The nexus between the criminal conduct of the person and the job duties of the position to be filled.</li> <li>(6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed.</li> <li>(7) The subsequent commission by the person of a relevant offense.</li> </ol> <p>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.</p> <p>(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:</p> <ol style="list-style-type: none"> <li>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.</li> <li>(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.</li> </ol>	V 133		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL098-198</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/05/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>KYSEEM'S UNITY GROUP HOME LLC #4</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>408 TARBORO STREET E</b> <b>WILSON, NC 27893</b>
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V 133	Continued From page 11  (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, 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	V 133		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL098-198</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/05/2020</b>
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V 133	<p>Continued From page 12</p> <p>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.</p> <p>(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.</p> <p>(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:</p> <p>(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.</p> <p>(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.)</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview the facility failed to request state criminal background checks within five business days of employment for 3 of 3 audited staff (#1, #2, and #3). The findings are:</p> <p>Review on 3/04/20 of staff #1's personnel record</p>	V 133		
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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL098-198</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/05/2020</b>
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V 133	<p>Continued From page 13</p> <p>revealed:</p> <ul style="list-style-type: none"> <li>- Title of Personal Care Services Provider.</li> <li>- Hire date 7/05/19, start date 10/03/19.</li> <li>- Criminal background check dated 9/24/19.</li> </ul> <p>Review on 3/04/20 of staff #2's personnel record revealed:</p> <ul style="list-style-type: none"> <li>- Title of Personal Care Services Provider.</li> <li>- Hire date 8/24/19, start date 11/01/19.</li> <li>- Criminal Background check dated 5/01/19.</li> </ul> <p>Review on 3/04/20 of staff #2's personnel record revealed:</p> <ul style="list-style-type: none"> <li>- Title of Personal Care Services Provider.</li> <li>- Hire date 8/09/19, start date 9/2019.</li> <li>- Criminal background check dated 10/10/18.</li> </ul> <p>During interview on 3/05/20 the Facility Director/Licensee stated staff #3 left the Licensee's employ for approximately 2 months and returned in August 2019; when he returned a new criminal check was completed. Employees did not begin work until after they had completed orientation and required training. He did not complete background checks until he was sure the employee was going to "work out."</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 133	<p>KUGH acknowledges that we must complete criminal background checks within five business days of employment. We further acknowledge that if we have employees return to work that we will complete an additional background check at that time. We will add to our orientation checklist the completion of the criminal background check.</p> <p>Going forward, we will have our QA consultant audit staff charts at least quarterly to ensure that the criminal background checks are in their chart and will alert the executive director and/or qualified professional of any staff who are not in compliance.</p>	5/4/2020
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL098-198</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/05/2020</b>
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V 736	<p>Continued From page 14</p> <p>This Rule is not met as evidenced by: Based on observations and interview the Licensee failed to maintain the facility in a safe, clean, attractive manner free from offensive odors. The findings are:</p> <p>Observation of the facility between approximately 9:30 am and 10:15 am revealed:</p> <ul style="list-style-type: none"> <li>- The door from the lower cabinet beside the stove was missing; the door was on top of a freestanding cabinet in the kitchen.</li> <li>- Particulate matter in the kitchen drawers.</li> <li>- The kitchen cabinets were greasy to touch.</li> <li>- The inside of the oven was dirty, the oven door handle was greasy to touch.</li> <li>- The microwave door had an approximate 8 inch piece of silver duct tape on the lower portion of the door.</li> <li>- The paint and wall plaster was peeling above the front hall door in the kitchen.</li> <li>- Client #1's dresser was missing 3 drawer pulls.</li> <li>- Client #3's dresser was missing 3 drawer pulls.</li> <li>- The door knob on the laundry room was loose.</li> <li>- A baseball size hole in the plaster in the back hallway.</li> <li>- Window blind slats in the back hallway were bent.</li> <li>- Window blinds in client #3's room were broken.</li> <li>- An unfinished repair approximately basketball sized to client #3's bedroom wall.</li> <li>- A golf ball size hole in client #3's bedroom door.</li> <li>- The air register in the living room was dirty and rusty.</li> <li>- Client #4's bedroom door had a crack in the panel at the door knob.</li> <li>- Client #4's bedroom ceiling was heavily coated</li> </ul>	V 736	<p>KUGH acknowledges that we need to ensure a safe, clean, and attractive facility that is free from offensive odors. We have submitted a list of repairs that we need to the facility and we know that certain repairs we will have to complete as they are not covered by our lease. We will work with professionals to get this facility back in compliance.</p> <p>We have established shift responsibilities that each staff will be required to complete during their scheduled work time. This will ensure that areas with frequent traffic are getting cleaned and sanitized after usage. The qualified professional and/or the executive director will ensure that prior to the shift end, that these responsibilities are completed prior to their exit.</p> <p>We will replace equipment that can not be repaired or cleaned to be in compliance with this rule.</p> <p>We will get quotes from professional cleaning companies that can bring our facility into compliance and then have our staff complete maintenance. We will have this completed by April 4<sup>th</sup>.</p>	4/4/2020