

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL026-924</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>04/27/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PRECIOUS HAVEN #2</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>6033 CONCHO COURT FAYETTEVILLE, NC 28303</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	<p><b>INITIAL COMMENTS</b></p> <p>An annual, complaint and follow up survey was completed on April 27, 2021. The complaints were substantiated (intakes #NC00176331 and #NC00176389). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p> <p>According to the Quality Assurance Director there are no clients being served at the facility. The last time clients were served at the facility was April 17, 2021.</p>	V 000		
V 110	<p><b>27G .0204 Training/Supervision Paraprofessionals</b></p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <p>(a) There shall be no privileging requirements for paraprofessionals.</p> <p>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p> <p>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(e) Competence shall be demonstrated by exhibiting core skills including:</p> <p>(1) technical knowledge;</p> <p>(2) cultural awareness;</p> <p>(3) analytical skills;</p> <p>(4) decision-making;</p>	V 110	<p><b>DHSR - Mental Health</b></p> <p><b>MAY 26 2021</b></p> <p><b>Lic. &amp; Cert. Section</b></p>	

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*President*  
TITLE

*5/18/21*  
(X6) DATE

## Appendix 1-B: Plan of Correction Form

### Plan of Correction 04/27/2021

Please complete all requested information and mail completed Plan of Correction form to:  
**Division of Health Service Regulation  
 Mental Health Licensure and Certification Section  
 Attn: Tareva Jones & Connie Anderson  
 2718 Mail Services Center  
 Raleigh, NC 27699-2718**

In lieu of mailing the form, you may e-mail the completed electronic form to:

<b>Provider Name:</b>	Precious Haven, Inc.	<b>Phone:</b>	(910) 868-6092
<b>Provider Contact Person for follow-up:</b>	Tonya Pone QI Director Kami Dale, Residential Placement Coordinator Kelvin Noble, Vice President	<b>Fax:</b>	(910) 868-8882
<b>Address:</b>	6033 Concho Court Fayetteville, NC 28303	<b>Email:</b>	precioushaven@aol.com
			<b>Provider #:</b> MHL-026-924

Finding	Corrective Action Steps	Responsible Party	Timeline
<b>V110.27G.0204 Competencies and Supervision of Paraprofessionals</b>  Based on records reviews and interviews, two of three audited paraprofessional staff (#1 and # 2) failed to demonstrate the knowledge, skills and abilities required by the population served.	Precious Haven, Inc. will ensure paraprofessional staff are supervised by an associate professional or qualified professional.  Precious Haven, Inc. will ensure paraprofessional staff demonstrate knowledge, skills and abilities required by the population served.  Precious Haven, Inc. will ensure that qualified and associate professional staff employ a competency-based rulemaking system which include technical knowledge, cultural awareness, analytical skills, decision making, interpersonal skills, communication and clinical skills.  Precious Haven, Inc. will ensure that individualized supervision plans are developed and maintained.	Administrator/Owner - will inform LP/QA/QI directors of changes  Client Right Committee/QA Committee – monitor/review  LP/QA/QI Director – update forms and monitor compliance	<b>Implementation Date:</b> 05/14/2021 – On going  <b>Projected Completion Date:</b> 06/01/2021
<b>V118.27G.0209 (C) Medication Requirements</b>  Based on record reviews, observations and interviews, the facility failed to administer medications on the written order of a physician and failed to keep MAR's current affecting three of three audited former clients (FC # 1, # 3 and # 4).	Precious Haven, Inc. will ensure prescription or non-prescription drugs are only administered to a client on the written.  Precious Haven, Inc. will ensure that each consumer has a Medication Administration Record (MAR) of all drugs administered to each client.  Precious Haven, Inc. will ensure that each client's MAR is kept current.  Precious Haven, Inc. will ensure that each client's requests for medication changes or checks are recorded and kept with the MAR file followed up by appointments or consultation with a physician.	Administrator/Owner - will inform LP/QA/QI directors of changes  Client Right Committee/QA Committee – monitor/review  LP/QA/QI Director – update forms and monitor compliance	<b>Implementation Date:</b> 06/01/2021 – On going  <b>Projected Completion Date:</b> 07/15/2021

<p><b>V293.27G.1701 Residential Tx. Child/Adol – Scope</b></p> <p>Based on record review and interviews, the facility failed to coordinate with other individuals within the child or adolescent’s system of care and failed to ensure safety and de-escalated out of control behaviors for 1 of 3 audited former clients (FC # 1).</p>	<p>Precious Haven, Inc. will ensure that each client received coordination of care with other individuals and agencies within the child or adolescent’s system of care.</p> <p>Precious Haven, Inc. will ensure services are designed to minimize the occurrences of behaviors related to functional deficits, ensure safety and de-escalated out of control behaviors, assist the child or adolescent in the control behaviors including frequent crisis management with or without physical restraint.</p>	<p>Administrator/Owner - will inform LP/QA/QI directors of changes</p> <p>Client Right Committee/QA Committee – monitor/review</p> <p>LP/QA/QI Director – update forms and monitor compliance</p>	<p><b>Implementation Date:</b> 06/01/2021 – On going</p> <p><b>Projected Completion Date:</b> 07/15/2021</p>
<p><b>V293.27G.1701 Residential Tx. Child/Adol – Trans or Discharge</b></p> <p>Based on interviews and record reviews, the facility failed to ensure requirements were met for the non-emergency discharge/transfer of clients between sister facilities affecting 3 of 3 former clients audited (FC #1, #3, # 4).</p>	<p>Precious Haven, Inc. will ensure that the facility shall notify the treatment team including the legally responsible person of the transfer or discharge of the child or adolescent as soon as the emergency situation is stabilized.</p> <p>Precious Haven, Inc. will ensure that the facility completes the proper transfer or discharge form when a client is moved or transferred to a sister facility.</p>	<p>Administrator/Owner - will inform LP/QA/QI directors of changes</p> <p>Client Right Committee/QA Committee – monitor/review</p> <p>LP/QA/QI Director – update forms and monitor compliance</p>	<p><b>Implementation Date:</b> 06/01/2021 – On going</p> <p><b>Projected Completion Date:</b> 07/15/2021</p>