

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL080-173	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/17/2020
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NAME OF PROVIDER OR SUPPLIER ACE PROGRAM	STREET ADDRESS, CITY, STATE, ZIP CODE 1155 CHILDREN'S CIRCLE ROCKWELL, NC 28138
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on 12/17/20. One complaint was substantiated(Intake #NC170649). One complaint was unsubstantiated(Intake #NC170340). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1300 Residential Treatment for Adolescents and Children.</p>	V 000		
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> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(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.</p>	V 112		

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

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to develop and implement strategies to address client needs affecting 4 of 5 former clients (FC#4, FC#6, FC#7, FC#8). The findings are:</p> <p>Review on 11/24/20 and 11/30/20 of facility incident reports from 8/1/20-11/30/20 revealed the following dates clients ran away from the facility: -FC#4: 8/7, 9/19, 9/21, 9/23; -FC#6: 8/2, 9/17, 9/18, 9/21, 9/25, 9/26, 9/27, 9/28; -FC#7: 9/19, 9/26, 9/29, 9/30, 10/1, 10/3, 10/10, 10/12, 10/14, 10/15; -FC#8: 9/20, 9/21, 9/28, 9/29, 9/30, 10/1, 10/15, 10/16.</p> <p>Review on 11/24/20 and 12/7/20 of FC#4's record revealed: -admission date of 7/20/20; -diagnoses of Adjustment Disorder(D/O) w/Disturbance of Conduct and Oppositional Defiant Disorder(ODD); -discharge date of 9/25/20; -admission assessment dated 7/20/20 documented FC#4 was in the custody of his relatives, had three psyche hospitalizations for suicidal ideation/homicidal ideation, told lies, steals, had two incidents of running away(AWOL) in the last month, refused to do as instructed and was hospitalized for being a flight risk; -treatment plan dated 6/26/20 documented the</p>	V 112		

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V 112	<p>Continued From page 2</p> <p>following goals: reduce temper tantrum behavior by employing coping skills to assist in frustration tolerance, increase positive peer interactions by utilizing empathy and conflict resolution skills, maintain healthy status and condition physically, take all medications, maintain hygiene, attend all appointments, learn replacement coping skills for illegal community involvement, positively respond to authority figures, comply with rules or accept consequences for non-compliance, improve on symptoms of hyperactivity and impulsivity; -no updated goals/strategies to address AWOL behaviors documented in the treatment plan or crisis plan.</p> <p>Review on 11/24/20 and 12/3/20 of FC#6's record revealed: -admission date of 6/11/20 -diagnoses of Disruptive Mood Dysregulation D/O(DMDD), Post Traumatic Stress D/O(PTSD), Attention Deficit Hyperactivity D/O(ADHD), Reactive Attachment D/O(RAD), Disruptive Behavior D/O; -discharge date of 9/29/20; -admission assessment dated 6/11/20 documented FC#6 was in Psychiatric Residential Treatment Facility(PRTF) for 15 months, history of suicidal ideation, multiple placements, lived with multiple relatives prior to social services custody, anger issues, victim of neglect and abuse, struggles with peer interactions and following directions; -treatment plan dated 5/15/20 documented the following goals: learn and practice skills to assist in interacting with peers and adults w/o engaging in aggression, experiencing frustration, anger or other emotions when told no, display appropriate social interactions without being rude, angry, oppositional or demanding behaviors, improve judgement/decision making abilities comply with</p>	V 112		

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V 112	<p>Continued From page 3</p> <p>rules/directions given by authority figures; -no updated goals/strategies to address AWOL behaviors documented in the treatment plan or crisis plan.</p> <p>Review on 11/24/20 and 12/4/20 of FC#7's record revealed: -admission date of 6/25/20 -diagnoses of Unspecified Trauma and Stressor-Related Disorder, Sibling Relational Problem, Conduct D/O, Child Neglect Abandonment; -discharge date of 10/26/20; -admission assessment dated 6/25/20 documented FC#7 had several school suspensions, truancy and failing grades, placed on probation for a year due to Breaking&Entering, placed in social services custody, was placed in an emergency placement until admitted to a level I group home on 1/28/20. While in the level I placement, FC#7 demonstrated verbal and physical aggression, poor emotional regulation, poor anger management, lack of respect for authority, destruction of property, constant use of profanity and engaged in physical altercations with peers. FC#7 was discharged from the level I group home and admitted to the level II program(with same agency) on 6/25/20; -treatment plan dated 5/29/20 documented the following goals: improve behavior, attitude and mood, manage frustration in positive manner, share positive experiences each week, develop and utilize effective coping skills to decrease anxiety, be respectful and comply with directives, learn to manage emotions, eliminate verbal/physical aggression, improved communication of emotions, thoughts and feelings, improve decision-making, comply with rules and directions; -no updated goals/strategies to address AWOL</p>	V 112		

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V 112	<p>Continued From page 4</p> <p>behaviors documented in the treatment plan or crisis plan.</p> <p>Review on 11/24/20 and 12/4/20 of FC#8's record revealed: -admission date of 3/25/20; -diagnoses of Generalized Anxiety D/O, Major Depressive D/O, PTSD unspecified; -discharge date of 10/21/20; -admission assessment dated 3/25/20 documented FC#8 was adopted with his two siblings after being abandoned at hospital at birth, adoptive mother diagnosed with dementia in 2016 and as a result, children were left unsupervised, family home burned down and they lived in a hotel, evicted from several hotels due to client and siblings' behaviors, social services took custody on 8/4/16. Adoptive mother died 8/27/19. Prior placements at level III and PRTF. Placed at PRTF for suicidal ideation; -treatment plan dated 3/3/20 documented the following goals: accept choices made, focus on his authentic self, increase social interactions and positive encouragement with his siblings, increase making choices which serve his ability to be a leader and positive role model, increase in reframing automatic all-or-nothing thinking in the moment, increase use of coping skills, learn and use positive emotional regulation skills and improve ability to accept feedback from staff; -no updated goals/strategies to address AWOL behaviors documented in the treatment plan or crisis plan.</p> <p>Interview on 11/30/20 with Case Manager(CM) #1 revealed: -Case Manager for FC#8, FC#6 and FC#4; -duties included treatment plans for clients and CFT meetings; -met w/FC#8 regarding his AWOLS;</p>	V 112		

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V 112	<p>Continued From page 5</p> <ul style="list-style-type: none"> -FC#8 had a safety plan with three coping skills; -FC#8 got to the point he did not care about his safety plan and walked out of his safety plan meeting; -kept telling FC#8 his behaviors will end him up in place he did not want to be; -FC#8 was not working on his PCP goals; -FC#6 ran off and on and was manipulated by peers; -FC#6 had issues with going AWOL; -came up with a safety plan for FC#6; -Talked with FC#6 one day for three hours; -FC#6 was sent to a PRTF; -FC#4 went AWOL and was charged for breaking in cars; -FC#4 was moved to a PRTF; -FC#4 said in a Child and Family Team(CFT) meeting staff must meet his demands before he would work on his treatment plan goals; -"Once he got set off, he set off;" -FC#4 thought it was funny and wanted people to chase him; -FC#4 told her to "take the safety plan and shove it" and walked out of the meeting; -had CFT Meetings to discuss client behaviors. <p>Interview on 11/30/20 with CM #2 revealed:</p> <ul style="list-style-type: none"> -case manager for FC#7; -duties include treatment plans for FC#7; -FC#7 cared about his goals; -FC#7 got involved w/FC#8; -had no AWOL behaviors prior; -FC#7 was a follower; -AWOLs started w/FC#; -she would go find FC#7 on campus and talked to him about his safety; -also FC#7 talked to his therapist; -had emergency CFT meeting to discuss his behaviors and AWOLs. 	V 112		

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V 112	<p>Continued From page 6</p> <p>Interview on 11/30/20 with the Program Manager revealed:</p> <ul style="list-style-type: none"> -AWOLS started with some youth in the level I home; -those youth became very frustrated and started AWOLs; -got other clients involved; -ring leader in was FC#8 who encouraged other youth in the facility to go AWOL; -clients were running around campus and in the woods; -staff continued to try talk to clients about safety and tried to use incentives to keep clients from going AWOL, -encouraged clients to stay and reminded them of their pending court dates; -sometimes it worked, sometimes it didn't; -she came on the weekend and talked to the clients about AWOLs; -clients ran but did not leave campus; -client built a fort and was congregating in the woods on campus behind the cottage; -staff called police and made reports regarding the AWOLs; -facility does not use restraints; -had campus police on a rotation from 6/7pm-11pm/12am on campus; -had nightshift staff who had a check list and monitored clients; -set alarm before clients go to bed; -if a client went AWOL, the alarm went off; -reviewed runaway policy with staff; -CFT meetings-case managers gave updates on client behaviors; -case manager responsible for treatment plans and CFT meetings. 	V 112		