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KEEP HOPE ALIVE HUMAN SERVICES, LLC.

(252) 353-8003
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GREENVILLE, NC 27858

Ilesha Wallace, BS, QP
Program Director

Office (252) 353-8003
Email:

September 23, 2021

To: Emily Jones, BSW Facility Compliance Consultant I
From: Kim Kelly, Clinical Consultant, Keep Hope Alive
Date: September 23, 2021
Re: Residential Level III Services

Greetings! We of Keep Hope Alive would like to Thank you for your valuable feedback during your recent multi-site visitation(s). We appreciate your gracious presentation of strengths and weaknesses. Thank you again.

Please find attached signed and dated POC's for facility houses namely: Keswick Manor and Willow Manor, both components for Keep Hope Alive, LLC. Upon completion of the repairs, we will forward pictures. If further information and or corrections are needed, please contact us. I am Kim Kelly, Clinical Consultant for Keep Hope Alive. You may contact us via email at monwalla8@aol.com. The main contact number is 252-353-8003 after hours number is 252-258-1476 and my cell number is 252-412-1963.

Kim Kelly, LCAS, CTS
Keep Hope Alive
Clinical Consultant

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: mhl074-139	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 09/03/2021
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NAME OF PROVIDER OR SUPPLIER
KESWICK MANOR- KEEP HOPE ALIVE HUMAN SERV

STREET ADDRESS, CITY, STATE, ZIP CODE
**1110 SE GREENVILLE BLVD
GREENVILLE, NC 27858**

(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	INITIAL COMMENTS An annual and follow up survey was completed on September 3, 2021. 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 120	27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to keep internal and external	V 120	V 120 27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS. Effective 09/05/2021 Keep Hope Alive began working towards compliance regarding our medication citation in assuring that internal and external medications for each client are stored separately. Each Client's medication(s) is to be labeled and stored in a large plastic bag. Within this large bag are separate bags; i.e. a bag for internal and a bag for external medication(s) allowing for compliance in that the internal and external medication for each client will be stored separately. This intervention is in process, it will be overseen and completed by our Program Manager Antony Kendelle Jackson. Completion effective date is 10/01/2021.	10/01/21

Division of Health Service Regulation

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

TITLE

(X6) DATE

Hemi Kelly, Keep Hope Alive Clinical Consultant 9/23/2021

Division of Health Service Regulation

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V 120	Continued From page 1 medications stored separately affecting 1 of 3 audited clients (#1). The findings are: Review on 09/02/21 of client #1's record revealed: -An admission date of 12/30/20. -Diagnoses of Unspecified trauma and stressor related disorder, Reactive Attachment Disorder, Conduct Disorder, Acne. Observation on 09/02/21 at approximately 11:15am of client #1's medications revealed a large black plastic box with a lock on the front. All of the clients residing in the facility medications were stored in this one box. The Clindamycin/Benzoyl 1.2-5% cream was stored with all of the clients residing in the facility internal medications. During interview on 09/02/21 with the Program Manager revealed: -He would ensure all of the medication were stored separately.	V 120		10/1/21
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	V 296	V 296 27G .1704 Residential Tx. Child/Adol - Min. Staffing 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS Effective 09/13/2021 Keep Hope Alive QP, Iesha Wallace began addressing the issue regarding coming into compliance by updating each client PCP by adding goals and/or strategies regarding transporting client #1 1:1 with facility staff. The POC of each Client is reviewed and updated monthly as needed. Ms. Wallace, BS. QP. Has already begun this process will oversee it and will have completed updated on all PCP's by November 2, 2021. Additionally, even though a staff will transport a client, Keep Hope Alive will continue to adhere to the statute that mandates 2 staff per shift at the residential site location.	11/2/21

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V 296	<p>Continued From page 2</p> <p>for five, six, seven or eight children or adolescents; and</p> <p>(3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents.</p> <p>(c) The minimum number of direct care staff during child or adolescent sleep hours is as follows:</p> <p>(1) two direct care staff shall be present 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 reviews and interviews, the facility failed to ensure the two direct care staff were present for one, two, three or four children</p>	V 296	<p>V 296</p> <p>27G .1704 Residential Tx. Child/Adol - Min. Staffing 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS</p> <p>Effective 09/13/2021 Keep Hope Alive QP, Ilesha Wallace began addressing the issue regarding coming into compliance by updating each client PCP by adding goals and/or strategies regarding transporting client #1 1:1 with facility staff. The POC of each Client is reviewed and updated monthly as needed. Ms. Wallace, BS. QP. Has already begun this process will oversee it and will have completed updated on all PCP's by November 2, 2021. Additionally, even though a staff will transport a client, Keep Hope Alive will continue to adhere to the statute that mandates 2 staff per shift at the residential site location.</p>	11/2/21

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V 296	<p>Continued From page 3</p> <p>or adolescents. The findings are:</p> <p>Review on 09/02/21 of client #1's record revealed: -An admission date of 12/30/20. -Diagnoses of Unspecified trauma and stressor related disorder, Reactive Attachment Disorder, Conduct Disorder, Acne -A treatment plan dated 02/01/21. -No goals or strategies regarding transporting client #1 1:1 with facility staff.</p> <p>Review on 09/02/21 of client #2's record revealed: -An admission date of 04/22/20. -Diagnoses of Post Traumatic Stress Disorder, Attention Deficit Hyperactivity Disorder, combined presentation, moderate, Oppositional Defiant Disorder. -A treatment plan dated 12/04/20. -No goals or strategies regarding transporting client #2 1:1 with facility staff.</p> <p>Review on 09/02/21 of client #3's record revealed: -An admission date of 12/31/20. -Diagnoses of Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder, moderate combined presentation, Disruptive Mood Dysregulation Disorder. -Treatment Plan dated 01/05/21. -No goals or strategies regarding transporting client #3 1:1 with facility staff.</p> <p>During interview on 09/01/21 client #1, client #2 and client #3 revealed: -If they attended any appointments outside of the facility one staff would transport them to their appointments.</p>	V 296	<p>V 296</p> <p>27G .1704 Residential Tx. Child/Adol - Min. Staffing 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS</p> <p>Effective 09/13/2021 Keep Hope Alive QP, Iesha Wallace began addressing the issue regarding coming into compliance by updating each client PCP by adding goals and/or strategies regarding transporting client #1 1:1 with facility staff. The POC of each Client is reviewed and updated monthly as needed. Ms. Wallace, BS. QP. Has already begun this process will oversee it and will have completed updated on all PCP's by November 2, 2021. Additionally, even though a staff will transport a client, Keep Hope Alive will continue to adhere to the statute that mandates 2 staff per shift at the residential site location.</p>	11/2/21

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V 296	Continued From page 4 During interview on 09/01/21 the Program Manager revealed: -He was usually the staff that transported the clients to their appointments. -The clients were transported by one staff. -He was aware the 1:1 transport needed to be specified in each clients treatment plan. -He would contact the Qualified Professional to have the information added to each clients treatment plan.	V 296	V 296 27G .1704 Residential Tx. Child/Adol - Min. Staffing 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS Effective 09/13/2021 Keep Hope Alive QP, Iesha Wallace began addressing the issue regarding coming into compliance by updating each client PCP by adding goals and/or strategies regarding transporting client #1 1:1 with facility staff. The POC of each Client is reviewed and updated monthly as needed. Ms. Wallace, BS. QP. Has already begun this process will oversee it and will have completed updated on all PCP's by November 2, 2021. Additionally, even though a staff will transport a client, Keep Hope Alive will continue to adhere to the statute that mandates 2 staff per shift at the residential site location.	11/2/21	