

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL023-215</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>07/22/2021</b>
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

**SANDRA'S HOUSE**

**1856 STONY POINT ROAD  
SHELBY, NC 28150**

(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	<b>INITIAL COMMENTS</b>  An annual and complaint survey was completed on 7/22/21. The complaint was substantiated (Intake #NC177566). Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G.1700 Residential Treatment Staff Secure for Children or Adolescents.	V 000		
V 108	<b>27G .0202 (F-I) Personnel Requirements</b>  <b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b> (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying,	V 108		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*Diane Hutt 8.2.21*

## **Plan of Correction**

### **Rule Citations:**

#### **1) 10A NCAC 27G .1701 Scope (V293):**

- a. The provider has trained and plans to continue training to minimize occurrences of negative behaviors that put the consumer at risk. The provider will include in monthly supervisions safety pre-cautions and plans for each individual consumer. The provider plans to ensure staff is educated and practice de-escalation out of control behaviors.

**Prevention:** Training prior to employment ongoing during employment.

**Responsible Monitor:** LP/QP

**How often:** As needed Monthly/Annually

#### **2) 10A NCAC 27G .0202 Personnel requirements (V108)**

##### **Measures:**

- a. The provider sent out an email to all active staff regarding restrictive intervention policy and the need for training in the specific area to keep consumers safe. They were advised that restrictive interventions are currently not allowed without proper training.
- b. The provider contacted an NCI trainer. All staff were retrained on NCI Plus Part A&B and in restrictive interventions.
- c. The provider provided Client specific training with plans to continue documenting all training and attendees.
- d. The provider has created a training list to include client specific training the criteria for admission to level III to be executed prior to any new admission of any client. All staff will be trained within 1 week to 48 hours of new client's arrival.

**Prevention:** Training prior to employment ongoing during employment.

**Responsible Monitor:** LP/QP

**How often:** As needed Monthly/Annually

#### **3) 10ANCAC 27G .0203 Competencies of Qualified Professionals and Associate Professionals (V109)**

- a. The provider ensured current QP and incoming QP read and understands policies and procedures.
- b. The provider is in the process of separating her current role as director from the QP has hired a qualified professional who meets the requirements.
- c. QP/AP will demonstrate core skills keeping record of worked hours/timesheets, and training ensuring the schedule meets requirement for supervision

- d. LP will make clinical assessments to determine client's level of functioning inside and outside (community work and/or teen programs) of the facility; seek to find appropriate outside services that meets the individual needs of each consumer and update PCP/Tx plan upon each assessment.
- e. LP/QP will ensure all assessments are obtained and kept in the consumers records including crisis prevention plans

**Prevention:** Internal Audits/reviews

**Responsible Monitor:** LP/QP

**How often:** Daily, Weekly, Monthly and/or Annually

#### **4) 10A NCAC 27G.0205 Assessment and Treatment/Habilitation or Service Plan (V112)**

- a. LP must keep the treatment plans update. Any changes must be done within 48 hours. QP/AP is responsible for making sure LP has information updated.
- b. The provider met with the LP and AP to advise of actions to be taken for future admissions regarding safety plans for members within the facility and while consumers are in the community.

**Prevention:** Complete all assessment as needed per each consumer

**Responsible Monitor:** Director/ LP/QP

**How often:** As needed and/or Monthly/Annually

#### **5) 10A NCAC 27G .1704 Minimum Staffing Requirements (V296)**

- a. QP is to document their time in the facility. LP/AP board members will be responsible for QP time documentation.
- b. The provider will ensure that the appropriate documentation is recorded, dated, and signed by the creator of said documentation.
- c. The provider has ensured compliance ratio 2-1 ensured accurate documentation of working staff for each scheduled shift.

**Prevention:** Documentation

**Responsible Monitor:** QP/AP

**How often:** Daily

#### **6) 10A NCAC 27E .0108 Training in Seclusion, Physical Restraint, and Isolation Time out (V537)**

- a. All staff have been trained on restrictive interventions 6.26.21
- b. The provider retrained all staff on verbal de-escalation, restrictive interventions outlining the appropriate time for implementations.
- c. The provider implemented monitoring and provided weekly supervision to staff.

**Prevention:** Training

**Responsible Monitor:** LP/QP

**How often:** prior hire date/weekly/ monthly and annually

## **7) 10A NCAC 27F .0105 Client's Personal Funds (V542)**

- a. The provider has assisted and encouraged the consumers to maintain or invest their money in a personal fund account other than at the facility. The provider has discussed the needed documentations with guardians to obtain a North Carolina Identification Card
- b. The provider has explained to the consumer and management team that the management of the funds shall occur in accordance with policy and procedures
- c. The provider has verbally communicated to the consumer of their rights to deposit and withdraw money.
- d. The provider has updated log sheets to keep a more accurate account of consumers funds (reviewed weekly)
- e. Keep receipt and distribution of funds in a personal fund account log.
- f. Provide for the receipt of deposits made by friends, relatives, or others.
- g. Provide for the keeping of adequate financial records on all transactions affecting funds on deposit in personal funds
- h. Assure that a client's personal funds will be kept separate from any operating funds of the facility.
- i. Provide the client with an accounting of his personal fund account.
- j. The provider will not allow any withdrawals from consumers account other than what the consumer request.
- k. The money earned and saved will be strictly for the consumer

**Prevention:** Accurate record keeping

**Responsible Monitor:** Director

**How often:** As needed daily, weekly, monthly

## **8) 10A NCAC 27G .0303(c) Location and Exterior Requirements (V736)**

- a. The provider immediately cleaned the outside of the facility to ensure safety of the consumers on 6.11.21.
- b. Management/ staff will ensure to perform property inspection (Both in house/ parameter of the building) which includes the laundry room shed/ yard house shed to make sure it is maintained daily. Anything suspicious that is noticed by staff during inspection will be addressed immediately with management team and documented appropriately and kept on file.
- c. Team will ensure safety and security AEB removing any objects deemed unsafe. The team will make any repairs needed to ensure safety and hazard free environment. The team will contact any authorities or local departments that specializes in areas when needed. The team will follow safety drills all safety protocol; to ensure the safety of the consumers and staff.

**Prevention:** Recorded inspections

**Responsible Monitor:** All staff

**How often:** Daily

## **9) 10A NCAC 27D .0304 Protection from Harm, Abuse, Neglect or Exploitation (V512)**

- a. The provider contacted the LP with instructions to review, assess and implement and/or update TX plans to ensure quality and safety protocol i.e., emergencies, crisis interventions, contacts basic information to be.
- b. Staff will always monitor the consumers while at summer camp during (June-August) time frame during the non-academic year. Management will closely correspond with the summer camp director to ensure progress/safety is implemented to help stabilize their overall mood/behaviors
- c. Director will carefully screen all staff prior to hiring.
- d. Continue education on 10A NCAC 27D .0304

**Prevention:** Training

**Responsible Monitor:** LP/QP

**How often:** Before hire or start of work, monthly supervision and annually

#### **10) 10A NCAC 27G .0207 Emergency Plans and Supplies**

- a. The provider will ensure fire and safety drills are performed on each shift quarterly
- b. All drills have performed and is currently up to date.

**Prevention:** Complete drills as required

**Responsible Monitor:** QP/AP

**How often:** Monthly/Quarterly

#### **11) 10A NCAC 27G .0209 (C) Medication Requirements**

- a. PRN sheet has been updated to reflect MG of all OTC medications with physicians' signature
- b. Additional instructions for administration and route will be included.
- c. Physician orders have been and will continue to be obtained

**Prevention:** Training

**Responsible Monitor:** QP/AP

**How often:** Daily, weekly, and monthly reviews and upon notification of any changes

**This Plan of Correction has been completed and signed by:** Dianne Huitt, Program Director on 8.2.21