

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL081-091</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>05/14/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>KELLY'S CARE #8</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1366 COOPER'S GAP ROAD</b> <b>RUTHERFORDTON, NC 28139</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint survey was completed on May 14, 2020. The complaint was unsubstantiated (Intake #NC 00164160). A deficiency was 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 537	<p>27E .0108 Client Rights - Training in Sec Rest &amp; ITO</p> <p>10A NCAC 27E .0108 TRAINING IN SECLUSION, PHYSICAL RESTRAINT AND ISOLATION TIME-OUT</p> <p>(a) Seclusion, physical restraint and isolation time-out may be employed only by staff who have been trained and have demonstrated competence in the proper use of and alternatives to these procedures. Facilities shall ensure that staff authorized to employ and terminate these procedures are retrained and have demonstrated competence at least annually.</p> <p>(b) Prior to providing direct care to people with disabilities whose treatment/habilitation plan includes restrictive interventions, staff including service providers, employees, students or volunteers shall complete training in the use of seclusion, physical restraint and isolation time-out and shall not use these interventions until the training is completed and competence is demonstrated.</p> <p>(c) A pre-requisite for taking this training is demonstrating competence by completion of training in preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable</p>	V 537		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 537	<p>Continued From page 1</p> <p>methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider plans to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Acceptable training programs shall include, but are not limited to, presentation of:</p> <p>(1) refresher information on alternatives to the use of restrictive interventions;</p> <p>(2) guidelines on when to intervene (understanding imminent danger to self and others);</p> <p>(3) emphasis on safety and respect for the rights and dignity of all persons involved (using concepts of least restrictive interventions and incremental steps in an intervention);</p> <p>(4) strategies for the safe implementation of restrictive interventions;</p> <p>(5) the use of emergency safety interventions which include continuous assessment and monitoring of the physical and psychological well-being of the client and the safe use of restraint throughout the duration of the restrictive intervention;</p> <p>(6) prohibited procedures;</p> <p>(7) debriefing strategies, including their importance and purpose; and</p> <p>(8) documentation methods/procedures.</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p>	V 537		

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V 537	<p>Continued From page 2</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualification and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring 100% on testing in a training program teaching the use of seclusion, physical restraint and isolation time-out.</p> <p>(3) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(4) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(5) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (j)(6) of this Rule.</p> <p>(6) Acceptable instructor training programs shall include, but not be limited to, presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) evaluation of trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(7) Trainers shall be retrained at least annually and demonstrate competence in the use of seclusion, physical restraint and isolation time-out, as specified in Paragraph (a) of this Rule.</p>	V 537		

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V 537	<p>Continued From page 3</p> <p>(8) Trainers shall be currently trained in CPR.</p> <p>(9) Trainers shall have coached experience in teaching the use of restrictive interventions at least two times with a positive review by the coach.</p> <p>(10) Trainers shall teach a program on the use of restrictive interventions at least once annually.</p> <p>(11) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(k) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcome (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(l) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times, the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(m) Documentation shall be the same preparation as for trainers.</p> <p> </p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure one of two audited staff (Staff #1) demonstrated competence in the proper use of</p>	V 537		

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V 537	<p>Continued From page 4</p> <p>restraints. The findings are:</p> <p>Review on 5/5/20 of Client #1's record revealed: -admission date of 5/22/19. -diagnoses of Moderate Intellectual Developmental Disability, Pedophilia, Autism Spectrum Disorder, Intermittent Explosive Disorder, Chronic Kidney Disease Stage III, and Schizophrenic Psychotic Disorder. -his most recent Crisis and Prevention Plan dated 6/28/19 indicated too much prompting can trigger him and lead to anger outbursts. -strategies included for him to leave the area/person that triggered him, give him space to be alone, do not confront him about his feelings when upset, and allow him space to calm down in his room.</p> <p>Review on 5/6/20 of Staff #1's employee record revealed: -a hire date of 8/25/19. -his most recent Evidence Based Protective Interventions (EBPI) training was 8/22/19.</p> <p>Review on 5/7/20 of a level I incident report regarding Client #1 dated 4/14/20 revealed: -the client became upset with Staff #1 due to phone restrictions and began cursing and using derogatory racial terms. -the client had a piece of "pipe" he obtained and tried to hit the staff and verbally threatened him. -"Staff used his NCI [Nonviolent Crisis Intervention] technique and avoided being injured."</p> <p>Interviews on 5/7/20 and 5/14/20 with Staff #1 revealed: -the client was upset because he wouldn't let him use the phone right at the moment he requested. -he was not denying a phone call, but was doing</p>	V 537		

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V 537	<p>Continued From page 5</p> <p>other things at the time Client #1 made the request.</p> <ul style="list-style-type: none"> <li>-the client became upset and started cursing and "throwing a tantrum."</li> <li>-he told Client #1 not to talk to him like that and to go to his room.</li> <li>-he followed the client to his room.</li> <li>-as he was following the client to his room he was asking him why was he talking to him like that.</li> <li>-he asked the client not to talk to him like that, he cooked and took care of him, etc.</li> <li>-he felt boundaries needed to be set with the client.</li> <li>-once in his room, the client reached under his bed and pulled out a metal "pipe."</li> <li>-the client came toward him with his arm raised as if to strike him with the object.</li> <li>-he grabbed the client's arm/wrist and turned/twisted while pushing his arm down in order to get the pipe.</li> <li>-during this process the client fell to the floor - he did not suffer any injury.</li> <li>-he took the pipe and locked it in the cabinet and called his supervisor.</li> <li>-this was not a technique he learned in EBPI training but he reacted in the spur of the moment.</li> <li>-looking back at the situation he would not do anything different.</li> </ul> <p>Review on 4/28/20 and 5/13/20 of the "North Carolina Incident Response Improvement System (IRIS)" website for April 2020 revealed no Level II incident report was generated for the restrictive intervention regarding Client #1 on 4/14/20.</p> <p>Interviews on 4/28/20 and 5/13/20 with the Qualified Professional/ Director of Operations revealed:</p> <ul style="list-style-type: none"> <li>-Client #1 had a history of outbursts and this incident was not unusual in that way.</li> </ul>	V 537		

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V 537	<p>Continued From page 6</p> <ul style="list-style-type: none"> <li>-the client was trying to provoke Staff #1 and intimidate him so he could get admitted to the hospital.</li> <li>-Client #1 knew at the hospital he could have unlimited phone calls to make to his mother.</li> <li>-as far as he knew the client was not restrained.</li> <li>-Staff #1 said he tried to dodge the client and grab the stick/object.</li> <li>-he tried to grab the client's wrist but did not restrain him and was not aggressive with the client.</li> <li>-when he pulled the object away from the client, Staff #1 locked it up.</li> <li>-he did not realize Client #1 had fallen while the staff was trying to get the object from him.</li> <li>-he had already counseled Staff #1 about it not being a good idea to follow the client to his room while he was escalated.</li> <li>-Staff #1 felt the client was going to damage the property in his room.</li> <li>-he notified Staff #1 anything the client may have damaged could be replaced.</li> </ul>	V 537		