

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL047-158</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/18/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CANYON HILLS TREATMENT FACILITY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>769 ABERDEEN ROAD RAEFORD, NC 28376</b>
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on 5/18/20. The complaint was substantiated (intake #NC000164883). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents.</p>	V 000		
V 105	<p>27G .0201 (A) (1-7) Governing Body Policies</p> <p>10A NCAC 27G .0201 GOVERNING BODY POLICIES</p> <p>(a) The governing body responsible for each facility or service shall develop and implement written policies for the following:</p> <p>(1) delegation of management authority for the operation of the facility and services;</p> <p>(2) criteria for admission;</p> <p>(3) criteria for discharge;</p> <p>(4) admission assessments, including:</p> <p>(A) who will perform the assessment; and</p> <p>(B) time frames for completing assessment.</p> <p>(5) client record management, including:</p> <p>(A) persons authorized to document;</p> <p>(B) transporting records;</p> <p>(C) safeguard of records against loss, tampering, defacement or use by unauthorized persons;</p> <p>(D) assurance of record accessibility to authorized users at all times; and</p> <p>(E) assurance of confidentiality of records.</p> <p>(6) screenings, which shall include:</p> <p>(A) an assessment of the individual's presenting problem or need;</p> <p>(B) an assessment of whether or not the facility can provide services to address the individual's needs; and</p> <p>(C) the disposition, including referrals and recommendations;</p>	V 105		

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

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V 105	<p>Continued From page 1</p> <p>(7) quality assurance and quality improvement activities, including:</p> <p>(A) composition and activities of a quality assurance and quality improvement committee;</p> <p>(B) written quality assurance and quality improvement plan;</p> <p>(C) methods for monitoring and evaluating the quality and appropriateness of client care, including delineation of client outcomes and utilization of services;</p> <p>(D) professional or clinical supervision, including a requirement that staff who are not qualified professionals and provide direct client services shall be supervised by a qualified professional in that area of service;</p> <p>(E) strategies for improving client care;</p> <p>(F) review of staff qualifications and a determination made to grant treatment/habilitation privileges:</p> <p>(G) review of all fatalities of active clients who were being served in area-operated or contracted residential programs at the time of death;</p> <p>(H) adoption of standards that assure operational and programmatic performance meeting applicable standards of practice. For this purpose, "applicable standards of practice" means a level of competence established with reference to the prevailing and accepted methods, and the degree of knowledge, skill and care exercised by other practitioners in the field;</p> <p>This Rule is not met as evidenced by:</p>	V 105		

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V 105	<p>Continued From page 2</p> <p>Based on record review and interviews, the facility failed to follow adoption of standards that assure operational and programmatic performance meeting applicable standards of practice by admitting a client (#1) during a Covid-19 outbreak. The findings are:</p> <p>Note: This allegation was investigated from 5/6/20 to 5/18/20. The complaint allegation was investigated as a desk review during the Covid-19 health epidemic. The investigation included staff interviews and review of facility documents and facility policy/procedures. Additional documentation from other resources associated with the facility was used also. This allegation was substantiated based on the evidence.</p> <p>Review on 5/7/20 of client #1's record revealed: - Admission date of 4/29/20 - Diagnoses including: Oppositional Defiant Disorder and Adjustment Disorder w/ mixed anxiety and depressed mood.</p> <p>Review on 5/7/20 of an email dated 4/24/20 addressed to the LME/MCO (Local Management Entity/Managed Care Organizations) written by the facility's Clinical Director revealed: -"Hi [LME Social Worker], See attached information that I have sent out to all guardians and providers today... Let me know about this placement.</p> <p>Hi All, During the difficult time, Canyon Hills Treatment Facility has developed policy to address COVID-19. We are sending out this policy because we all know or have possibly been in contact with someone that has tested positive and needed to take additional precautions.</p>	V 105		

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V 105	<p>Continued From page 3</p> <p>We are letting you know that your child and staff will be tested for COVID-19 because a staff member tested positive. At this time no child or anyone working at the facility have symptoms or is ill. I am notifying you of this by email and will keep you updated of any further changes. You may not be able to speak with your child this evening due to testing but we will make every effort assign days for them to make their calls. For the next week. Canyon Hills Treatment Facility will be on lock down to protect our residents as much as possible. We ask for your patience during this time and know that as things change minute by minute, we will keep you updated on the health and welfare of your child."</p> <p>Review on 5/7/20 of an email dated 4/27/20 addressed to the LME/MCO written by the facility's Clinical Director revealed: -"We still have availability and will still accept clients..we will be using universal precautions for all residents.. So any new admission will be isolated for 14 days to ensure that all is well. Any personnel transporting of a client will need to have mask."</p> <p>Review on 5/12/20 of a Report of Record Form dated 5/12/20 written by Department Of Health and Human Services Acting Chief revealed: - "Called [NC Division of Public Health Nurse Consultant] the regional nurse consultant assigned to [county]. [Nurse] stated the following; - If the client was not tested prior to admission he would need to have been segregated from all the current clients of Canyon Hills Treatment Facility for 14 days. This includes negative and positive clients as his status was unknown."</p> <p>Review on 5/12/20 of a diagram of Canyon Hills Treatment Facility submitted to the facility during</p>	V 105		

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V 105	<p>Continued From page 4</p> <p>their licensing process revealed:</p> <ul style="list-style-type: none"> <li>- Two resident wings with a total of 9 rooms on each side.</li> <li>- The facility was unable to totally isolate client #1 from the COVID -19 positive and negative residents for 14 days due to the structure of the facility.</li> </ul> <p>During an interview on 5/6/20 the local Communicable Disease Nurse/Nurse Supervisor stated:</p> <ul style="list-style-type: none"> <li>- "We received the initial call from [Local Health Department] reporting a positive COVID-19 test result of one of the staff at Canyon Hills Treatment Facility shortly after a second staff tested positive. Two or more positive results we consider it an outbreak of COVID-19."</li> <li>- "We went to the facility and tested the staff and children.</li> <li>- Three staff were tested by a private facility because they were symptomatic (sick at home).</li> <li>- On 4/24/20 19 residents were tested. 14 of 19 tested positive.</li> <li>- 4/27/20 through 4/29/20 over 30 staff were tested. 9 staff tested positive.</li> <li>- "All staff at the time we arrived were wearing gloves and mask. They assured us that they would keep the staff and children who tested positive isolated . We tested everyone in the nurses station of the facility. We did not enter the rooms where the children were staying."</li> <li>- Positive tested staff and children stayed at the facility for the first 14 days of Quarantine coordinated by the facility's management team. They are due to come off of Quarantine Friday 5/8/20.</li> <li>- She was unsure of how the facility was going to accommodate staff and children.</li> <li>- "Staff said they would place all negative and positive kids separate from each other. Unsure of</li> </ul>	V 105		

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V 105	<p>Continued From page 5</p> <p>the arrangement. No diagram requested."</p> <p>During an interview on 5/7/20 the facility's Clinical Director stated:</p> <ul style="list-style-type: none"> <li>- She acknowledged the facility was on a 14 day quarantine with both staff and clients</li> <li>- She acknowledged the facility admitted a new client on 4/29/20 after a confirmed outbreak of COVID-19.</li> <li>- She acknowledged a total of 14 clients tested positive for COVID-19</li> <li>- She acknowledged a total of 9 staff tested positive for COVID-19</li> <li>- "We have a total of 9 rooms on both the A wing and B wing."</li> <li>- "The A wing is where most of the positive clients are placed."</li> <li>- A total of 12 positive clients were placed on the A wing.</li> <li>- 3 of 9 rooms had double client occupancy</li> <li>- 6 of 9 rooms had single client occupancy</li> <li>- "The B wing is where negative and positive clients are placed."</li> <li>- 2 of 9 rooms had single client occupancy (Positive clients) placed in the last two rooms at the end of the hallway.</li> <li>- 7 of 9 rooms had single client occupancy (Negative clients). One of these rooms is where they placed the new admission on 4/24/2020.</li> <li>- Quarantine staff are sleeping in the following area:               <ol style="list-style-type: none"> <li>1. Common Area of each wing</li> <li>2. Conference Room</li> <li>3. Game Room</li> </ol> </li> </ul> <p>During an interview on 5/11/20 the facility's Clinical Director stated:</p> <ul style="list-style-type: none"> <li>- "We accepted [client #1] because he needed a placement. Maybe it wasn't the best decision, but we placed him and notified everyone involved. I</li> </ul>	V 105		

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V 105	<p>Continued From page 6</p> <p>was in contact with [LME/MCO] regarding placement from 4/23/20 through 4/29/20." - She acknowledged the following facility staff was involved with making the decision to place client #1 during the COVID-19 outbreak Quality Assurance/ Quality Improvement, Clinical Director, Social Worker, Facility Manager, Owner, and Medical Director). - She acknowledged they received the clients test results on 4/27/20 prior to the admission of client #1 on 4/29/20</p> <p>During an interview on 5/11/20 the Medical Director of a local Health Department stated: - She acknowledged the facility had a COVID-19 outbreak. Both clients and staff tested positive. - "The facility was given specific instructions not to admit any kids until all documentation on the facility was reviewed and approved by the Health Department. They admitted another kid 4/29/20" - "Everyone will be retested on 5/11/20."</p> <p>During an interview on 5/11/20 the LME/MCO Social Worker stated: - She acknowledged coordinating a new admission placement with the facility's Clinical Director. - She acknowledged client #1 was placed at the facility on 4/29/20 - "The facility only informed me of two staff being positively tested for COVID-19. They never disclosed the results of the test. If I had known of those results I would have never placed my client there."</p> <p>During an interview on 5/11/20 the Direct Care Staff A wing stated: - He confirmed that he tested positive for COVID-19 - "I only worked at the facility through 5/1/20. I</p>	V 105		

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V 105	<p>Continued From page 7</p> <p>Quarantine at home after 5/1/20 - "I worked with the positive kids on the A wing."</p> <p>During an interview on 5/11/20 the Direct Care Staff B wing stated: - She confirmed that she tested positive for COVID-19 - She was assigned to B wing - "There were only two positive kids on the B wing. The other kids were negative." - She was assigned only to the 2 kids who tested positive for COVID-19. - There was a total of 3 bathrooms on the wing. The two positive diagnosed clients were assigned to a separate bathroom from the negative clients. - Staff stayed in the common area of the wing on sleeping cots. - Clients receive three meals per day in their individual bedrooms. - Client receive there medications in their bedrooms</p> <p>During an interview on 5/12/20 the facility's Medical Director stated: -"We were advised by the Health Department to follow the CDC (Center for Disease Control and Prevention) Guidelines. No specific guideline instructions from the Health Department." - She confirmed the facility upon finding out the results of the COVID-19 test, decided to do a 14 day quarantine for staff and kids -"We met and discussed as a team if we should admit the kid (client #1) on the 29th (4/29/20). We made the decision to admit the kid due to him not having any other placement options. His father is terminally ill and his mother is on drugs. He was placed on the B wing with the negative and two positive tested kids."</p> <p>During an interview on 5/12/20 the facility's</p>	V 105		



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V 105	<p>Continued From page 8</p> <p>Owner and Quality Assurance/Quality Improvement staff stated:</p> <ul style="list-style-type: none"> <li>- They acknowledged admitting a new client to the facility on 4/29/20. "The client needed a placement and we made a decision as a team."</li> <li>- "There's a total of 3 bathrooms on each wing A &amp; B."</li> <li>- "Staff use the bathroom in the front of the building."</li> <li>- "The kids are assigned to specific bathrooms closest to their bedrooms."</li> <li>- "Negative and positive kids are not sharing the same bathrooms. Each bathroom is equipped with showers."</li> <li>- "Fifteen staff worked during the 14 day Quarantine. Each wing (A &amp; B) has 4 staff on each side. In addition, there are three additional staff on shift (Nurse, Social Worker, and Facility Manager).</li> <li>- They acknowledge 2 positive tested staff worked during the Quarantine. "Each wing has a positive staff worker with the positive kids."</li> <li>- "Shift change at midnight. Staff remained in the building during shift change."</li> </ul> <p>During an interview on 5/12/20 the Director of a local Health Department stated:</p> <ul style="list-style-type: none"> <li>- "It was poor judgement to admit a client in the midst of a outbreak."</li> <li>- "We was not aware of the new admission until [DHHS] informed me."</li> </ul> <p>Review on 5/18/20 of the facility's Plan Of Protection written by the Administrative Team dated 5/17/20 revealed:</p> <p>"Rule Violation Cited: NCAC27G.0201 (7) H Adoption of standards that assure operational and programmatic performance meeting applicable standards of practice. For this</p>	V 105		

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V 105	<p>Continued From page 9</p> <p>purpose, "applicable standards of practice" means a level of competence established with reference to the prevailing and accepted methods, and the degree of knowledge, skill and care exercised by other practitioners in the field</p> <p>Plan of Protection - Completed by Facility Staff (Attach additional pages if needed)</p> <p>What will you immediately do to correct the above rule violations in order to protect clients from further risk or additional harm? Canyon Hills Treatment Facility will not admit any child/adolescent without getting them tested prior to admission. Canyon Hills Treatment Facility will require any child/adolescent being considered for treatment be tested at their current placement/referring agency and receive negative results prior to admission.</p> <p>Describe your plans to make sure the above happens.</p> <p>Canyon Hills Treatment Facility will implement the following standards regarding emergency provisions of total isolation:</p> <ol style="list-style-type: none"> <li>1. No child/adolescent will be a admitted into the facility without prior testing at their local health department, a negative result must be received prior to admission is considered.</li> <li>2. Temperature Checks - will continue with both consumers and staff</li> <li>3. Mask - consumers and staff will continue to wear mask daily.</li> <li>4. Washing hands - consumer and staff will continue to wash their hands for at least 20 seconds</li> <li>5. Sanitizing stations have been installed at various locations in the facility</li> <li>6. Social Distancing - consumers and staff will</li> </ol>	V 105		

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V 105	<p>Continued From page 10</p> <p>continue to implement social distancing practices.</p> <p>7. Clean &amp; Disinfect frequently touched objects and surfaces using EPA-registered disinfected</p> <p>Note: Before accepting any kids during an outbreak, CHTF will contact DHHS for further guidance."</p> <p>Client #1 was admitted into the facility during a Covid-19 outbreak at facility. He was placed on the B wing of the facility with two clients who had tested positive for Covid-19. In addition, a staff who tested positive for Covid-19 was working on the B wing. The facility's administrative team made the decision to admit Client #1 because he did not have any other options for a placement. The facility received positive test results for 14 of 19 clients on 4-27-20. However, they admitted Client #1 on 4-29-20 after the Health Department determined the facility had a Covid-19 outbreak. The facility did not disclose to the placement agency that the facility had a Covid-19 outbreak prior to admitting Client #1 into the facility. The facility was not designed to isolate Client #1 from the negative and positive diagnosed clients according to the CDC guidelines.</p> <p>This deficiency constitutes a Type A1 violation for serious neglect and must be corrected within 23 days. An administrative penalty of \$3,000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500 per day will be imposed each day the facility is out of compliance beyond the 23rd day</p>	V 105		