

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: mh1060-852	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 06/16/2021
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NAME OF PROVIDER OR SUPPLIER NEW VISION HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 5004 GLENVIEW COURT CHARLOTTE, NC 28215
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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>INITIAL COMMENTS</p> <p>An annual, follow up and complaint survey was completed on 6-16-21. The complaint was substantiated. (NC00177277). 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>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure disaster drills were held at least quarterly and repeated on each shift. The findings are:</p> <p>Review on 6-8-21 of disaster drills revealed: -Facility has three separate shifts; first,</p>	V 114		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 114	Continued From page 1 second, and third. -Quarterly notes that disaster drills were done with the months listed, with no time or date. Interview on 6-16-21 with the Director revealed: -That is how they have always documented their disaster drills and it has never been a problem. -They are already working on a way to document the disaster drills the same way they do the fire drills. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 114		
V 296	27G .1704 Residential Tx. Child/Adol - Min. Staffing 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS (a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times. (b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows: (1) two direct care staff shall be present for one, two, three or four children or adolescents; (2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and (3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents. (c) The minimum number of direct care staff during child or adolescent sleep hours is as follows: (1) two direct care staff shall be present	V 296		

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V 296	<p>Continued From page 2</p> <p>and one shall be awake for one through four children or adolescents;</p> <p>(2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and</p> <p>(3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.</p> <p>(d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan.</p> <p>(e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and needs as specified in the treatment plan.</p> <p>This Rule is not met as evidenced by: Based on record review, interviews and observations the facility failed to ensure minimum number of direct care staff to meet client/staff ratio. The findings are:</p> <p>Observation on 6-1-21 at approximately 6:45 am to 7:45 am revealed: -One staff with five clients. -7:45 am second and third staff comes into facility.</p> <p>Review on 6-1-21 of the facility schedule</p>	V 296		

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V 296	<p>Continued From page 3</p> <p>revealed:</p> <ul style="list-style-type: none"> -Staff #1 and Staff #2 were both scheduled to work from 11pm-7am May 31-June 1 2021. <p>Interview on 6-1-21 with Client #1 revealed:</p> <ul style="list-style-type: none"> -There is usually two to three staff at the facility. -Third shift usually has two people working. <p>Interview on 6-1-21 with Client #2 revealed:</p> <ul style="list-style-type: none"> -Staff working by themselves "barely happens." -The Director of the Qualified Professional will come in and work shifts when needed. <p>Interview on 6-1-21 with Client #3 revealed:</p> <ul style="list-style-type: none"> -It was common for one staff to work on third shift. -There is always at least two staff working on second and first shift. <p>Interview on 6-1-21 with Client #7 revealed:</p> <ul style="list-style-type: none"> -There is usually one staff on third shift, usually late at night. -"We are all asleep and not bothering anybody." -There have never been any incidents on third shift that she knows about. <p>Interview on 6-1-21 with Staff #1 revealed:</p> <ul style="list-style-type: none"> -She works third shift. -She has worked at the facility for several years. -She rarely works by herself. "it's been a minute." -Staff #2 was supposed to be working, but she didn't come in. -She did not call the Qualified Professional to let her know. "I know I should have." -There has never been any problems when 	V 296		

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V 296	<p>Continued From page 4</p> <p>she has been there by herself.</p> <p>Interview on 6-1-21 with Staff #2 revealed: -She normally works from 11pm to 7am. -"I felt like it was OK for me to leave at 6:00am to get coffee. -When she left they were all asleep.</p> <p>Interview on 6-11-21 with the Qualified Professional revealed: -Staff #2 had called her and told her she was running late because there was an accident on the road to work. -They have one staff that has to leave at 5:30am for dialysis and Staff #2 comes in. -She always makes sure there is the correct amount of staff scheduled. -She and the Director have also been working shifts to make sure they are in ratio.</p> <p>Interview on 6-11-21 with the Director revealed: -Staff #2 had left to get coffee. -"She shouldn't have done it. -"But that's rare, it's very rare." -She has been at the facility continually, working shifts to make sure there was coverage. -They have already talked to Staff #2 about leaving.</p>	V 296		