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| V 000 | INITIAL COMMENTS<br><br>An annual and complaint survey was completed on July 29, 2021. The complaint (Intake #NC00179430) was substantiated. Deficiencies were cited.<br><br>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents. | V 000 | | |
| V 112 | 27G .0205 (C-D)<br>Assessment/Treatment/Habilitation Plan<br><br>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN<br>(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.<br>(d) The plan shall include:<br>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;<br>(2) strategies;<br>(3) staff responsible;<br>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;<br>(5) basis for evaluation or assessment of outcome achievement; and<br>(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. | V 112 | | |

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| V 112 | Continued From page 1<br><br>This Rule is not met as evidenced by:<br>Based on record reviews and interviews, the facility staff failed to develop and implement strategies in 3 of 3 client (#1, #2 and #3)'s treatment plans to address the needs of the clients. The findings are:<br><br>Review on 7/28/21 of client #1's record revealed:<br>-An admission date of 12/31/20<br>-Diagnoses of Post-Traumatic Stress Disorder, Attention Deficit Hyperactivity Disorder, Combined Type, Conduct Disorder and Unspecified Anxiety Disorder.<br>-Age 16<br>-An assessment dated 12/31/21 noting "was previously at a PRTF, had become increasingly confrontational and defiant, leaving placements without permission, property destruction, stealing from peers, choking a younger client, and giving peers medications that resulted in a hospital visit, history of sharing inappropriate photos on social media, marijuana use, hustling drugs, symptoms of depression, anxiety, anger outbursts, verbal and physical aggression, a history of elopement and a history of being argumentative as well as a victim of trauma."<br>-A treatment plan, dated 4/3/21 noting "will learn appropriate communication and anger management skills that will enable her to avoid using verbal and/or physical aggression towards others in an attempt to get her needs met, will participate in the level III program to improve her interpersonal relationships by working on relationships and participating in weekly family | V 112 | | |

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| V 112 | Continued From page 2 | V 112 | | |

therapy, work towards self-directed improvement in mood in order to rely less on others to make her happy, will learn about healthy peer-to-peer relationships and interactions and age appropriate relationships, will eliminate the use of substances while working towards a path to recovery for the duration of the placement, will be able to identify and acknowledge the effects of using drugs and the consequences for use."
-No goals or strategies to address client #1's elopement issues.
-No goals or strategies to address a 1:1 client/staff ratio when being transported by facility staff.

Further review on 7/28/21 of client #1's record revealed:
-A child/adolescent Discharge/Transition Plan, dated 4/2/21 noting "The child and family team has identified and addressed the following potential barriers to success of the discharge/transitional plan: potential barrier due to elopement, truancy, non-compliance and risky behaviors."

Interviews on 7/28/21 with client #1 and client #2 revealed:
-They both had a history of elopement
-Recently left the facility and attempted to run off
-The police were notified
-"They came out and told us to return to the facility."
-Client #1 stated she was transported to and from school by only one facility staff.
Interview on 7/28/21 with client #3 revealed:
-Had been transported several times by just one staff

Interview on 7/29/21 with the Associate Professional (AP) revealed:

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| V 112 | Continued From page 3<br>-Was aware of the client/staff ratio at the facility and transporting a client 1:1 needed to be in their treatment plans.<br>-"So, if [client #1] was transported to school, then everyone needs to go, including 2 staff ..."<br><br>Interview on 7/29/21 with the Qualified Professional (QP) revealed:<br>-Was aware of client #1's elopement issues.<br>-Since client #1 had been admitted to the facility, "she has only threatened to leave. She will make threats to leave especially if she does not get what she wants ...we only learned of her elopement history after she was placed at the facility.<br>-Client #2 eloped with client #1 recently.<br>-"Most of [client #2]'s placements involved the Juvenile Justice agency. She is on probation. Usually the other facilities will give us an update on their behaviors ..."<br>-Was not aware of any details with client #2's previous elopements from other facilities.<br>-"[Client #2] had never attempted to run from the facility until Sunday ..."<br>-Was responsible for updating the client's treatment plans<br>-"I update the treatment plans monthly. I am not sure if we have a goal specifically addressing their elopement issues, but we use the term risky behaviors for elopement (in the clients' treatment plans) and sexualized behaviors as well."<br>-Was not sure why the clients' treatment plans did not have the 1:1 client/staff ratio for transporting them.<br><br>Interview on 7/28/21 with the Director/Licensee revealed:<br>-The QP was responsible for the clients' treatment plans<br>-Was aware of client #1 and client #2's elopement | V 112 | | |

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| V 112 | Continued From page 4<br>issues.<br>-Was not sure why the elopement issues were not addressed in the treatment plans<br>-Was not aware the client<br>-Would get in touch with the QP regarding revisions to their treatment plans. | V 112 | | |
| V 114 | 27G .0207 Emergency Plans and Supplies<br><br>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES<br>(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.<br>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.<br>(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.<br>(d) Each facility shall have basic first aid supplies accessible for use.<br><br>This Rule is not met as evidenced by:<br>Based on record reviews and interviews, the facility staff failed to ensure fire and disaster drills were conducted once per shift per quarter. The findings are:<br><br>Review on 7/28/21 of the facility's fire and disaster drills revealed:<br>-1/25/2020 at 7:25pm no power and natural disaster<br>-No other drills for 2020 were documented | V 114 | | |

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| V 114 | Continued From page 5<br>-1/20/21 at 8am fire and medical drill<br>-1/18/21 12am fire drill<br>-1/17/21 8pm power failure<br>-1/16/21 8am fire and bomb threat<br>-1/20/21 at 8pm disaster drill<br>-2/1/21 at 9am fire drill<br>-2/1/21 at 4pm fire drill<br>-2/1/21 at 8pm fire drill<br>-2/8/21 at 9am fire<br>-2/8/21 at 4pm, fire drill<br>-2/8/21 at 8pm fire drill<br>-2/15/21 at 8am, bomb treat<br>-2/15/21 at 4pm, fire drill<br>-2/15/21 at 8pm, threat by phone<br>-3/1/21 at 8pm, fire drill<br>-3/22/21 4pm, fire drill<br>-3/22/21 at 4pm, violent behavior (fight)<br>-No documentation of any other drills after March 2021<br><br>Interviews on 7/28/21 with clients #1, #2 and #3 revealed:<br>-They had not participated in any fire or disaster drills at the facility.<br><br>Interview on 7/28/21 with the Associate Professional (AP) revealed:<br>"It seems like the drills were update to date until recently. They<br>They are probably behind if I am not mistaken. They were up to date a couple of months ago. One staff told me she did one, but I don't know if she documented it. I should probably look at that closer."<br><br>Interview on 7/28/21 with the Director/Licensee (D/L) revealed:<br>When conducting fire and disaster drills, "we typically do them on each shift. I have had to conduct them myself ...if there was no | V 114 | | |

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| V 114 | Continued From page 6<br>documentation past March 2021, that is accurate. It has been a tough year. What else can I say?"<br>-Would ensure the fire and disaster drills were conducted once per shift per quarter. | V 114 | | |
| V 118 | 27G .0209 (C) Medication Requirements<br><br>10A NCAC 27G .0209 MEDICATION REQUIREMENTS<br>(c) Medication administration:<br>(1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs.<br>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.<br>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.<br>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following:<br>(A) client's name;<br>(B) name, strength, and quantity of the drug;<br>(C) instructions for administering the drug;<br>(D) date and time the drug is administered; and<br>(E) name or initials of person administering the drug.<br>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician. | V 118 | | |

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| V 118 | Continued From page 7<br><br>This Rule is not met as evidenced by:<br>Based on record reviews and interviews, the facility staff failed to ensure medications were immediately recorded after administration for 2 of 3 current clients (#1 and #3). The findings are:<br><br>Review on 7/28/21 of client #1's record revealed:<br>-An admission date of 12/31/20<br>-Diagnoses of Post-Traumatic Stress Disorder, Attention Deficit Hyperactivity Disorder, Combined Type, Conduct Disorder and Unspecified Anxiety Disorder.<br><br>Review on 7/28/21, at 1:30pm, of client #1's MARs revealed:<br>-Physician's orders dated 12/29/20 for the following medications: Hydroxyzine HCL 10mg, 1 by mouth twice daily and Sertraline 100mg, 1 by mouth every morning.<br>-Hydroxyzine HCL 10mg, 7am dose on 6/23/21 was blank<br>-Hydroxyzine HCL 10mg, 7pm doses on 6/21/21 and 6/22/21 were blank.<br>-Sertraline 100mg, 8 am doses on 6/16/21 and 6/30/1 were blank at 8am<br><br>Review on 7/28/21 of client #3's record revealed:<br>-An admission date of 4/26/21<br>-Diagnoses of Major Depressive Disorder, Post-Traumatic Stress Disorder, Oppositional Defiant Disorder, Social Anxiety Disorder, Intellectual Disability (Intellectual Developmental Disorder), Mild, Child Neglect, Child Physical Abuse and Child Sexual Abuse | V 118 | | |

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| V 118 | Continued From page 8<br><br>Review on 7/28/21, at 1:51pm, of the MARS for client #3 revealed:<br>-Physician's orders dated 4/26/21 for the following medications: Risperidone 3mg, Trazodone 50mg and Ferrous Sulfate 325mg<br>-Risperidone 3mg, 8pm doses from 6/1/21 to 6/4/21 and 7/11/21 to 7/1/21<br>7/11/21 to 7/16/21 were blank<br>-Trazodone 50mg, 8pm dose on 7/16/21 was blank<br>-Ferrous Sulfate 325mg, 8am dose on 6/11/2, 6/14/21, and 6/19/21 to 6/30/21 were blank.<br><br>Interview on 7/28/21 with client #1 revealed:<br>-Took all the medications prescribed for her<br>-Had not refused any medications<br>-The facility staff administered her medications.<br><br>Interview on 7/28/21 with client #3 revealed:<br>-Took all the medications prescribed for her<br>-Had not refused any medications<br>-The facility staff administered her medications.<br><br>Interview on 7/29/21 with the Associate Professional (AP) revealed:<br>-Had administer medications<br>-Had not seen any blanks other than one day when client #3 was at work.<br>-"I don't remember the last time I administered [client #3]'s medications ..."<br><br>Interview on 7/28/21 with the Qualified Professional (QP) revealed:<br>-"I review them (the MARs) at the end of each month. I have not looked at July this month."<br>-Would ensure staff were immediately documenting on the MARs after administering medications to the clients.<br>-"They (facility staff) would absolutely be retrained on medication administration ..." | V 118 | | |

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| V 118 | Continued From page 9<br><br>Interview on 7/28/21 with the Director/Licensee (D/L) revealed:<br>-Regarding blanks on client #3's MAR, the D/L stated "typically [the QP] or me go over the MARs. So, I don't know why there are blanks. I will get with the physician to ensure medications are being dispensed that are PRNs." | V 118 | | |
| V 296 | 27G .1704 Residential Tx. Child/Adol - Min. Staffing<br><br>10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS<br>(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.<br>(b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows:<br>(1) two direct care staff shall be present for one, two, three or four children or adolescents;<br>(2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and<br>(3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents.<br>(c) The minimum number of direct care staff during child or adolescent sleep hours is as follows:<br>(1) two direct care staff shall be present and one shall be awake for one through four children or adolescents;<br>(2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and<br>(3) three direct care staff shall be present | V 296 | | |

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| V 296 | Continued From page 10<br>of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.<br>(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.<br>(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.<br><br>This Rule is not met as evidenced by:<br>Based on observations, record reviews and interviews, the facility failed to ensure the two direct care staff were present for one, two, three or four children or adolescents. The findings are:<br><br>Observations on 7/28/21, at approximately 9:19am, of staff #2 and client #1 revealed:<br>-Staff #2 was left at the facility with the 3 clients when 3rd shift staff left.<br>-At 9:30am, the Director/Licensee (D/L) arrived at the facility.<br>-Several minutes later, staff #2 left in the facility's van with client #1<br>-This left 2 clients and the D/L present at the facility.<br><br>Further observations on 7/28/21 from 1:36pm to 1:59pm revealed: | V 296 | | |

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| V 296 | Continued From page 11<br>-Staff #2 left in the facility van with clients #2 and #3 of the staff/client ratio revealed:<br>-Staff #2 returned to the facility with all three clients.<br><br>Review on 7/28/21 of client #1's record revealed:<br>-An admission date of 12/31/20<br>-Diagnoses of Post-Traumatic Stress Disorder, Attention Deficit Hyperactivity Disorder, Combined Type, Conduct Disorder and Unspecified Anxiety Disorder.<br>-Age 16<br>-An assessment dated 12/31/21 noting "was previously at a PRTF, had become increasingly confrontational and defiant, leaving placements without permission, property destruction, stealing from peers, choking a younger client, and giving peers medications that resulted in a hospital visit, history of sharing inappropriate photos on social media, marijuana use, hustling drugs, symptoms of depression, anxiety, anger outbursts, verbal and physical aggression and a history of being argumentative as well as a victim of trauma."<br>-A treatment plan, dated 4/3/21 noting "will learn appropriate communication and anger management skills that will enable her to avoid using verbal and/or physical aggression towards others in an attempt to get her needs met, will participate in the level III program to improve her interpersonal relationships by working on relationships and participating in weekly family therapy, work towards self-directed improvement in mood in order to rely less on others to make her happy, will learn about healthy peer-to-peer relationships and interactions and age appropriate relationships, will eliminate the use of substances while working towards a path to recovery for the duration of the placement, will be able to identify and acknowledge the effects of using drugs and the consequences for use." | V 296 | | |

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| V 296 | Continued From page 12<br>-No goals or strategies to address client #1's elopement issues.<br>-No goals or strategies regarding transporting client #1 1:1 with facility staff.<br><br>Review on 7/28/21 of client #2's record revealed:<br>-An admission date of 4/1/21<br>-Diagnoses of Conduct Disorder, Adolescent Onset Type, Unspecified Trauma and Stressor Related Disorder, Attention Deficit Hyperactivity Disorder, Predominantly Hyperactive impulse Presentation and Unspecified Depressive Disorder and Cannabis Use Disorder, Mild.<br>-Age 16<br>-An assessment dated 3/17/21 noting "is minimally engaged in outpatient treatment, needs a level III placement, needs support with positive re-engagement in the community, reenrollment in school, access to medical care, receive help with accessing and participating in age-appropriate and gender appropriate prosocial activities , needs to promote positive, prosocial behaviors, the family fights constantly, had previous use of Cannabis, relationship with her father is toxic, is involved with the Department of Juvenile Justice, requires 24/7 supervision with behavioral management, needs a therapeutic setting to address defiant behaviors towards her parents and other authority figures that seriously interferes with her day to day functioning,"<br>-A treatment plan dated 3/17/21 noting "will follow the rules of the level III placement, will have no more than 5 refusals of following directions, participate in planned activities, working to advance on the point system, comply with nightly bedtime routine, demonstrate chore compliance, follow all household rules, will demonstrate improved decision making by having no incidents of self-injurious behaviors, no instances of using ligaments, belts while masturbating, comply with | V 296 | | |

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|---|---|---|---|
| | MHL041-852 | A. BUILDING: _____ B. WING _____ | 07/29/2021 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| A PLACE OF THEIR OWN LLC | 5629 BURLINGTON ROAD MC LEANSVILLE, NC 27301 |

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| V 296 | Continued From page 13 | V 296 | | |

taking medications as prescribed, reduce instances of challenging authority, increase acceptance of responsibility for her choices, implement appropriate decision making skills, engage in pro-social activities, will decrease disrespect for authority by increasing her ability to follow directions without verbal aggression and defiance, use a calm voice and appropriate eye contact, will refrain from using illegal substance and learn and develop coping skills to maintain a sober lifestyle by being compliant with random drug screens when requested, learn how to tolerate uncomfortable feelings without using chemicals and develop the ability to use anger appropriately, will have therapeutic leave with family on a weekly basis as client progresses up the level system, will increase her academic motivation by attending school, decrease in work refusal and subsequent increase in her ability to complete work, increase participation in all required school activities and an increase in her grades."
-No goals or strategies regarding transporting client #1 1:1 with facility staff.

Review on 7/28/21 of client #3's record revealed:
-An admission date of 4/26/21
-Diagnoses of Major Depressive Disorder, Post-Traumatic Stress Disorder, Oppositional Defiant Disorder, Social Anxiety Disorder, Intellectual Disability (Intellectual Developmental Disorder), Mild, Child Neglect, Child Physical Abuse and Child Sexual Abuse
-Age 17
-An assessment dated 4/26/21 noting "needs to comply with rules and expectations of the program, participate in therapeutic activities and appointments, make reasonable efforts to improve the ability to control her behavior and improve relationships with authority figures and

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| V 296 | Continued From page 14<br>peers, needs to work on trauma informed care, participate in medication management and comply with the medication regimen, needs consequences for her actions, needs a safe and stable environment, needs to improve her demonstration of respect, management of anger and effective coping skills, utilize education needs, independent living skills restore social skills and vocational skills and participate in recreation activities five times per week, required supervision at all times and will comply with all services necessary to assist with the reduction of mental health symptoms to include outpatient therapy.<br>-A treatment plan dated 3/22/21 noting "will comply with residential level III treatment by following residential schedule, following rules, accepting adult authority, completing daily chores and following bedtime schedules, , will decrease impulsive, risky and illegal behaviors by not running away from school/facility, not leaving the facility without permission, not displaying inappropriate sexual behaviors and understanding/adhering to sexual boundaries with all peers, will comply with all services necessary to assist with the reduction of mental health symptoms to include medication management/monitoring, outpatient therapy and all other services deemed appropriate."<br>-No goals or strategies regarding transporting client #1 1:1 with facility staff.<br><br>Interview on 7/28/21 with client #1 revealed:<br>-When asked about staffing at the facility, client #1 stated there was not always two staff present<br>-"I don't know why, sadly. I woke up one time at night and there was only one staff present."<br>-Could not recall the date or the staff present when she woke up.<br>-Facility staff transported her 1:1 to school. | V 296 | | |

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| V 296 | Continued From page 15<br><br>Interview on 7/28/21 with client #2 revealed:<br>-When asked about being left alone at the facility, client #2 stated, "last week we were here alone. So, it was like that staff left at about 7am. Third shift staff was not here. We went to use the house 2 over to call a staff and to them her know we were alone. One staff (staff #2) pulled in. It was just that on time. They said it was 10 minutes we were alone, but I don't know exactly ..."<br><br>Interview on 7/28/21 with client #3 revealed:<br>- When asked about staffing at the facility, client #1 stated sometimes there was only one staff on shift at night.<br>-"The other night, [client #1] and [client #2] left the facility. Staff had to call the police ..."<br><br>Interview on 7/29/21 with the Associate Professional (AP) revealed:<br>-"Yes, I am aware. I don't know why people don't want to work. I don't know why. The hiring is slow. I have had to come in to work shifts on some occasions."<br>-The client/staff ratio was normally 2 staff for every 1, 2, 3 and 4 clients.<br>-"There was a recent incident where only 1 staff was present. Then there was another incident where a staff left to pick up her cell phone from a store where she left it."<br><br>Interview on 7/29/21 with the Qualified Professional (QP) revealed:<br>-With COVID, "staffing has been very difficult."<br><br>Interview on 7/28/21 with the Director/Licensee (D/) revealed:<br>-It was difficult to find staff that want to come to work.<br>-Had been working several shifts at the facility | V 296 | | |

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| V 296 | Continued From page 16<br>herself<br>-"On each shift, before COVID hit, we had two staff ..."<br>-Was aware staff #2 had left the clients for 10 minutes to retrieve her cell phone from a store ...I discussed with her the client/staff ratio. It was totally unacceptable on her part ..." | V 296 | | |
| V 736 | 27G .0303(c) Facility and Grounds Maintenance<br><br>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS<br>(c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.<br><br>This Rule is not met as evidenced by:<br>Based on observations and interviews, the facility staff failed to ensure the facility and its grounds were maintained in a safe, clean, orderly and attractive manner. The findings are:<br><br>Observations on 7/28/21, at approximately 11:59am, of the facility revealed:<br>-The wooden tiles in the kitchen were worn and several of the tiles were stained<br>-The oven needed to be cleaned on the outside and underneath<br>-The refrigerator needed cleaning as stains had dripped down on the freezer size<br>-The refrigerator's handle was missing on the left<br>-The refrigerator's handle on the right was loose<br>-Paint was peeling off on the walls in the clients' bedrooms | V 736 | | |

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| V 736 | Continued From page 17<br>-The air conditioning vent was covered with dust<br>-The clients' bathroom needed to be cleaned as the grout had dark stains and the bathtub was stained.<br>-Rust was on the bathroom's shower head and water faucet<br>-The bathroom's towel holder only had one bracket<br>-Client #3's ceiling fan had no light bulb covers<br>-The vanity in client #3's room was missing a drawer on the top right.<br>-Client #3's closet had two large holes in the way measuring approximately 12 x 12 and 18 x 18<br>-The ceiling fan in the dining room had 3 of the 4 light bulbs burned out.<br><br>Interview on 7/29/21 with the Associate Professional (AP) revealed:<br>-"I noticed over the weekend the fridge handle was off. It was lying on a chair. The staff on shift stated they had already reported it. I am also aware [client #1] had holes in the closet. I have direct access in contacting [the D/L] about needed repairs ..."<br><br>Interview on 7/28/21 with the Director/Licensee (D/L) revealed:<br>-When asked about the physical plant issues, the D/L stated she was aware the handle to the refrigerator was missing<br>-"We don't use the dishwasher, but it works. I know [client #1] has put holes in closet walls. I have men come in (to the facility) but I want them (the clients) to be monitored when the men come in to make the repairs ..." | V 736 | | |