

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-103	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 05/22/2020
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

RIVERVIEW GROUP HOME

**421 RIVERVIEW DRIVE
ASHEVILLE, NC 28806**

(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 5/22/20. The complaint was unsubstantiated (Intake #NC00165137). A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Individuals of all Disability Groups/Mental Illness.	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. (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision	V 110	RHA Health Services will ensure all direct support staff are trained appropriately and thoroughly prior to working direct care as evidenced by ensuring all require New Hire training is completed (including ProAct A & B) prior to the employee working directly with the people supported. If the direct care staff is unable to complete the required New Hire training in a timely manner, the staff will be placed on unprotected leave until they are able to complete the training completely. A New Hire training schedule will be developed for each new employee to track their progress with completing all New Hire training. This process will be monitored monthly by the Residential Team Leader, QP, Business Manager and Administrator through the Workday Learning Audit Report and Onboarding Status Report. RECEIVED JUN 09 2020 DHSR-MH Licensure Sect	7/21/2020

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

6899

9QH411

If continuation sheet 1 of 5

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V 110	<p>Continued From page 1</p> <p>plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure paraprofessionals demonstrated knowledge, skills and abilities to include interpersonal and communication skills for the population served for 1 of 1 Former Staff (FS #1). The findings are:</p> <p>Review on 5/20/20 of FS#1's personnel file revealed: -hire date of 1/2/19 with job title of Direct Support Professional. -her most recent Nonviolent Crisis Intervention training was 1/17/20.</p> <p>Review on 5/20/20 of an Investigation Summary report regarding an incident on 5/7/20 revealed: -it was reported FS#1 made threatening comments to the clients during a house meeting. -FS #1 made threats of retaliation and physical harm by stating whomever went behind her back and reported her better "dig 2 graves." -FS #1 was immediately suspended pending the investigation. -it was determined to terminate FS #1 "due to inappropriate personal conduct." -she was terminated 5/16/20.</p> <p>Review on 5/20/20 of Client #1's record revealed: -admission date 2/2/16. -diagnoses of BiPolar Disorder, Mood Disorder, Chronic Pancreatitis, and Type II Diabetes.</p>	V 110		

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V 110	<p>Continued From page 2</p> <p>Interview on 5/21/20 with Client #1 revealed: -he did not remember FS #1 stating to dig a grave. -he remembered she referred to a deep hole for whoever complained about her. -he thought she meant "sort of reap what you sow." -she said this in a very firm tone. -he did not feel threatened but felt FS #1 created an unfriendly environment and was unprofessional.</p> <p>Review on 5/20/20 of Client #2's record revealed: -admission date of 9/24/01. -diagnoses of BiPolar I Disorder - mixed type, and Generalized Anxiety Disorder.</p> <p>Interview on 5/21/20 with Client #2 revealed: -FS #1 called a house meeting and said "OK, let's talk." -she informed them someone filed a complaint on her. -she said someone was trying to get her fired, that she was not going anywhere, and someone needed to dig 2 graves. -this made him very anxious. -the Qualified Professional (QP) was at the facility within an hour and told FS #1 to leave. -he had not seen her again. -he felt FS #1 was unprofessional and always stayed on them to do their chores. -he had lived at the facility for 18 years and this incident was very rare.</p> <p>Review on 5/20/20 of Client #3's record revealed: -admission date of 3/21/19. -diagnoses of Schizophrenia, Alcohol Use Disorder, severe, Nicotine Use Disorder, mild, Stimulant Disorder Sustained Remission and</p>	V 110		

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If continuation sheet 3 of 5

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V 110	<p>Continued From page 3</p> <p>Trichiasis.</p> <p>Interview on 5/21/20 with Client #3 revealed: -he felt FS #1 was not doing her job and she was very unprofessional. -during the house meeting she said God had her back and talked about digging graves. -he did not feel threatened by this, but he knew it was not right. -he felt this job was not for her, she was always on them to do their chores.</p> <p>Interview on 5/21/20 with the QP revealed: -FS #1 was initially assigned to a sister facility. -she was noted to be gruff and unfriendly. -this was addressed with her by her previous supervisor as poor job performance. -she was transferred to this facility and things went well for about a month. -she was written up, he estimated about 3 hours prior to this incident, for inappropriate personal phone calls on duty, medication errors, and treating the residents with respect. -residents had complained about her being gruff when telling them to complete their chores. -when she was written up he recalled making a clear statement to FS #1 warning that retaliation could result in her termination. -then she turned around and said this to residents about digging graves. -she did not work another shift after she was suspended on the evening of 5/7/20.</p> <p>Interview on 5/22/20 with FS #1 revealed: -that was "B*** S***." -she had worked in this field since 2003 and was 60 years old. -"What would I look like telling clients to dig a grave." -"I trust God...don't call my house no more." (She</p>	V 110		

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V 110	Continued From page 4 then hung up the phone.)	V 110		



June 1, 2020

Attn: Sally Thayer

Re: Riverview Complaint Survey completed May 22, 2020

Dear Ms. Thayer,

Please find the enclosed Plan of Correction for the Riverview Group Home with RHA Health Services. If you have any questions feel free to contact me at john.carithers@rhanet.org or call me at 828-817-9565.

Thank you,

A handwritten signature in black ink, appearing to be "John M. Carithers", written in a cursive style.

John M. Carithers
Facility Administrator
828-817-9565
john.carithers@rhanet.org

145 Cane Creek Ind. Park Rd
Suite 250
Fletcher, NC 28732

Phone: 828.684.1940
Fax: 828.684.1553

RECEIVED
JUN 09 2020
DHSR-MH Licensure Sect