

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL001-164</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/18/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>NEW DIMENSIONS INTERVENTIONS, INC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>602 PIEDMONT WAY BURLINGTON, NC 27215</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 on September 18, 2020. The complaint was unsubstantiated (Intake #NC00168083). Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G.5600A Supervised Living for Adults with Mental Illness	V 000		
V 108	27G .0202 (F-I) Personnel Requirements  10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious	V 108		

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

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V 108	<p>Continued From page 1</p> <p>and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure one of four audited staff ( staff #1 ) had training in Cardiopulmonary Resuscitation (CPR) and First Aid (FA). The findings are:</p> <p>Review on 9/17/20 of the facility's personnel files revealed:</p> <ul style="list-style-type: none"> <li>- Staff #1 had a documented hire date of 8/20/12.</li> <li>- Staff #1 was hired as a Habilitation Technician.</li> <li>- Staff #1's CPR and FA training expired on 8/14/20.</li> <li>-There was no documentation of current CPR and FA training for staff #1.</li> </ul> <p>Interview with the Assistant Director on 9/18/20 revealed:</p> <ul style="list-style-type: none"> <li>-Staff #1's CPR and FA training expired last month.</li> <li>-She was not sure if staff #1 had completed a new training.</li> <li>-She thought staff #1 talked to a local trainer about getting the CPR and FA training.</li> <li>-Staff #1 does work alone with the clients in the group home.</li> <li>-Staff #1 just texted her and said she did not have the CPR and FA training yet.</li> <li>-Staff #1 just informed her the CPR and FA training is scheduled for September 22, 2020.</li> <li>-She confirmed staff # 1 had no documentation of current training in CPR and FA.</li> </ul>	V 108		

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V 112	Continued From page 2	V 112		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <ol style="list-style-type: none"> <li>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</li> <li>(2) strategies;</li> <li>(3) staff responsible;</li> <li>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</li> <li>(5) basis for evaluation or assessment of outcome achievement; and</li> <li>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.</li> </ol> <p>This Rule is not met as evidenced by: Based on observation, record review and interviews, the facility failed to develop and implement strategies to address the needs for</p>	V 112		

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V 112	<p>Continued From page 3</p> <p>one of four current clients (#1). The findings are:</p> <p>Review on 9/16/20 of client #1's record revealed: -Admission date of 7/30/20. -Diagnoses of : Schizophrenia, Hypothyroidism, Dementia, Neurosyphilis, Hyperlipidemia, Vitamin Deficiency, Generalized Edema, Respiratory Syncytial Virus and Incontinence. -Person Centered Plan dated 8/11/20 had no strategies to address Incontinence issues.</p> <p>Observation on 9/16/20 at approximately 12:30 PM in the den area revealed: -There was no couch and there was one chair in the den area.</p> <p>Interview with the Assistant Director on 9/16/20 revealed: -Client #1 had issues with frequent urination and incontinence. -Client #1 had been peeing on the couch. -The couch started smelling like "pee", the Licensee throw the couch away. -The Licensee just throw the couch out about a week ago. -She confirmed client #1 had no strategies to address his issues with incontinence.</p> <p>Interview with the Licensee on 9/16/20 revealed: -Client #1 had issues with urinating. -Client #1 had "peed" all over the couch. -The couch was smelling like urine and he decided to get rid of it. -Client #1 takes a pill that makes him urinate a lot. -Client #1 does wear diapers due to the urinating. -He confirmed client #1 had no strategies to address his issues with incontinence.</p>	V 112		