

Life Opportunities Inc
P. O. Box 448
Shannon, NC 28386
Phone: (910) 733-2519
Fax: (910) 227-2488

FAX COVER SHEET

DATE: 07 28 21

TO: NC Health and Human services, Licensure and certification

ATTN: Keith Hughes

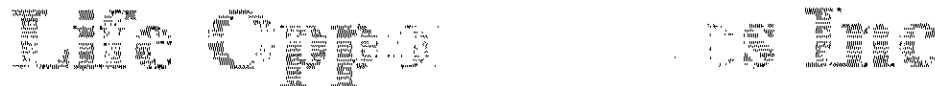
FAX NO: 919-715-8078

SUBJECT: POC

FROM: Life Opportunities – Deborah Pearson

**NO OF PAGES: 3
(INCLUDING COVER SHEET)**

COMMENTS:



PRINTED: 06/09/2021
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION:	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL078-159	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 06/02/2021
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NAME OF PROVIDER OR SUPPLIER **A BETTER WAY RESIDENTIAL SERVICES** STREET ADDRESS, CITY, STATE, ZIP CODE **220 CALVINS ROAD SHANNON, NC 28386**

(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, complaint and follow up survey was completed on June 2, 2021. The complaint was unsubstantiated (intake #NC00177675). 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 105	<p>27G .0201 (A) (1-7) Governing Body Policies</p> <p>10A NCAC 27G .0201 GOVERNING BODY POLICIES</p> <p>(a) The governing body responsible for each facility or service shall develop and implement written policies for the following:</p> <p>(1) delegation of management authority for the operation of the facility and services;</p> <p>(2) criteria for admission;</p> <p>(3) criteria for discharge;</p> <p>(4) admission assessments, including:</p> <p>(A) who will perform the assessment; and</p> <p>(B) time frames for completing assessment.</p> <p>(5) client record management, including:</p> <p>(A) persons authorized to document;</p> <p>(B) transporting records;</p> <p>(C) safeguard of records against loss, tampering, defacement or use by unauthorized persons;</p> <p>(D) assurance of record accessibility to authorized users at all times; and</p> <p>(E) assurance of confidentiality of records.</p> <p>(6) screenings, which shall include:</p> <p>(A) an assessment of the individual's presenting problem or need;</p> <p>(B) an assessment of whether or not the facility can provide services to address the individual's needs; and</p> <p>(C) the disposition, including referrals and</p>	V 105		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *Sharon Pearson* TITLE _____ (X6) DATE **7-28-21**

STATE FORM 11.0011 If continuation sheet 1 of 32

Appendix 1-B: Plan of Correction Form

Plan of Correction 06/02/2021			
<p>Please complete <u>all</u> requested information and mail completed Plan of Correction form to: Division of Health Service Regulation Mental Health Licensure and Certification Section Attn: Keith Hughes 2718 Mail Services Center Raleigh, NC 27699-2718</p>		<p>In lieu of mailing the form, you may e-mail the completed electronic form to:</p>	
Provider Name:	Life Opportunities, Inc.	Phone:	(910)
Provider Contact Person for follow-up:	Dean & Deborah Pearson	Fax:	(910)
		Email:	deborah.pearson@life-opportunities.org
Address:	220 Calvins Road Shannon, NC 28386		Provider #: MHL-078-159
Finding	Corrective Action Steps	Responsible Party	Time Line
<p>V105.27G.0201 (A) (1-7) Governing Body Policies</p> <p>Fail to implement written standards that assure applicable standards of practice amidst the COVID-19 pandemic.</p>	<p>Life Opportunities, Inc. will require staff to implement the current COVID-19 practices mandated by the state of North Carolina.</p> <p>Life Opportunities, Inc. will ensure that any consumer or staff who wish to be vaccinated may do so, however consumers are required to obtain consent of their guardian.</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>Implementation Date: 06/16/2021 - On going</p> <p>Projected Completion Date: 07/02/2021</p>
<p>V118.27G.0209 (C) Medication Requirements</p> <p>Failed to administer medications as ordered by a physician and failed to keep MAR's current affecting three of three clients (#1, #2 and #3) and one of four audited staff (#1) failed to demonstrate competency with medication administration.</p>	<p>Life Opportunities, Inc. will ensure that each consumer has a MAR of all drugs administered to each client must be kept current.</p> <p>Life Opportunities, Inc. will ensure that consumers medication administered are recorded immediately after administration.</p> <p>Life Opportunities, Inc. revised the MAR to cover all dates that drugs are administered.</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>Implementation Date: 06/16/2021 - On going</p> <p>Projected Completion Date: 07/02/2021</p>
<p>V121.27G.0209 (F) Medication Requirements</p> <p>Failed to ensure one of three audited clients (#3) has a psychotropic drug regimen review at least every six months.</p>	<p>Life Opportunities, Inc. will ensure that clients who receive psychotropic drugs, will have the pharmacist perform a drug review at least every six months.</p> <p>Life Opportunities, Inc. will maintain the findings from the drug review in the client record along with corrective actions taken.</p>	<p>Administrator/Owner - will inform LP/QA/QI directors of changes</p> <p>Client Right Committee/QA Committee - monitor/review</p>	<p>Implementation Date: 06/16/2021 - On going</p> <p>Projected Completion Date: 08/01/2021</p>

		LP/QA/QI Director – update forms and monitor compliance	
<p>03 Residential Treatment Requirements for LP</p> <p>At least one full-time direct care staff meets or exceeds the requirements of an associate professional</p>	<p>Life Opportunities, Inc. will hire at least one full-time direct care staff who meets or exceeds the requirement of an associate professional.</p> <p>Life Opportunities, Inc. will utilize the facility QP to serve in both capacities until one is hired.</p> <p>Life Opportunities, Inc. will ensure that the AP/QP will complete the following duties: management of day-to-day operations, supervise paraprofessionals and participate in service planning meetings.</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>Implementation Date: 06/16/2021 – On going</p> <p>Projected Completion Date: 08/01/2021</p>
<p>04 Incident Response</p> <p>All critical incident reports were the Local Management Entity within 72 hours as required</p>	<p>Life Opportunities, Inc. will ensure incident reports are submitted as required to the LME/MCO within 72 hours of notification. Life Opportunities, Inc. will ensure incident reports as submitted on the required form, via IRIS system, via email as required. Life Opportunities, Inc. will ensure all required elements are complete within the IRIS System, as well as notifications to all required parties.</p>	<p>Licensee – Compliance Review</p> <p>QA Director: Review and Make Changes</p> <p>AP/QP/Staff: will implement form</p>	<p>Implementation Date: 06/16/2021 – On going</p> <p>Projected Completion Date: 08/01/2021</p>
<p>04(e) Client Rights – Sec. Rest</p> <p>Ensure the necessary documentation is present in the client record when a restrictive was utilized affecting one of (#1).</p>	<p>Life Opportunities, Inc. will ensure that when a restrictive intervention is utilized, documentation shall be made in the client record.</p> <p>Life Opportunities, Inc. will ensure that when submitting a critical incident report and a restraint is utilized, it will be input into the IRIS system within the specified timeframe.</p>	<p>Licensee – Compliance Review</p> <p>QA Director: Review and Make Changes</p> <p>AP/QP/Staff: will implement form</p>	<p>Implementation Date: 06/16/2021 – On going</p> <p>Projected Completion Date: 08/01/2021</p>
<p>07 Client Rights – Training on Restraint Interventions</p> <p>Two of four audited staff (#1 and #2) were demonstrated competency in Restraint Interventions.</p>	<p>Life Opportunities, Inc. will ensure all staff are trained in Alternatives to Restrictive Interventions within 30 days of being hired by the agency. When waiting to be trained, staff will work with staff who have been trained.</p> <p>Life Opportunities, Inc. will ensure staff who are considered for hire, are re-trained in Alternatives to Restrictive Interventions.</p>	<p>Licensee – Compliance Review</p> <p>QA Director: Review and Make Changes</p> <p>AP/QP/Staff: will implement form</p>	<p>Implementation Date: 06/16/2021 – On going</p> <p>Projected Completion Date: 08/01/2021</p>
<p>08 Client Rights – Training in Seclusion</p> <p>Two of five audited staff (#1, #10) or demonstrated competency in seclusion, physical restraint time-out.</p>	<p>Life Opportunities, Inc. will ensure all staff are trained in Seclusion, Restraint and Isolation Time-Out within 30 days of being hired by the agency. When waiting to be trained, staff will work with staff who have been trained.</p> <p>Life Opportunities, Inc. will ensure staff who are considered for hire, are re-trained in Seclusion, Restraint and Isolation Time-out</p>	<p>Licensee – Compliance Review</p> <p>QA Director: Review and Make Changes</p> <p>AP/QP/Staff: will implement form</p>	<p>Implementation Date: 06/16/2021 – On going</p> <p>Projected Completion Date: 08/01/2021</p>