

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL092-922</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>07/10/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ALPHA HOME CARE SERVICES #9</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>712 ROCKVILLE ROAD</b> <b>WAKE FOREST, NC 27587</b>
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(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 7/10/20. The complaint (Intake # NC00165897) was unsubstantiated.  This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.	V 000		
V 513	27E .0101 Client Rights - Least Restrictive Alternative  10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE (a) Each facility shall provide services/supports that promote a safe and respectful environment. These include: (1) using the least restrictive and most appropriate settings and methods; (2) promoting coping and engagement skills that are alternatives to injurious behavior to self or others; (3) providing choices of activities meaningful to the clients served/supported; and (4) sharing of control over decisions with the client/legally responsible person and staff. (b) The use of a restrictive intervention procedure designed to reduce a behavior shall always be accompanied by actions designed to insure dignity and respect during and after the intervention. These include: (1) using the intervention as a last resort; and (2) employing the intervention by people trained in its use.  This Rule is not met as evidenced by:	V 513		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 513	<p>Continued From page 1</p> <p>Based on interviews, the governing body failed to assure the home promoted a respectful environment and used the least restrictive setting and methods for 6 of 6 clients (#1 - #6). The findings are:</p> <p>During interviews on 7/7/20, 3 of 3 clients interviewed reported:</p> <ul style="list-style-type: none"> <li>- the refrigerator was locked all day and all night</li> <li>- they had to get permission before going into the kitchen,</li> <li>- when asked, staff would get them things from the refrigerator</li> </ul> <p>During an interview on 7/7/20 staff #2 reported:</p> <ul style="list-style-type: none"> <li>-she was a relief staff and had worked for the agency for approximately 9 years</li> <li>-the lock on the refrigerator was locked all day and all night because clients would eat all the food if it was left open</li> <li>- clients could get ice and water from the door of the refrigerator, otherwise they asked staff if they wanted something.</li> <li>- there was one client who ordered out anytime he wanted something to eat</li> </ul> <p>During an interview on 7/10/20, staff #1 reported:</p> <ul style="list-style-type: none"> <li>- the refrigerator wasn't always locked, mostly it was done at night to prevent clients from eating throughout the night</li> <li>- they were trying to limit sugar and keep the refrigerator as sanitized as possible.</li> <li>- she was not sure why it was locked but it had been since she started working there</li> </ul>	V 513		