

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-157</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/22/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BLUE HORIZONS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>130 SAINT JILL CIRCLE STATESVILLE, NC 28625</b>
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on 11-22-21. The complaint was substantiated (Intake ID #NC00183213). A deficiency was 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 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <p>(a) There shall be no privileging requirements for paraprofessionals.</p> <p>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p> <p>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(e) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> <li>(1) technical knowledge;</li> <li>(2) cultural awareness;</li> <li>(3) analytical skills;</li> <li>(4) decision-making;</li> <li>(5) interpersonal skills;</li> <li>(6) communication skills; and</li> <li>(7) clinical skills.</li> </ol> <p>(f) The governing body for each facility shall develop and implement policies and procedures</p>	V 110		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 110	<p>Continued From page 1</p> <p>for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, 1 of 1 former staff (FS #2) failed to demonstrate the knowledge, skills and abilities required by the population served. The findings are:</p> <p>Review on 11-16-21 of Former Client (FC) #2's record revealed:</p> <ul style="list-style-type: none"> <li>- Admission date: 9-7-21</li> <li>- Diagnoses: Oppositional Defiant Disorder (ODD); Cannabis Use Disorder; Mild Tobacco related Disorder; History of physical and sexual abuse</li> <li>- Discharge date: 11-10-21</li> <li>- FC #2 is 17 years of age</li> <li>- Treatment Plan dated 9-3-21:</li> </ul> <p>Goal: demonstrate improvement in her symptoms of ODD, as evidenced by zero incidents of physical aggression or threats of physical aggression per review period including but not limited to hitting, kicking, punching, spitting and threatening</p> <p>Goal: no more than one incident of verbal aggression per review period including but not limited to cursing, yelling and name calling</p> <p>Goal: will demonstrate compliance to staff directives without requiring more than 2 verbal prompts from staff members</p> <p>Review on 11-16-21 of FS #2's record revealed:</p> <ul style="list-style-type: none"> <li>- Date of Hire: 10-16-21</li> </ul>	V 110		

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V 110	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>- Job Description: Direct Care Staff</li> <li>- Date of Release from Employment: 11-10-21</li> <li>- Training: Confidentiality, Client Rights, HIPPA (Health Insurance and Accountability Act), Cultural Diversity, Professional Ethics, Meeting the needs of Special Population, Incident Reporting and Crisis Response</li> </ul> <p>Review on 11-17-21 of the facility's report to the Health Care Personal Registry (HCPR) dated 11-10-21 revealed: Incident dated 11-9-21: FC#2 " ... [FS #2] reported to a staff (unknown staff) that she (FS #2) had been having an inappropriate relationship with [FC #2]. [FS #2] had posted a video of [FC #2] and [FS #2] with a blunt, on social media, texting [FC #2's] cell phone." - Report to HCPR 11-10-21 - Type of Allegation Being Made: Resident Abuse - Child Protective Services notified</p> <p>Interview on 11-17-21 with the Director revealed:</p> <ul style="list-style-type: none"> <li>- The Owner conducted an internal investigation 11-10-21</li> <li>- FC #2 had already absconded from the facility</li> <li>- Owner interviewed staff making the report and interviewed FS #2</li> <li>- Owner informed Director to start the reporting process of this incident</li> <li>- The Director released FS #2 from employment on 11-10-21</li> <li>- The Director obtained video of FC #2 and FS #2 posted on social media video and text messages with pictures between FC #2 and FS #2 revealing an inappropriate relationship</li> <li>- Facility's internal investigation was a "Substantiated Claim"</li> </ul> <p>Interview on 11-15-21 with Client #1 revealed:</p> <ul style="list-style-type: none"> <li>- "[FC #2] and [FS #2] I'd see on the back porch</li> </ul>	V 110		

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V 110	<p>Continued From page 3</p> <p>(porch off kitchen exit) smoking blackies (small cigarettes). Then they would come inside smelling of smoke."</p> <p>Interview on 11-23-21 with FC #2's Department Social Services (DSS) Social Worker revealed: - DSS Social Worker contacted FC #2 with the request for an interview by DHSR (Division of Health Service Regulation Surveyor) - DSS Social Worker on 11-23-21 reported that FC #2 stated: "I don't want to talk about this anymore."</p> <p>Interview on 11-15-21 with FS #2 revealed: - Her role is to educate, teach and supervise. To be firm with them. "I'm not there to be their (group home residents) friend. [FC #2] always screamed for some reason. - I don't know why [Client #1] would make an allegation about me smoking. I told them (Blue Horizons Administration) I would take a test (drug test). But they never called me back. - I have a child and a degree. I would never jeopardize either of them. - [Executive Director] released me from work (11-10-21)."</p> <p>Interview on 11-15-21 with the House Manager/Direct Care Staff revealed: - There were concerns about FS #2 smoking weed</p> <p>Interview on 11-15-21 with the Qualified Professional (QP) revealed: - "No idea if [FS #2] is fired or suspended. I don't know what happened. I just know she isn't here."</p> <p>Interview on 11-16-21 with the Program Manager/QP Supervisor revealed: - "I'm here on a daily basis, everyday pretty much.</p>	V 110		

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V 110	<p>Continued From page 4</p> <p>- I have not witnessed it (FS#2 and FC#2 smoking marijuana and drinking alcohol). I'm here during the day and usually gone when the kids are here. "</p> <p>Review on 11-23-21 of an investigative interview dated 11-10-21 by the DSS child protection social worker (SW) with FC#2 revealed:</p> <p>- "[FC #2] states she is the only one using it (weed and alcohol). None of the other girls were. They (FC #2 and FS #2) would go outside and smoke. She (FS #2) started offering it (weed and alcohol) to her the first day she started (FS #2 hire date of 10-16-21). She (FS #2) was trying to get away with stuff.</p> <p>- [FS #2] thought she could make friends with everyone. She (FC #2) was friends with her on social media and she would post on snapchat pictures of them."</p> <p>- According to the interview, SW requested to see the social media posts and text messages. FC #2 reported "she dropped it (her cell phone) yesterday and is unable to see the screen. [FC #2] provided her phone and it is broken. "</p> <p>Review on 11-16-21 of undated text messages between FS #2 and FC #2 revealed:            FS #2: "They (Horizons Kids, LLC) got access. You didn't believe me. Your mom and them. SMH (shaking my head). D**n, lost a good job. WTF man (what the F**k). Get off here (texting on personal cell phones). Write me on snap. Why didn't you delete your messages man?"            FC #2: "Ok"            FS #2: "Where in the messages we smoking and drinking?"            FC #2: "When I had asked you to and someone told them ig (I guess). Did they put to in to together?"            FS #2: "I NEVER smoked or drunk with you."</p>	V 110		

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V 110	<p>Continued From page 5</p> <p>Saturday (no date) time 6:11 PM texted between FS #2 and FC #2:  FC #2: "We smoking tn (tonight)?"  FS #2: " send video the whole thing"  FC #2: "There's too. It was on snap."  FS #2: "Save it on snap then send it to me on text I need that whole video you showed me."  FC #2: "It's the first one."  FS #2: "O d**n didn't see that. My bad"  Text message 10-29-21 at 12:45 PM:  FC #2: "Hey you no you picking me up before you go to Statesville."  FS #2: "Yupp"  FC #2: "Aiii bring me a blunt. (Laughing emojis and 100% sign)"  -Review of a picture (appears to be a selfie) no date just Saturday 6:11 PM of FS #2 and FC #2 in which FC #2 has her middle finger raised for the camera. Both FC #2 and FS #2 are sitting on the grass.  -Review of a picture dated 10-23-21 at 10:57 PM (appears to be a selfie) of FS #2 (wearing a dark baseball cap) and FC #2 appears to be a nightclub/party atmosphere (bright neon lights, dark background).  -Review of a picture (appears to be a selfie) of FC #2 and the top portion of FS #2's dark baseball cap and un-identifiable individuals in the background. Appears to be the same nightclub party atmosphere.  -Review of a twenty-two (22) second video of FS #2 and FC #2 revealed FC #2 is sitting next to FS #2 and singing to unidentified rapper with words of b***h, cocaine, sex and gangster. FC #2 has her middle finger up (F**k you). FS #2 sings along with FC #2.</p> <p>Attempted interview on 11-17-21 with FS #2 to discuss the video and text messages revealed, FS #2 did not return the telephone call as of the</p>	V 110		

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V 110	<p>Continued From page 6</p> <p>exit date of the survey.</p> <p>Review on 11-22-21 of the Plan of Protection dated 11-22-21 (per email) and written by the Quality Assurance Consultant and Owner revealed: What immediate action will the facility take to ensure the safety of the consumers in your care? "Horizons Kids will continue to: - administer Competency Based training during orientation (see competency test and attachments) Responsible Party/How Often: Trainer/ ongoing - ensure Paraprofessionals understand and sign supervision plan during orientation - report the unethical behavior to immediate supervisor and/or HR Administrator (Human Resources) Responsible Party/How Often: All Staff/ongoing - provide supportive coaching and redirection when unethical behavior arises Responsible Party/How Often: QP Supervisor/Ongoing Describe your plans to make sure the above happens: - The Competency Based Test will be administered during orientation. The Trainer will facilitate a refresher courses on the "Standard of Conduct" and "Social and Therapeutic Relationship" to comply with our risk management program. Responsible Party/How Often: Trainer/11-23-21 These trainings are part of our Employee Based Competency. Responsible Party/How Often: Trainer/ongoing Time Line: These actions were implemented as part of our training regimen. Training will continuously occur to ensure staff has support needed to care for our consumers Responsible Party/How Often: ONGOING"</p>	V 110		

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V 110	Continued From page 7  FC #2 was 17 years old and had diagnoses of Oppositional Defiant Disorder; Cannabis Use Disorder; Mild Tobacco related Disorder; History of physical and sexual abuse. FS #2 was in a professional role as a Direct Care Paraprofessional to provide safety, supervision, guidance and education to FC #2. FS #2's decision to befriend FC #2 and step outside her professional role, placed FC #2 in a situation that further jeopardized her Cannabis Use Disorder as FS #2 offered and then smoked marijuana with FC #2. FC #2's confidentiality was compromised when FS #2 posted pictures and a video on social media pages. FS #2 showed a lack of professional decision making by partaking in a friendship role verses a professional role which placed FC #2 in a position to fail at her treatment goals. This constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days. An administrative penalty of \$1,000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500.00 per day will be imposed.	V 110		

# Plan of Correction

PRINTED: 12/08/2021

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<p>V 000</p>	<p><b>INITIAL COMMENTS</b></p> <p>A complaint survey was completed on 11-22-21. The complaint was substantiated (Intake ID #NC00183213). A deficiency was 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>	<p>V 000</p>	<p>(a) Horizons Kids does not offer privileging requirements for Paraprofessionals.</p> <p>(b) As of 11/03/2021, two Qualified Professionals were hired to supervise the Paraprofessionals. Either QP will conduct monthly supervision by educating paraprofessionals on suitable topics related to core skills, providing professional feedback regarding duties and refreshers. QPs must sign off on each PPs supervision plan and complete supervision logs monthly to remain compliant with supervision activities (See sample Supervision Plan)</p>	<p>Ongoing</p> <p>11/3/2021 Ongoing Monthly Weekly QP &amp; LP</p>
<p>V 110</p>	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <p>(a) There shall be no privileging requirements for paraprofessionals.</p> <p>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p> <p>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (e) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> <li>(1) technical knowledge;</li> <li>(2) cultural awareness;</li> <li>(3) analytical skills;</li> <li>(4) decision-making;</li> <li>(5) interpersonal skills;</li> <li>(6) communication skills; and</li> <li>(7) clinical skills.</li> </ol> <p>(f) The governing body for each facility shall develop and implement policies and procedures</p>	<p>V 110</p>	<p>(c) Paraprofessionals are required to complete Competency Based Training during New Hire Orientation The competency is based on the core skills to ensure the Paraprofessionals understand the importance of how to interact with the consumers we serve. The LP also conducts a weekly Consultation with PP's related to clients treatment and offers clinical suggestions to help PP's understand how to deal with the diagnosis of each consumer individually . HR/QA Manager will be responsible for auditing Employees Personnel Records to ensure competency based training was completed.</p> <p>(d) Executive Management has expanded our competency-based system by approving and implementing a "Standard of Conduct" policy &amp; procedure. This policy and procedure was established to illuminate the conduct of all employees working at Horizons Kids and utilize good decision making skills to protect the safety and well being of our consumers. The training was conducted on 11/23/201 at 10 am. This policy and procedure will also become a part of the New Hire practice and facilitated during orientation. This policy and procedure will also be used as a refresher course on a quarterly basis starting 11/23/2021 to ensure PPs understand the rules of engagement when working with our consumers.</p> <p>(e) HR/QA Manager conducts training for the core skills 1-7 during new hire orientation. The competencies test the knowledge of PPs to ensure they are</p>	<p>Ongoing/ Weekly HR/QA &amp; LP</p> <p>11/12/21 Ongoing EM, HR/QA, LP, &amp; QP</p> <p>Ongoing HR/QA Manager</p>

			<p>knowledgeable to work with the consumers. They must make 80% or better. HR/ QA Manager will audit Employee Personnel files as needed (unofficially )and quarterly (officially) to ensure training and supervision is being conducted.</p> <p>(f) Executive Management has approved, expanded and implemented policies and procedures. See attached current and ongoing Competency Based Policies &amp; Procedures addendum, Standard of Conduct</p>	<p>11/23/2021, Ongoing EM, HR/QA</p>
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE STATE FORM <sup>6899</sup>4W6E11 If continuation sheet 1 of 8

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V 110	<p>Continued From page 1</p> <p>for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, 1 of 1 former staff (FS #2) failed to demonstrate the knowledge, skills and abilities required by the population served. The findings are:</p> <p>Review on 11-16-21 of Former Client (FC) #2's record revealed: - Admission date: 9-7-21 - Diagnoses: Oppositional Defiant Disorder (ODD); Cannabis Use Disorder; Mild Tobacco related Disorder; History of physical and sexual abuse - Discharge date: 11-10-21 - FC #2 is 17 years of age - Treatment Plan dated 9-3-21: Goal: demonstrate improvement in her symptoms of ODD, as evidenced by zero incidents of physical aggression or threats of physical aggression per review period including but not limited to hitting, kicking, punching, spitting and threatening Goal: no more than one incident of verbal aggression per review period including but not limited to cursing, yelling and name calling Goal: will demonstrate compliance to staff directives without requiring more than 2 verbal prompts from staff members</p> <p>Review on 11-16-21 of FS #2's record revealed: - Date of Hire: 10-16-21</p>	V 110		
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STATE FORM 6899 4W6E11 If continuation sheet 2 of 8

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V 110	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>- Job Description: Direct Care Staff</li> <li>- Date of Release from Employment: 11-10-21 - Training: Confidentiality, Client Rights, HIPPA (Health Insurance and Accountability Act), Cultural Diversity, Professional Ethics, Meeting the needs of Special Population, Incident Reporting and Crisis Response</li> </ul> <p>Review on 11-17-21 of the facility's report to the Health Care Personal Registry (HCPR) dated 11-10-21 revealed: Incident dated 11-9-21: FC#2 " ... [FS #2] reported to a staff (unknown staff) that she (FS #2) had been having an inappropriate relationship with [FC #2]. [FS #2] had posted a video of [FC #2] and [FS #2] with a blunt, on social media, texting [FC #2's] cell phone." - Report to HCPR 11-10-21 - Type of Allegation Being Made: Resident Abuse - Child Protective Services notified</p> <p>Interview on 11-17-21 with the Director revealed: - The Owner conducted an internal investigation 11-10-21 - FC #2 had already absconded from the facility - Owner interviewed staff making the report and interviewed FS #2 - Owner informed Director to start the reporting process of this incident - The Director released FS #2 from employment on 11-10-21 - The Director obtained video of FC #2 and FS #2 posted on social media video and text messages with pictures between FC #2 and FS #2 revealing an inappropriate relationship - Facility's internal investigation was a "Substantiated Claim"</p> <p>Interview on 11-15-21 with Client #1 revealed: - "[FC #2] and [FS #2] I'd see on the back porch</p>	V 110		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-157</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/22/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BLUE HORIZONS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>130 SAINT JILL CIRCLE STATESVILLE, NC 28625</b>
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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 110	<p>Continued From page 3</p> <p>(porch off kitchen exit) smoking blackies (small cigarettes). Then they would come inside smelling of smoke."</p> <p>Interview on 11-23-21 with FC #2's Department Social Services (DSS) Social Worker revealed: - DSS Social Worker contacted FC #2 with the request for an interview by DHSR (Division of Health Service Regulation Surveyor) - DSS Social Worker on 11-23-21 reported that FC #2 stated: "I don't want to talk about this anymore."</p> <p>Interview on 11-15-21 with FS #2 revealed: - Her role is to educate, teach and supervise. To be firm with them. "I'm not there to be their (group home residents) friend. [FC #2] always screamed for some reason. - I don't know why [Client #1] would make an allegation about me smoking. I told them (Blue Horizons Administration) I would take a test (drug test). But they never called me back. - I have a child and a degree. I would never jeopardize either of them. - [Executive Director] released me from work (11-10-21)."</p> <p>Interview on 11-15-21 with the House Manager/Direct Care Staff revealed: - There were concerns about FS #2 smoking weed</p> <p>Interview on 11-15-21 with the Qualified Professional (QP) revealed: - "No idea if [FS #2] is fired or suspended. I don't know what happened. I just know she isn't here."</p> <p>Interview on 11-16-21 with the Program</p>	V 110		

	Manager/QP Supervisor revealed: - "I'm here on a daily basis, everyday pretty much.			
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Division of Health Service Regulation

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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <p style="text-align: center;"><b>MHL049-157</b></p>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <p style="text-align: center;"><b>11/22/2021</b></p>
NAME OF PROVIDER OR SUPPLIER  <p style="text-align: center;"><b>BLUE HORIZONS</b></p>		STREET ADDRESS, CITY, STATE, ZIP CODE <p style="text-align: center;"><b>130 SAINT JILL CIRCLE STATESVILLE, NC 28625</b></p>		
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V 110	<p>Continued From page 4</p> <p>- I have not witnessed it (FS#2 and FC#2 smoking marijuana and drinking alcohol). I'm here during the day and usually gone when the kids are here. "</p> <p>Review on 11-23-21 of an investigative interview dated 11-10-21 by the DSS child protection social worker (SW) with FC#2 revealed:</p> <p>- "[FC #2] states she is the only one using it (weed and alcohol). None of the other girls were. They (FC #2 and FS #2) would go outside and smoke. She (FS #2) started offering it (weed and alcohol) to her the first day she started (FS #2 hire date of 10-16-21). She (FS #2) was trying to get away with stuff.</p> <p>- [FS #2] thought she could make friends with everyone. She (FC #2) was friends with her on social media and she would post on snapchat pictures of them."</p> <p>- According to the interview, SW requested to see the social media posts and text messages. FC #2 reported "she dropped it (her cell phone) yesterday and is unable to see the screen. [FC #2] provided her phone and it is broken. "</p> <p>Review on 11-16-21 of undated text messages between FS #2 and FC #2 revealed:</p> <p>FS #2: "They (Horizons Kids, LLC) got access. You didn't believe me. Your mom and them. SMH (shaking my head). D**n, lost a good job. WTF man (what the F**k). Get off here (texting on personal cell phones). Write me on snap. Why didn't you delete your messages man?"</p> <p>FC #2: "Ok"</p> <p>FS #2: "Where in the messages we smoking and drinking?"</p> <p>FC #2: "When I had asked you to and someone told them ig (I guess). Did they put to in to together?"</p> <p>FS #2: "I NEVER smoked or drunk with you."</p>	V 110		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-157</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/22/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BLUE HORIZONS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>130 SAINT JILL CIRCLE</b> <b>STATESVILLE, NC 28625</b>
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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 110	<p>Continued From page 5</p> <p>Saturday (no date) time 6:11 PM texted between FS #2 and FC #2:            FC #2: "We smoking tn (tonight)?"            FS #2: " send video the whole thing"            FC #2: "There's too. It was on snap."            FS #2: "Save it on snap then send it to me on text I need that whole video you showed me."            FC #2: "It's the first one."            FS #2: "O d**n didn't see that. My bad"            Text message 10-29-21 at 12:45 PM:            FC #2: "Hey you no you picking me up before you go to Statesville."            FS #2: "Yupp"            FC #2: "Aiii bring me a blunt. (Laughing emojis and 100% sign)"            -Review of a picture (appears to be a selfie) no date just Saturday 6:11 PM of FS #2 and FC #2 in which FC #2 has her middle finger raised for the camera. Both FC #2 and FS #2 are sitting on the grass.            -Review of a picture dated 10-23-21 at 10:57 PM (appears to be a selfie) of FS #2 (wearing a dark baseball cap) and FC #2 appears to be a nightclub/party atmosphere (bright neon lights, dark background).            -Review of a picture (appears to be a selfie) of FC #2 and the top portion of FS #2's dark baseball cap and un-identifiable individuals in the background. Appears to be the same nightclub party atmosphere.            -Review of a twenty-two (22) second video of FS #2 and FC #2 revealed FC #2 is sitting next to FS #2 and singing to unidentified rapper with words of b***h, cocaine, sex and gangster. FC #2 has her middle finger up (F**k you). FS #2 sings along with FC #2.</p> <p>Attempted interview on 11-17-21 with FS #2 to discuss the video and text messages revealed, FS #2 did not return the telephone call as of the</p>	V 110		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-157</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/22/2021</b>	
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V 110	<p>Continued From page 6</p> <p>exit date of the survey.</p> <p>Review on 11-22-21 of the Plan of Protection dated 11-22-21 (per email) and written by the Quality Assurance Consultant and Owner revealed:</p> <p>What immediate action will the facility take to ensure the safety of the consumers in your care? "Horizons Kids will continue to:</p> <ul style="list-style-type: none"> <li>- administer Competency Based training during orientation (see competency test and attachments)</li> </ul> <p>Responsible Party/How Often: Trainer/ ongoing - ensure Paraprofessionals understand and sign supervision plan during orientation</p> <ul style="list-style-type: none"> <li>- report the unethical behavior to immediate supervisor and/or HR Administrator (Human Resources)</li> </ul> <p>Responsible Party/How Often: All Staff/ongoing - provide supportive coaching and redirection when unethical behavior arises</p> <p>Responsible Party/How Often: QP Supervisor/Ongoing</p> <p>Describe your plans to make sure the above happens:</p> <ul style="list-style-type: none"> <li>- The Competency Based Test will be administered during orientation. The Trainer will facilitate a refresher courses on the "Standard of Conduct" and "Social and Therapeutic Relationship" to comply with our risk management program.</li> </ul> <p>Responsible Party/How Often: Trainer/11-23-21 These trainings are part of our Employee Based Competency.</p> <p>Responsible Party/How Often: Trainer/ongoing Time Line: These actions were implemented as part of our training regimen. Training will</p>	V 110		

	continuously occur to ensure staff has support needed to care for our consumers Responsible Party/How Often: ONGOING"			
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Division of Health Service Regulation

STATE FORM <sup>6899</sup>4W6E11 If continuation sheet 7 of 8

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-157</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/22/2021</b>	
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V 110	<p>Continued From page 7</p> <p>FC #2 was 17 years old and had diagnoses of Oppositional Defiant Disorder; Cannabis Use Disorder; Mild Tobacco related Disorder; History of physical and sexual abuse. FS #2 was in a professional role as a Direct Care Paraprofessional to provide safety, supervision, guidance and education to FC #2. FS #2's decision to befriend FC #2 and step outside her professional role, placed FC #2 in a situation that further jeopardized her Cannabis Use Disorder as FS #2 offered and then smoked marijuana with FC #2. FC #2's confidentiality was compromised when FS #2 posted pictures and a video on social media pages. FS #2 showed a lack of professional decision making by partaking in a friendship role verses a professional role which placed FC #2 in a position to fail at her treatment goals. This constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days. An administrative penalty of \$1,000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500.00 per day will be imposed.</p>	V 110		
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<b>Title</b>	<b>Standard of Conduct</b>		
<b>Area</b>	<b>Operations/Administration</b>		
<b>Execution Date</b>	11/10/2021	<b>Revision Date</b>	
<b>Signature</b>		<b>Approval Date</b>	11/10/2021

**OVERVIEW:**

Horizons Kids is dedicated to operate with integrity, deliver the highest quality health care, strive to meet the needs of each stakeholder and surpass the expectations of our consumers, employees, and communities we serve using teamwork and committing to a continuous effort to improve our services.

We rely on the ability and professionalism of our employees and representatives to communicate effectively and merits of their services to the consumers with the expectation to act accordingly while working at Horizons Kids.

**POLICY:**

Horizons Kids, LLC is committed to protecting the safety, health and well-being of all who reside or work in our facilities. We recognize that alcohol use and drug abuse poses a significant threat to the lives of those who are affected by it. Horizons Kids considers itself an alcohol and drug free workplace, which balances our respect for consumers with the need to maintain an alcohol and drug free environment. Therefore, Horizons Kids considers its organization an alcohol and drug free workplace. To ensure this, employees are required to work in appropriate mental and physical condition to perform their jobs in a satisfactory manner.

**INTERPRETATION:**

Employees who abuse alcohol or other drugs are a danger to themselves, and those who reside or work in the facility. The use of illegal drugs and abuse of other controlled substances, on or off duty, is inconsistent with law-abiding behavior expected of all citizens. Employees who use illegal drugs or abuse other controlled substances or alcohol, on or off duty, tend to be less productive, less reliable, and prone to greater absenteeism. In addition, many consumers may have been referred wholly or in part because of the effects of their own involvement with alcohol or illegal drugs. Employees who abuse alcohol or are involved with illegal substances are unable to serve as appropriate role models.

It is one of the goals of a drug-free workplace program to encourage employees to voluntarily seek help with their difficulties. However, if an individual violates the policy, the consequences are serious. In the case of applicants, the offer of employment can be

withdrawn. An established employee, who violates this policy, will be subject to progressive disciplinary action by being terminated from employment. Nothing in this policy prohibits the employee from being disciplined or discharged for other violations and/or performance problems.

## **DRUG TESTING**

Although Horizons Kids does not perform pre-employment drug testing, there may be certain instances when an employee may have to undergo random drug testing. The following will apply:

1. Whenever an employee suffers an injury while on assignment or it is determined s/he may have contributed to an accident involving a fatality, serious bodily injury, or substantial damage to property, Horizons Kids may require the employee to submit a breath, saliva, urine and /or blood specimen for alcohol or drug testing. An employee who tests positive for alcohol or drugs as a result of such a test will be in violation of this policy.
2. Whenever a supervisor suspects that an employee's work performance or on the job behavior may have been affected in any way by alcohol or drugs, Horizons Kids may require the employee to submit a breath, saliva, urine and/ or blood specimen for the alcohol or drug testing. An employee who tests positive for alcohol or drugs as a result of such a test will be in violation of this policy. They will be removed from their assignment and deemed ineligible for future assignments.
3. If an employee refuses to undergo drug testing in any of the aforementioned situations, they will be removed from any assignments and terminated from employment with Horizons Kids.

## **AUTHORIZED USE OF PRESCRIBED MEDICINE**

The legal use of prescribed drugs is permitted on the job only if it does not impair an employee's ability to perform the essential functions of the job effectively and in a safe manner that does not endanger other individuals in the workplace.

Employees undergoing prescribed medical treatment with any drug, which may alter their behavior, or physical or mental ability must report this treatment to their immediate supervisor, who will determine whether the employee can appropriately fulfill assignments during the period of treatment.

## **PROHIBITIONS**

While on company property, in a company vehicle, and when conducting business-related activities off the premises of Horizons Kids, no employee may use, possess, distribute, sell, or be under the influence of alcohol or engage in the unlawful

manufacture, distribution, dispensation, possession, or use of illegal drugs. Violations of this policy will result in disciplinary action, up to and including dismissal. ***Such violations may also have legal ramifications.***

Horizons Kids prohibits the following:

1. Use, possession, manufacture, dispensation or sale of a controlled substance or of alcohol while on assignment.
2. Giving drugs, alcohol or contraband to consumers
3. Allowing consumers to bring or possess illegal substances/contraband into our facilities
4. Not reporting to management any rumors that a consumer may have brought contraband into a facility so that management may properly substantiate or unsubstantiate any claims.
5. Unauthorized use, possession, manufacture, dispensation or sale of a controlled substance or of alcohol while on assignment.
6. Being under the influence of an unauthorized controlled substance, illegal drug or alcohol while on assignment.
7. Possession, use, manufacture, distribution, dispensation or sale of illegal drugs or the use of alcohol, while on assignment or not, that adversely affects the employee's work performance, his or her own or other's safety at work, his or her ability to serve as an appropriate mentor/role model for our consumers, or the corporation's regard or reputation in the community.
8. Switching or adulterating any urine submitted for testing.
9. Refusing consent to testing or to submit a breath, saliva, urine or blood sample for testing when requested by management.
10. Conviction under any criminal drug statute.
11. Arrest under any criminal drug statute under circumstances that adversely affect the corporations regard or reputation in the community.
12. Refusal to complete a Medical Questionnaire and Consent Form prior to testing.

Employees with a drug or alcohol problem, ***that has not*** resulted in, and are not the immediate subject of disciplinary action, may request approval to take unpaid time off to participate in a rehabilitation or treatment program. Leave may be granted if the employee agrees to abstain from use of the problem substance, abides by all Horizons Kids policies, rules, and prohibitions relating to conduct in the workplace, and the leave of absence does not cause Horizons Kids any undue hardship.

#### **ARREST OR CONVICTION UNDER CRIMINAL DRUG STATUTE**

Employees must notify their immediate supervisor within five (5) calendar days after any arrest, conviction or a criminal drug offense. Failure to do so is grounds for termination of employment.

## EMPLOYEE CODE OF CONDUCT

To ensure orderly operations and provide the best possible work environment, Horizons Kids expects employees to follow a code of conduct that will protect the interests and safety of all who reside or work in our organization.

It is not possible to list all the forms of behavior that are considered unacceptable in the workplace. The following are examples of infractions of our code of conduct that may result in disciplinary action, up to and including dismissal:

- Theft or inappropriate removal or possession of property
- Falsification of timekeeping records
- Working under the influence of alcohol or illegal drugs
- Possession, distribution, sale, transfer, or use of alcohol or illegal drugs in the workplace, while of duty, or while operating company-owned vehicles or equipment
- Fighting or threatening violence in the workplace
- Boisterous or disruptive activity in the workplace
- Negligence or improper conduct leading to damage of company-owned or customer-owned property
- Negligence or improper conduct that compromises the security or safety of company-owned or customer-owned property
- Insubordination or other disrespectful conduct
- Violation of safety or health rules
- Smoking in prohibited areas
- Sexual or other unlawful harassment
- Possession of dangerous or unauthorized materials, such as explosives or firearms, in the workplace
- Excessive absenteeism or absence without approval
- Unauthorized disclosure of confidential information
- Violation of personnel policies
- Unsatisfactory performance or conduct
- Job abandonment
- Allowing consumers to use your personal cell phone
- Giving/lending money to consumers
- Opening bank or financial accounts on behalf of consumers
- Video recording consumers at any time
- Communicating with clients via Social Media, i.e., Facebook, Twitter, Instagram or any social media outlet that has a communication outlet
- Communicating with clients via your personal cell phone, including texting, calling, emailing or using any message software that allows communication.
- Giving personal cell phone numbers to consumers

## **Procedures:**

### **All Employees:**

1. Shall adhere to the above policy as a condition of employment
2. Shall attend all training sessions
3. Shall take responsibility for their own actions and report the unsafe actions of others through an adverse event form
4. Notify company of any conviction of a criminal drug violation in the workplace within five calendar days of the conviction
5. Comply with our requests for random drug testing

### **Supervisors:**

1. Ensure that our reporting employees have been trained on the above policy
2. Observe employee performance
3. Assist with any investigation pertaining to all violations in this policy and procedure
4. Report dangerous practices and document on an adverse event form
5. Clearly state consequences of policy violations to reporting employees
6. Communicate with case managers, legally responsible persons, social workers or those involved in the care of the consumer

### **Clinical Staff**

1. Report any suspected incidents as of a violation policy to supervisors and law enforcement as appropriate
2. Complete an adverse event form in the event of a policy violation

### **Human Resources/Training Director**

1. Ensure the training of all new employees during the orientation process on this policy and on annual basis thereafter
2. Maintain records or adverse events and proceed investigative procedures as necessary
3. Maintain confidentiality and anonymity as appropriate
4. Maintain records of training and other subsequence records
5. Assist staff in efforts to comply with drug-free workplace and corrective action in conjunction with supervisor staff

### **Leadership/Management Teams**

1. Provide leadership, management, and training with their assigned supervisors and/or staff and be accountable Ownership/Executive Director for procedural compliance

2. Determine the continuance of a consumer/staff in Horizons Kids programs in light of a violation of this policy and the length of “persona non grata” status of parent/guardian, community stakeholder has violated the policy

### **Ownership/Executive Director**

1. Shall assure Standard of Conduct policies and procedures are developed, maintained, and continuously revised to meet the expectations of consumers, purchasers of service, and accrediting/regulatory bodies.
2. Shall assure policies and procedures are developed, maintained, and continuously revised to meet the expectations of consumers, purchasers of service, and accrediting/regulatory bodies. To include, but not limited to:
  - a. Current CARF Behavioral Health Standards/Criteria
  - b. Federal Requirement, e.g. HIPAA, Confidentiality, etc.
  - c. Applicable NC Statute and Division of MH/DD/SA Area Program Standards
  - d. Managed Care Organization Contract (MCO)
  - e. Division of Health Service Regulation(DHSR)
  - f. NC Division of Medical Assistance (DMA) requirements for behavior health Medicaid services
3. Shall have primary responsibility for the interpretation and application of Horizons Kids, LLC policy and procedure and/or may delegate this responsibility to members of the Leadership Team.
4. Shall ensure investigations are completed within 24 hours
5. Shall approve and sign all Standard of Conduct policies and procedure. May submit to attorney and obtain legal opinion before final signature and implementation

<b>Title</b>	<b>Employee Based Competency</b>		
<b>Policy Number(s)</b>	<b>Addendum</b>		
<b>Area</b>	<b>Employee Based Competency</b>		
<b>Execution Date</b>	<b>10/1/2021</b>	<b>Revision Date</b>	

**Policy**

It shall be the policy of Horizons Kids to utilize a competency based employment system (CBES) to manage our human resources. This system when fully implemented will achieve the following objectives:

1. Provide an employment screening process that ensures employees meet competency requirements as specified in each position description and other Horizons Kids policies and procedures, i.e., competency tests, other trainings, etc.
2. Provide orientation and ongoing training (internal and external) to employees, as required by purchasers of service, other regulatory/ accrediting bodies, and training needed to improve employee competencies within their assigned work area.
3. Provide documented clinical supervision to each direct care employee, and assure employees receive ongoing assessment, evaluation, and feedback that seek to improve performance and competencies. This shall be demonstrated by exhibiting core skills pertinent to assigned duties, to include:
  - a. Technical Knowledge
  - b. Cultural Awareness
  - c. Analytical Skills
  - d. Decision- Making
  - e. Interpersonal Skills
  - f. Communication Skills
  - g. Performance Expectations as defined by assigned supervisor.
4. Provide annual performance evaluations to employees that are fair, objective, and appropriately reward/sanction employees based on their performance and demonstrated competence.

CBES policy and procedure shall meet the requirements of the Department of BH/SA/DD, accreditation organizations and other Purchaser of Service expectations, i.e., and other stakeholders involved in the treatment of care for the consumers.

The CBES policy and procedure shall be applicable to individuals that provide direct care clinical services; to include:

- Employees (temporary, part-time, full-time, and contract), practicum/intern students, and volunteers. Upon full development and implementation with direct care clinical employees, non-clinical work areas will be required to implement this policy and procedure.

## **Accountability/Responsibilities**

### **All Employees**

1. Continuously work to maintain and improve competencies.
2. Actively participate in supervision process to improve competencies.
3. Complete required training
  - a. New Hire Orientation
  - b. Annual
  - c. Administrative and Clinical as specified in position description and approved by assigned supervisor.
4. Shall have the right to file an employee complaint regarding decisions and performance evaluation.

### **Quality Assurance Consultant/Trainer**

1. Shall maintain a training schedule that is designed around the needs of employees, and regulatory/ accrediting body requirements. Primary training shall include:
  - a. Consumer Rights (annually)
  - b. Person Centered Thinking and Planning
  - c. Behavior Intervention (as required by position description with annual training/recertification)
  - d. Effective Documentation Writing
  - e. Incident Event Reporting
  - f. CPR (as required by position description)
  - g. First Aid (as required by position description)
  - h. Confidentiality and HIPAA
  - i. Employee Ethics
  - j. Blood Borne Pathogens, Infections, and Universal Precautions
  - k. Client Specific Competency
  - l. Safety
  - m. Organizational Policies and Procedures
  - n. Other training as needed to meet organizational need
2. Shall provide ongoing assessment of organizational training needs and work to meet training need within available organizational resources. This includes assuring organizational training meets requirements specified by regulatory and accrediting bodies.
3. Shall maintain documented routine supervision to employees assigned to their supervision following general guidelines shall apply:
  - a. A competency-based assessment shall be completed for each employee.

- b. A written supervision plan shall be developed upon employment and annually thereafter. This plan shall be approved by the Management Team.
- c. Frequency of **minimum** supervision for direct care employees shall be:
  - i. Associate Professional (1 x month, or as specified by supervisor)
  - ii. Paraprofessionals/Group Assistants (1 x month, or as specified by supervisor or specified Chief Clinical Officer)

### **HR Director/ Department**

1. Shall maintain confidential/ secure employee files (electronic or paper). This will include employee-credentialing files.
2. Shall conduct initial applicant screening based on position description requirements and salary/benefit requirements of applicant.
  - a. Shall ensure each employee has a position description. Position descriptions will be written in HR approved format.
  - b. Will maintain all positions in electronic format.
3. Shall complete the offer letter process, to include: primary source verification (driving record, criminal background, education, licensure/ certification, Health Care Registry).
4. Shall complete and submit managed care's organization contracts.
5. Shall be responsible for developing orientation/training content/schedules, with input from management and leadership teams.
6. Ensure personnel files are maintained as specified by purchasers of service, regulatory/accrediting bodies.
7. Work with assigned supervisors to ensure employees maintain required training, receive 90 day/annual performance evaluations, and receive objective rewards/sanctions based on competencies and performance.
8. Shall ensure position descriptions are developed, reviewed and revised for each employee assigned to their supervision. Position descriptions will accurately specify competencies, required credentialing, and performance expectations.
  - a. It is recommended this review be completed during the performance evaluation process.
9. Shall screen applicants for employment based on required competencies, credentials, and work experience. Interview questions will be utilized to measure competencies and assure that the best applicant is hired.
10. Shall provide orientation and assign duties based on their competency, skill, and work experience. Supervisor may reduce duties based on employee performance/changes in competency level. To be completed upon initial employment, and every year thereafter.
11. Shall maintain documented routine supervision to employees assigned to their supervision following general guidelines shall apply:

- a. A competency-based assessment shall be completed for each employee.
  - b. A written supervision plan shall be developed upon employment and annually thereafter. This plan shall be approved by the Management Team.
  - c. Frequency of **minimum** supervision for direct care employees shall be:
    - i. Associate Professional (1 x month, or as specified by supervisor)
    - ii. Paraprofessionals/Group Assistants (1 x month, or as specified by supervisor or specified Chief Clinical Officer)
12. Shall provide performance evaluation at 90 days for new employees, and annually thereafter. Performance evaluation will be documented using process approved by HR and management team.

### **Human Resources Assistant**

1. Shall ensure position descriptions are developed, reviewed and revised for each employee assigned to their supervision. Position descriptions will accurately specify competencies, required credentialing, and performance expectations.
  - a. It is recommended this review be completed during the performance evaluation process.
2. Shall screen applicants for employment based on required competencies, credentials, and work experience. Interview questions will be utilized to measure competencies and assure that the best applicant is hired.
3. Shall provide orientation and assign duties based on their competency, skill, and work experience. Supervisor may reduce duties based on employee performance/changes in competency level. To be completed upon initial employment, and every year thereafter.
4. Shall maintain documented routine supervision to employees assigned to their supervision following general guidelines shall apply:
  - a. A competency-based assessment shall be completed for each employee.
  - b. A written supervision plan shall be developed upon employment and annually thereafter. This plan shall be approved by the Management Team.
  - c. Frequency of **minimum** supervision for direct care employees shall be:
    - Associate Professional (1 x month, or as specified by supervisor)
    - Paraprofessionals/Group Assistants (1 x month, or as specified by supervisor or specified Chief Clinical Officer)

5. Shall provide performance evaluation at 90 days for new employees, and annually thereafter. Performance evaluation will be documented using process approved by HR and management team.

### **Clinical Manager**

1. Shall ensure direct care employees receive competency based training include:
  - a. Areas that reflect the specific needs of consumers
  - b. Clinical skills appropriate to the employee's position
  - c. Individual Service Plan Development
  - d. Interviewing Skills
  - e. Program/Service related research-based treatment approaches.

### **Executive Director**

1. Shall conduct quarterly reviews of supervision files as part of Horizons Kids system.
2. Will summarize/trend data and submit to management and/or leadership team for review.
3. Shall complete and submit managed care's organization contracts.

### **Leadership/Executive Management Team**

1. Shall be responsible for the review, approval, and revision of the policy and procedure.
2. Shall review quarterly reports and implement system changes as appropriate to improve the quality and outcome of human resource management and consumer outcomes.
3. Assignment of resources to support CBES system

*Original Policy*  
*p. 1 of 2*

**HORIZONSKIDS, LLC.**  
**POLICY AND PROCEDURE MANUAL**

**POLICY TITLE: EMPLOYEE COMPETENCIES**

**Policy**

Horizons Kids, LLC. employees are competent to perform their job duties.

**Procedures**

1. Qualified professionals, associate professionals and paraprofessionals, as defined in DMH/DD/SAS rule 10 NCAC 27G .0104, demonstrate knowledge, skills and abilities required by the population served.
  - a. Knowledge – education or competency based training and knowledge of the specific population to be served.
  - b. Skills – developed set of practices to apply to specific population to be served.
  - c. Abilities – application of knowledge and skills to achieve desired outcomes for the specific population to be served.
2. An employee's knowledge, skills and abilities required by the population and service or support are:
  - a. verified by transcripts from college or other academic institutions, certificates, licensed or other documentation of training upon hiring and as changes occur;
  - b. verified through employment references and personal interviews;
  - c. enhanced through ongoing training and supervision;
  - d. evaluated following training post-tests, observations and input from stakeholder and individuals receiving services or supports; and
  - e. monitored through supervision.
3. Competencies are demonstrated by exhibiting core skills including:
  - a. technical knowledge;
  - b. cultural awareness;
  - c. analytical skills;
  - d. decision-making;
  - e. interpersonal skills;
  - f. communication skills; and
  - g. clinical skills.
4. Horizons Kids, LLC. may accept documentation from another organization or agency verifying a new employee's competencies when Horizons Kids, LLC. has determined that the organization or agency has an established training program and QI system that monitors competencies as required by rules and regulations.

**HORIZONSKIDS, LLC.**  
**POLICY AND PROCEDURE MANUAL**

*original policy  
p. 2 of 2*

Qualified professionals as specified in 10A NCAC 27G .0104(18) (a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.

5. There are no “privileging” requirements for qualified professionals, associate professionals and paraprofessionals.

(Horizons Kids, LLC. assures compliance with all DMH/DD/SAS competencies at such time they are established.)

# Horizons Kids LLC

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MHL # 049-157

5936 Monroe Road  
Charlotte, NC 28212  
(980) 498-9893  
www.HorizonsK.com

December 14, 2021

**Private & Confidential**

Mental Health Licensure and Certification Section  
NC Division of Health Service Regulation  
2718 Mail Service Center  
Raleigh, NC 27699-2718

Dear Sir/Madam,

I am responding to your complaint survey, MHL 049-157, dated December 9, 2021 (copy enclosed) in connection with our Plan of Correction.

Please note that it was our organization that initiated this complaint after we heard rumors of misconduct between a paraprofessional and a client. Our internal investigation started immediately once we heard about the allegation, on November 9<sup>th</sup> around 6:00pm. Around 9:00am on November 10<sup>th</sup>, we substantiated the claim, terminated the employee, called the local police, notified the client's DSS officer, and filed a report in IRIS, etc.

We had all of the appropriate trainings in place and the required testing to make sure our paraprofessionals did have the competencies in place to meet state standards.

The fact that this employee lacked good decision-making skills led us to expand our policies and trainings to include a Standard of Conduct policy (enclosed) that includes, among other things, a list of actions that would get an employee fired or even arrested. This addition to our policies is designed to make employees aware that the safety of our clients and the integrity of our organization are our first priorities and if they do commit acts of misconduct that there are consequences for their actions.

We have already hosted training with our staff on the Standards of Conduct and have integrated it into our new hire training.

Please also note that we had also expanded our Employee Based Competency policy (enclosed) on October 1, 2021 and it was implemented within our organization. Surveyor Kathy Young reviewed the policy and obtained documentation that Staff #2 did take and pass this training.

# Horizons Kids LLC

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MHL # 049-157

5936 Monroe Road  
Charlotte, NC 28212  
(980) 498-9893  
[www.HorizonsK.com](http://www.HorizonsK.com)

The employee that committed misconduct did go through our training program and did pass the competencies tests, etc. She was even a candidate for store manager for a national retail chain, responsible for overseeing other people. She had a history of achievement and there were no red flags of potential risk or misconduct during the interview, hiring, or training process.

On a separate note, the survey indicated that there was a picture of Client #2 and Staff #2 at a nightclub type of environment. Please note that they were at a haunted house with the other clients and staff person. In one of the photos, you can see a fake cobweb in the top left. I was at the facility that afternoon and I was leaving as they were all getting ready to leave for the haunted house.

If you have any questions, please do not hesitate to telephone me at (980) 498-9893.

Very truly yours,



Eric Little - Owner  
Horizons Kids LLC



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

ROY COOPER • Governor  
MANDY COHEN, MD, MPH • Secretary  
MARK PAYNE • Director, Division of Health Service Regulation

December 9, 2021

Horizons Kids, LLC  
Mr. Eric Little, Owner  
5936 Monroe Road  
Charlotte, North Carolina 28212

Re: Complaint Survey completed November 22, 2021  
Blue Horizons 130 Saint Jill Circle, Statesville, North Carolina 28625  
MHL # 049-157  
E-mail Address: eric.little@horizonsk.com  
Intake #NC00183213

Dear Mr. Little:

Thank you for the cooperation and courtesy extended during the complaint survey completed November 22, 2021. The complaint was substantiated.

A deficiency was cited during the survey.

Enclosed you will find all deficiency cited listed on the Statement of Deficiencies Form. The purpose of the Statement of Deficiencies is to provide you with specific details of the practice that does not comply with state regulations. You must develop one Plan of Correction that addresses each deficiency listed on the State Form and return it to our office within ten days of receipt of this letter. Below you will find details of the type of deficiencies found, the time frames for compliance plus what to include in the Plan of Correction.

**Type of Deficiencies Found**

- Type A1 rule violation is cited for **10A NCAC 27G .0204 Competencies and Supervision of Paraprofessionals (V110)**.

**Time Frames for Compliance**

- Type A1 violation must be **corrected** within 23 days from the exit date of the survey, which is December 15, 2021. Pursuant to North Carolina General Statute § 122C-24.1, failure to correct the enclosed Type A1 violation by the 23<sup>rd</sup> day from the date of the survey may result in the assessment of an administrative penalty of \$500.00 (Five Hundred) against Horizons Kids, LLC for each day the deficiency remains out of compliance.

**What to include in the Plan of Correction**

- Indicate what measures will be put in place to **correct** the deficient area of practice (i.e. changes in policy and procedure, staff training, changes in staffing patterns, etc.).
- Indicate what measures will be put in place to **prevent** the problem from occurring again.
- Indicate **who will monitor** the situation to ensure it will not occur again.
- Indicate **how often** the monitoring will take place.
- Sign and date the bottom of the first page of the State Form.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

LOCATION: 1800 Umstead Drive, Williams Building, Raleigh, NC 27603

MAILING ADDRESS: 2718 Mail Service Center, Raleigh, NC 27699-2718

www.ncdhhs.gov/dhsr • TEL: 919-855-3795 • FAX: 919-715-8078

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

December 9, 2021  
Blue Horizons  
Eric Little

Make a copy of the Statement of Deficiencies with the Plan of Correction to retain for your records.  
***Please do not include confidential information in your plan of correction and please remember never to send confidential information (protected health information) via email.***

Send the original completed form to our office at the following address within 10 days of receipt of this letter.

Mental Health Licensure and Certification Section  
NC Division of Health Service Regulation  
2718 Mail Service Center  
Raleigh, NC 27699-2718

A follow up visit will be conducted to verify all violations have been corrected. If we can be of further assistance, please call Barbara Perdue at 336-861-6283.

Sincerely,

*Kathy Young*

Kathy Young  
Facility Compliance Consultant I  
Mental Health Licensure & Certification Section

Cc: [QM@partnersbhm.org](mailto:QM@partnersbhm.org)  
[dhhs@vayahealth.com](mailto:dhhs@vayahealth.com)  
Pam Pridgen, Administrative Assistant