STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL079-129	A. BUILDING: _____ B. WING _____	C 04/08/2020

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V 000	INITIAL COMMENTS A Complaint Survey was completed on April 8, 2020. The complaint was substantiated (intake #NC00161420). Deficiencies were cited. This facility is licensed for the following service category: - 10A NCAC 27G .5600C: Supervised Living for Adults with Developmental Disabilities	V 000		
V 110	27G .0204 Training/Supervision Paraprofessionals 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter. (c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served. (d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (e) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills.	V 110		

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V 110	Continued From page 1 (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. This Rule is not met as evidenced by: Based on interview and record review, the facility Director/Licensee (D/L) failed to demonstrate knowledge, skills and abilities required by the population served. The findings are: Review on 3-31-20 of former client (fc) #6 ' s facility record revealed: - admitted 3-22-18 - discharged 1-20-20 - 51 years old - diagnosed with: - Intellectual Disability Disorder -Mild - Prader-Willi Syndrome - discharge summary dated 1-20-20: - not signed by fc #6 ' s legal guardian - discharge requested by fc #6 ' s legal guardian Interview on 4-8-20 with fc#6 ' s legal guardian (LG) revealed: - "I knew nothing about it (the discharge of fc#6)" - "I was like, why didn ' t someone tell me, and they said, ' we did tell you, ' and I said, ' no you didn ' t ' ." - D/L told her fc#6 would be at the other facility for a weekend	V 110		

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V 110	Continued From page 2	V 110		

- (January 20, 2020 was a Monday)
- Was later told by D/L he would be there a week
- Then was told by the D/L he would be there longer because his Day Program was closer to the other facility
- Then when the Coronavirus came, we didn ' t want to move him, so he ended up staying longer
- Reports she was told the other facility could manage his Prader-Willi Syndrome better due to staffing, exercise equipment, dieting and a walking track behind the other facility
- She agreed to allow fc#6 remain at the other facility
- Then, "I talked (after 3-26-20) to [D/L] and he said he needed to do some paperwork (for the discharge) and he didn ' t do it." She agreed to sign it and fax it back to the D/L
- She spoke to fc#6 ' s Care Coordinator (CC) around April 3rd or April 4th, 2020 and agreed that the other facility would be a better fit for fc#6
- She later spoke with the CC and D/L on a conference call and discovered that fc#6 could not stay at the other facility, due to a funding requirement, and that he would either have to return to Laverne ' s or go home with her, his LG. "I said he could go back."
- "The bottom line is he just did it (discharged and moved fc#6), he didn ' t tell me."

Interview on 4-2-20 with staff #2 revealed:
- He was not sure why fc#6 was transferred to the other facility
- He thought the D/L and guardian decided fc#6 should be moved

Interview on 4-6-20 with staff #3 revealed:
- fc#6 left January 20th, 2020
- he did not know why fc#6 left

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V 110	Continued From page 3 - believed his LG and D/L decided Interview on 3-26-20 with the D/L revealed: - He discussed the discharge with fc#6 ' s LG - His L/G wanted more monitoring of his weight and exercise - The other facility had more experience managing client ' s weights - Initially he was just going for a week. - The move was a lateral move (the other facility was not a sister facility) -He and the Director of the other facility frequently work together on trainings, guidelines and information sharing to improve their respective facilities. - A discharge summary was not completed - He didn ' t realize a discharge needed to be made for a temporary move - He did not think the other facility was licensed to provide respite services Further interview on 4-8-20 revealed: - He talked to fc#6 ' s LG and apologized to her for not keeping her more informed - "I told her I accept responsibility for everything" - "It wasn ' t [other facility], I told her it was on me" - "I ' m not trying to do anything (wrong) here, I just want what ' s best for [fc#6]." - " ...whatever consequence needs to fall, it ' ll fall on me."	V 110		
V 113	27G .0206 Client Records 10A NCAC 27G .0206 CLIENT RECORDS (a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to: (1) an identification face sheet which includes:	V 113		

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V 113	Continued From page 4 (A) name (last, first, middle, maiden); (B) client record number; (C) date of birth; (D) race, gender and marital status; (E) admission date; (F) discharge date; (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV; (3) documentation of the screening and assessment; (4) treatment/habilitation or service plan; (5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician; (6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician; (7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.	V 113		

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V 113	Continued From page 5 This Rule is not met as evidenced by: Based on record review and interview, the facility staff failed to maintain a complete client record, including the discharge information, for 1 of 6 clients (former client #6) surveyed. The findings are: Review on 3-31-20 of former client (fc) #6 ' s facility record revealed: - admitted 3-22-18 - discharged 1-20-20 - 51 years old - diagnosed with: - Intellectual Disability Disorder -Mild - Prader-Willi Syndrome - discharge summary dated 1-20-20, but not signed by fc #6 ' s legal guardian Interview on 4-8-20 with fc#6 ' s legal guardian (LG) revealed: - "I knew nothing about it (the discharge of fc#6)" - The Director/Licensee (D/L) told her fc#6 would only be at the other facility for a weekend - (He was moved January 20, 2020 which was a Monday) - Was later told by D/L he would be there a week (date not recalled) - Was told the move would be temporary (date not recalled) - She agreed to allow fc#6 to remain at the other facility - Then, "I talked (after 3-26-20) to [D/L] and he said he needed to do some paperwork (for the discharge) and he didn ' t do it." She agreed to sign it and fax it back to the D/L Interview on 4-7-20 with staff #1 revealed:	V 113		

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V 113	Continued From page 6 - fc#6 left sometime in January - He never saw a discharge summary - Was not sure why fc#6 left the facility in the first place Interview on 4-6-20 with staff #3 revealed: - fc#6 left January 20, 2020 - He was not sure why fc#6 left - He did not know where fc#6 went - He did not see a discharge summary Interview on 3-26-20 with the D/L revealed: - The move was a lateral move (the other facility was not a sister facility) - The other facility had more experience managing client ' s weights - Initially fc#6 was just going for a week, to have a change in environment that might be helpful to begin a different weight-management regimen. -He and the Director of the other facility frequently work together on trainings, guidelines and information sharing to improve their respective facilities. - He did not think the other facility was licensed to provide respite services - A discharge summary was not completed - He didn ' t realize a discharge needed to be made for a temporary move	V 113		