

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-573	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 09/28/2020
NAME OF PROVIDER OR SUPPLIER MEEKS #2		STREET ADDRESS, CITY, STATE, ZIP CODE 4125 EDMONT ROAD WENDELL, NC 27591		
(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 09/28/2020. The complaint was substantiated (Intake #NC00167746). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC.5600C Supervised Living for Adults with Developmental Disability.	V 000		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses;	V 289		

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

TITLE

(X6) DATE

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V 289	<p>Continued From page 1</p> <p>(4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses;</p> <p>(5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or</p> <p>(6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e) (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL).</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to meet their license capacity affecting 6 of 6 clients (#1-#6) & they failed to meet the scope of their program by admitting 1:1 audited client (#5) without a</p>	V 289		

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V 289	<p>Continued From page 2</p> <p>diagnosis of Developmental Disability. The findings are:</p> <p>Review on 9/23/20 of client #5's FL2 revealed:</p> <ul style="list-style-type: none"> -He was admitted to the facility on 01/28/20 -Diagnoses of Schizophrenia, Hx of Cannabis Use, Neutropenia, Constipation, Seizure/Myoclonus, and Vit D deficiency <p>A. The facility failed to meet the capacity of its program due to the following:</p> <p>Observation on 9/23/20 at 2:03PM of the facility's clients revealed:</p> <ul style="list-style-type: none"> -6 clients presented themselves to say hi and introduce themselves <p>During interview on 9/23/20 the Licensee reported:</p> <ul style="list-style-type: none"> -The license capacity was 5 -She thought client #5 would have had an apartment by now -The Assertive Community Treatment (ACT) team was currently working with client #5 to find housing -She discharged client #5 April 2020 because she had not received any funding for him - the COVID (Corona Virus Disease) slowed the process down -She needed to pay her staff so she admitted the 6th client on August 28, 2020 <p>B. The facility failed to ensure a client's diagnosis met the scope of its program:</p> <p>During interview on 9/23/20 client #5 reported:</p> <ul style="list-style-type: none"> -He had resided in the facility for about 9 months - He was his own guardian -He would like to live on his own 	V 289		

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V 289	Continued From page 3 During interview on 9/23/20 Licensee reported: -The facility was previously a 5600A however in 2019 it changed to a 5600C -She didn't realize that client#5 didn't have a developmental disability During interview on 9/25/20 the QP reported: -She has worked at the facility for about 7 years -She visits the facility about 2-3 times per week -She forgets, at times, the facility is now a 5600C because she was used to it being a 5600A	V 289		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices,	V 291		

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V 291	<p>Continued From page 4</p> <p>needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to coordinate services with other Qualified Professionals (QP) responsible for the treatment/habilitation for of 1:1 audited client (#5). The findings are:</p> <p>Review on 9/23/20 of client #5's record revealed: -He was admitted on 01/28/20 -Diagnoses of Schizophrenia, Hx of Cannabis Use, Neutropenia, Constipation, Seizure/Myoclonus, and Vit D deficiency -Client #5 was referred by the Managed Care Organization (MCO) due to homelessness</p> <p>During interview on 9/23/20 client #5 reported: -He was his own guardian -The Assertive Community Treatment (ACT) team was helping him find placement -He would like to live on his own -He had spoken with the ACT team on the phone</p> <p>During interview on 9/23/20 the Licensee reported: -There were no clients involved with the ACT team -During the Corona Virus Disease pandemic (COVID), no visitors were allowed in the home but could visit outside -During further questioning, she remembered that client #5 was in contact with the ACT team -He may have obtained the number when he was</p>	V 291		

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V 291	<p>Continued From page 5</p> <p>previously hospitalized</p> <ul style="list-style-type: none"> -He began to call them in June or July 2020 -She believed the QP was in contact with the ACT team <p>During interview on 9/25/20 the MCO reported:</p> <ul style="list-style-type: none"> -Client#5 started to call her around June 15th -He wanted to move out of the facility -The facility did not allow her to meet with client #5 during the initial intake process -She attempted numerous calls to the owner (she mentioned the QP's name) -She called the QP on 8/12/20 to explain how she could work collaboratively with the ACT team -Visits were allowed shortly after this phone call -She requested client #5's award letter for social security from the QP in July 2020 -the award's letter was needed in order to get on the waitlist for housing -Client #5 had requested the award letter since July 2020 -Client #5 cannot get on the waitlist without the award letter <p>During interview on 9/25/20 the QP reported:</p> <ul style="list-style-type: none"> -She had been with the facility for about 7 years -In April, client #5 asked if anyone from the ACT team had called her and she said no -client #5's MCO called in July 2020 due to not being able to reach client #5 -She told the MCO to call the facility back and she would inform staff to let her speak with him -The ACT team went to the facility without her knowledge to speak with client #5 -Staff informed her they had on a mask and wanted to speak with client #5 outside -She let client #5 work with the ACT team on his own since he was his own guardian -She had not spoken with the ACT team in reference to housing for client #5 	V 291		

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V 291	<p>Continued From page 6</p> <ul style="list-style-type: none"> -Client #5 told her he needed his award letter (August 2020) -She didn't have access to any financial information that concerned client#5 -He was referred to the Licensee <p>During interview on 9/28/20 the ACT team lead reported:</p> <ul style="list-style-type: none"> -Client #5 was referred to the program by the MCO -He wanted to work with the ACT team -The ACT program was a multidisciplinary team that helped clients reach their goals -She went to the facility on 7/27/20 to see client #5 but the staff would not allow her to see him -She explained that even with COVID, she still needed to meet with client #5 even if it was outside -Staff refused to allow her to see him -She referred this case back to the MCO since she was unable to make contact with client #5 -She was able to see client #5 on 8/25/20 <p>During interview on 9/28/20 the Licensee reported:</p> <ul style="list-style-type: none"> -She did not have any contact with the MCO or ACT team -The QP handled the clients' services -She had looked for apartments for client #5 on her own -She told the QP the (end of August, beginning of September) to call and check on housing with the ACT team -She thought client #5 would have moved out of the facility by now -Client #5 received social security while he was hospitalized -She had not received any funds for client #5 since he moved in the facility -She tried to apply for client #5's social security 	V 291		

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V 291	Continued From page 7 benefits but had not received any funds -She mailed a packet to social security in February 2020 and believed client #5's award letter was included in the packet -she did not keep a copy of the awards letter -Client #5 had a phone interview with social security in August 2020 -He received a package from social security this past weekend -She planned to visit the facility today (9/28/20) to review the packet	V 291			