

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-739	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 12/08/2021
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NAME OF PROVIDER OR SUPPLIER COMMUNITY TREATMENT ALTERNATIVES II	STREET ADDRESS, CITY, STATE, ZIP CODE 4901 ROSENA DRIVE CHARLOTTE, NC 28227
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V 000	<p>INITIAL COMMENTS</p> <p>An annual, complaint and follow-up survey was completed on 12/8/21. The complaint was substantiated(Intake #182138). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p> <p>The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 109	<p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based</p>	V 109		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 109	<p>Continued From page 1</p> <p>employment system in the State Plan for MH/DD/SAS.</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.</p> <p>(g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, 1 of 1 Qualified Professional (QP) failed to demonstrate the knowledge, skills, and abilities required by the population served. The findings are:</p> <p>Refer to V112 for the failure to develop and implement treatment plan strategies: -client #1 needed her glasses to function properly in the school setting; -client #1 repeatedly lost her glasses or broke her glasses this school year and last school year; -client #1's treatment plan did not include strategies to address client #1's behaviors in regards to breaking her glasses, hiding her glasses, and losing/misplacing her glasses while at school and during the transition to and from school.</p> <p>Review on 11/24/21 of the QP's personnel record revealed: -hire date of 6/10/11.</p>	V 109		

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V 109	<p>Continued From page 2</p> <p>Interview on 11/23/21 with client #1 revealed: -wears glasses; -lost her glasses; -broke a pair of glasses; -had glasses when school first started; -doesn't remember when she lost her glasses; -she has not been to the eye doctor to get her glasses replaced; -can't see far away; -have to sit close to the front of the class at school to see.</p> <p>Review on 12/2/21 of a form from a local eye doctor dated 5/12/21 detailed a prescription for glasses.</p> <p>Interview on 11/30/21 with school staff #1 revealed: -client #1 has had glasses since the 2nd grade; -client #1 lost her glasses; -one time she broke her glasses last year; -been awhile since she has had her glasses; -has not seen client #1 with glasses this school year; -client #1 needs her glasses to read.</p> <p>Interview on 12/2/21 with school staff #2 revealed: -had client #1 in summer school this year and she had an old pair of glasses; -the old pair of glasses had "been through some things;" -now has client #1 in her class for this regular school year; -client #1 has not had any glasses all school year; -client #1 needs her glasses to read and see the board; -client #1 has difficulty at times reading without her glasses.</p>	V 109		

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V 109	<p>Continued From page 3</p> <p>Interview on 11/24/21 with the QP revealed: -been working at the facility for 16 years since 2005; -been the QP for the facility since July 2021; -was a residential counselor in the past; -duties included facilitating group sessions with the clients, participating in the CFT(Child and Family Team) meetings, supervisions with staff every month and ensuring "things run smoothly;" -also work some 1st shifts and some 3rd shifts; -was a special education teacher for 23 years; -client #1 has problems managing her outbursts and her impulsivity, her volume control, her boundaries and regulation of her emotions and behaviors; -client #1 wears glasses; -she keeps them at school; -she broke a pair during transition to and from the school and the facility; -she wears them for reading; -aware client #1 did not have any reading glasses at the facility.</p> <p>This deficiency is crossed referenced into 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents V293 for a Type A1 rule violation and must be corrected within 23 days.</p>	V 109		
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified</p>	V 110		

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V 110	<p>Continued From page 4</p> <p>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"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, 1 of 1 Home Manager (Home Mgr) failed to demonstrate the knowledge, skills, and abilities required by the population served. The findings are:</p> <p>Review on 11/24/21 of the Home Mgr's personnel record revealed: -hire date of 4/15/17; -documentation of completion of all required</p>	V 110		

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V 110	<p>Continued From page 5</p> <p>trainings present in the record.</p> <p>Review on 11/23/21 and 11/24/21 of client #1's record revealed: -admission date of 5/25/18; -age 10 years; -diagnoses of PTSD(Post Traumatic Stress Disorder) and Attention Deficit Hyperactivity Disorder(ADHD); -assessment dated 5/15/18 documented client #1 had a visual impairment and wore glasses; -treatment plan dated 6/28/21 and last updated 11/3/21 documented client #1 was a child "...who enjoys reading and has been successful in learning how to have a positive outlook on her life;" -a medical form from a pediatrician dated 11/22/19 documented a referral to an eye doctor due to client #1's decrease in vision.</p> <p>Review on 12/2/21 of a form from a local eye doctor dated 5/12/21 detailed a prescription for glasses.</p> <p>Interview on 11/23/21 with client #1 revealed: -wears glasses; -lost her glasses; -broke a pair of glasses; -had glasses when school first started; -doesn't remember when she lost her glasses; -she has not been to the eye doctor to get her glasses replaced; -can't see far away; -have to sit close to the front of the class at school to see.</p> <p>Observation on 11/24/21 at 1:30pm revealed: -all the clients were sitting on the floor in living room coloring and doing an activity with staff; -client #1 was not wearing any glasses.</p>	V 110		

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V 110	<p>Continued From page 6</p> <p>Interview on 11/30/21 with staff #2 revealed: -not sure client #1 has glasses; -client #1 has a hard time keeping up with her glasses; -she uses her glasses to read.</p> <p>Interview on 11/30/21 with school staff #1 revealed: -client #1 has had glasses since the 2nd grade; -client #1 lost her glasses; -one time she broke her glasses last year; -been awhile since she has had her glasses; -has not seen client #1 with glasses this school year; -client #1 needs her glasses to read.</p> <p>Interview on 12/2/21 with school staff #2 revealed: -had client #1 in summer school this year and she had an old pair of glasses; -the old pair of glasses had "been through some things;" -now has client #1 in her class for this regular school year; -client #1 has not had any glasses all school year; -client #1 needs her glasses to read and see the board; -client #1 has difficulty at times reading without her glasses; -has not heard from the facility regarding her glasses.</p> <p>Interview on 11/29/21 with the Home Mgr revealed: -been with the agency for 20 years; -duties: work closely with the QP(Qualified Professional), ensure client needs are met and work all shifts; -client #1 lost a total of 4 glasses in the past 2</p>	V 110		

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V 110	<p>Continued From page 7</p> <p>years;</p> <ul style="list-style-type: none"> -Medicaid will only pay for one pair a year; -client #1's legal guardian, the Department of Social Services(DSS) Social Worker(SW) paid for a pair; -the last time client #1 went back to school, she lost her glasses; -contacted the DSS SW to buy another pair of glasses; -talked to the DSS SW about it; -got the verifications from the DSS SW to get another pair of glasses; -have a limit of money can spend on the glasses; -had to follow back up with the DSS SW; -client #1 can't see if she is put in the back of the classroom; -client #1 went to eye doctor at the first of this year 2021; -"dropped the ball(referring to obtaining client #1's new glasses);" -"I was over that(referring to the Home Mgr's responsibility for obtaining client #1's new glasses)." <p>Interview on 11/29/21 with client #1's DSS SW revealed:</p> <ul style="list-style-type: none"> -not aware client #1 did not have her glasses; -was aware a few months back client #1 lost her glasses; -told the facility's Home Mgr to go ahead and get client #1 new glasses; -thought the Home Mgr had already obtained client #1's new glasses; -think it was in the summertime when the Home Mgr talked about client #1 losing her glasses; -end of August this year the Home Mgr said client #1 lost her glasses at school; -the beginning of September spoke to the Home Mgr again and the glasses were still missing; -told Home Mgr to go ahead and purchase some 	V 110		

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V 110	<p>Continued From page 8</p> <p>new glasses, limit up to \$150; -the Home Mgr said she would go to the place where they got client #1's glasses before; -this was the last she heard about the glasses; -thought client #1 had a new pair; -not aware client #1 was still going without glasses; -the Home Mgr had not reached out to her lately about client #1 losing her glasses again; -plan to get in touch with the Home Mgr; -will check her notes to get the exact dates when she talked to the Home Mgr.</p> <p>Further interview on 11/29/21 with client #1's DSS SW revealed: -spoke to the Home Mgr; -the Home Mgr said she had not gotten the glasses due to client #1 being quarantined from a COVID scare at school for two weeks then she went out on FMLA for 2 weeks then she herself was quarantined for COVID; -the Home Mgr told the DSS SW she will call today to make an appointment for client #1 to get her glasses and go tomorrow to the store to pick out client #1's frames for the glasses; -client #1 will have to go another day to get fitted in the glasses; -didn't know why it took so long(to schedule an appointment for client #1 to get new glasses); -talked to the Home Mgr on Sept 1st about the glasses; -the Home Mgr explained to the DSS SW client #1 did not have her glasses because "it all rolled around into October and things came up that got in the way."</p> <p>Interview on 12/3/21 with the Licensee/CEO(Chief Executive Officer) revealed: -she talked to client #1 who said she had a pair of glasses at school but they were too big and keep</p>	V 110		

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V 110	<p>Continued From page 9</p> <p>falling off her face; -client #1 said she wore the glasses the other day; -the Licensee/CEO plans to call the school to find out about the glasses; -also talked with the eye doctor about some things she can put in place to assist client #1 from losing her glasses like straps and other accessories; -the Licensee/CEO stated the school had not contacted the facility to let staff know client #1 needed glasses.</p> <p>Further interview on 12/3/21 with the Licensee/CEO and the Home Mgr revealed: -school found a pair of client #1's glasses in her desk; -the glasses were the same glasses she got back in May 2021; -client #1 had her glasses all along at the school; -the Home Mgr stated she contacted client #1's DSS SW in August because client #1 did not come home with her glasses; -the Home Mgr stated they are doing a form to ensure the glasses are transported back and forth from school and the facility; -the Licensee/CEO will forward the emails from the school social worker regarding the glasses.</p> <p>Review on 12/3/21 of emails from the school social worker to the Home Mgr revealed the following documented: -email dated 12/3/21 at 1:10pm: "Good Afternoon [the Home Mgr]. After speaking with you on the phone regarding [client #1's] glasses, the teacher did go into the classroom and found the glasses in the student's desk. [Client #1] demonstrated in front of me the glasses not fitting properly as each time she put her head down the glasses fell off her face. I look forward to our meeting on</p>	V 110		

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V 110	<p>Continued From page 10</p> <p>December 13th so we can create a procedure to ensure [client #1] is bringing her glasses to and from school. Please reach out to me if you have any questions or concerns;" -email dated 12/3/21 at 2:24pm: "[The Home Mgr], [client #1] was suppose to bring the glasses home this afternoon, however, she decided to hind them instead. I reminded her during checkout that she needed to bring them with her. She and the TA(Teacher's Assistant) went into the classroom to search for the glasses in her desk and they were not found. We will look for them on Monday morning and I will personally put the glasses in her book bag. Sorry for the inconvenience."</p> <p>This deficiency is crossed referenced into 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents V293 for a Type A1 rule violation and must be corrected within 23 days.</p>	V 110		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(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.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p>	V 112		

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V 112	<p>Continued From page 11</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(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.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to develop and implement treatment strategies to meet the needs of the clients affecting 1 of 3 audited clients (client #1). The findings are:</p> <p>Review on 11/23/21 and 11/24/21 of client #1's record revealed: -admission date of 5/25/18; -age 10 years; -diagnoses of PTSD(Post Traumatic Stress Disorder) and Attention Deficit Hyperactivity Disorder(ADHD); -assessment dated 5/15/18 documented client #1 had visual impairment and wore glasses; -documentation from a pediatrician dated 11/22/19 made a referral to an eye doctor due to client #1's decrease in vision; -treatment plan dated 6/28/21 and last updated 11/3/21 documented the following goals: learn to identify social emotional strategies, identify how</p>	V 112		

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V 112	<p>Continued From page 12</p> <p>to problem solve, reduce frequency of impulsive behaviors that results in physical altercations and verbal altercations as she enhances her ability to tolerate stress, recognize and identify healthy relations without crossing boundaries in all settings, identify safety risk and increase safe physical behavior and develop strategies necessary to cope with her trauma related symptoms;</p> <p>-no goal or strategies to address client #1's behaviors of breaking/losing/hiding her glasses at school and during the transition to and from school;</p> <p>-no documentation of discussion of client #1's lost/broken glasses in the treatment plan during the monthly updates on 8/5/21, 9/5/21, 10/6/21 and 11/3/21.</p> <p>Review on 12/2/21 of a form from a local eye doctor dated 5/12/21 detailed a prescription for glasses.</p> <p>Interview on 11/23/21 with client #1 revealed:</p> <ul style="list-style-type: none"> -wears glasses; -lost her glasses; -broke a pair of glasses; -had glasses when school first started; -doesn't remember when she lost her glasses; -she has not been to the eye doctor to get her glasses replaced; -can't see far away; -have to sit close to the front of the class at school to see. <p>Interview on 11/30/21 with school staff #1 revealed:</p> <ul style="list-style-type: none"> -client #1 has had glasses since the 2nd grade; -client #1 lost her glasses; -one time she broke her glasses last year; -been awhile since she has had her glasses; 	V 112		

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V 112	<p>Continued From page 13</p> <p>-has not seen client #1 with glasses this school year; -client #1 needs her glasses to read.</p> <p>Interview on 12/2/21 with school staff #2 revealed: -had client #1 in summer school this year and she had an old pair of glasses; -the old pair of glasses had "been through some things;" -now has client #1 in her class for this regular school year; -client #1 has not had any glasses all school year; -client #1 needs her glasses to read and see the board; -client #1 has difficulty at times reading without her glasses.</p> <p>Review on 12/3/21 of emails from the school social worker to the Home Mgr revealed the following documented: -email dated 12/3/21 at 1:10pm: "Good Afternoon [the Home Mgr]. After speaking with you on the phone regarding [client #1's] glasses, the teacher did go into the classroom and found the glasses in the student's desk. [Client #1] demonstrated in front of me the glasses not fitting properly as each time she put her head down the glasses fell off her face. I look forward to our meeting on December 13th so we can create a procedure to ensure [client #1] is bringing her glasses to and from school. Please reach out to me if you have any questions or concerns;" -email dated 12/3/21 at 2:24pm: "[The Home Mgr], [client #1] was suppose to bring the glasses home this afternoon, however, she decided to hind them instead. I reminded her during checkout that she needed to bring them with her. She and the TA(Teacher's Assistant) went into the classroom to search for the glasses in her desk</p>	V 112		

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V 112	<p>Continued From page 14</p> <p>and they were not found. We will look for them on Monday morning and I will personally put the glasses in her book bag. Sorry for the inconvenience."</p> <p>Interview on 11/24/21 and 12/2/21 with the QP revealed:</p> <ul style="list-style-type: none"> -the treatment plan developed between her, the Home Manager(Home Mgr) and the Child and Family Team; -client #1's glasses were broken due to her movements and actions; -client #1 was on the school bus for over an hour one way; -client #1 broke a pair of glasses during the transition to and from school; -client #1 sat on her glasses; -client #1 misplaced her glasses a couple a times; -used her glasses for reading only; -did not have a pair of glasses at the facility; -"working on that(getting a pair of glasses at the facility);" -the Home Mgr said client #1 had a pair of glasses at school; -she asked client #1 where were her glasses and client #1 said at school; -client #1 will wear her glasses; -she did have glasses last year; -reminded client #1 to turn in her glasses when she came home from school and put glasses in the drawer; -teach client #1 to keep her glasses in the case. <p>This deficiency constitutes a re-cited deficiency and is crossed referenced into 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents V293 for a Type A1 rule violation and must be corrected within 23 days.</p>	V 112		

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V 118	Continued From page 15	V 118		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <p>(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.</p>	V 118		

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V 118	<p>Continued From page 16</p> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure prescription and non-prescription drugs were administered on the written order of a person authorized by law to prescribe drugs and that MARs were kept current affecting 3 of 3 audited clients (clients #1, #2 and #3). The findings are:</p> <p>Finding #1: Review on 11/23/21 and 11/24/21 of client #1's record revealed: -admission date of 5/25/18; -age 10 years; -diagnoses of PTSD(Post Traumatic Stress Disorder) and Attention Deficit Hyperactivity Disorder(ADHD); -physicians' orders dated 10/25/21 for the following medications: prazosin HLC 5mg(PTSD) one tablet at bed, atomoxetine 40mg(ADHD) one tablet in the am, buspirone 5mg(anxiety) one tablet twice daily and risperidone 2mg (anxiety) one tablet twice daily; -physician's order dated 9/25/21 for Concerta 54mg(ADHD) one tablet in the am; -physician's order dated 7/28/21 for fluticasone propionate 50mcg(allergies)one spray in each nostril at bed.</p> <p>Observation on 11/23/21 at 2:42pm of client #1's medications revealed: -prazosin HLC 5mg one tablet at bed dispensed 10/4/21; -atomoxetine 40mg one tablet in the am dispensed 10/29/21; -buspirone 5mg one tablet twice daily dispensed 10/4/21; -risperidone 2mg one tablet twice daily dispensed 10/4/21; -Concerta 54mg one tablet in the am dispensed</p>	V 118		

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V 118	<p>Continued From page 17</p> <p>11/1/21; - fluticasone propionate 50mcg one spray in each nostril at bed dispensed 10/22/21.</p> <p>Review on 11/23/21 and 12/2/21 of client #1's MARs from 9/1/21-12/2/21 revealed: -the dosing date of 10/31/21 was left blank with no explanation of the MAR for the following medications: prazosin HLC 5mg one tablet at bed, atomoxetine 40mg one tablet in the am, bupirone 5mg one tablet twice daily(both am/pm blank) and risperidone 2mg one tablet twice daily(both am/pm left blank), Concerta 54mg one tablet in the am and fluticasone propionate 50mcg one spray in each nostril at bed; -the following medications were documented as administered on 9/31/21(no such date): atomoxetine 40mg one tablet in the am, bupirone 5mg one tablet twice daily(for the am dose), risperidone 2mg one tablet twice daily(for the am dose) and Concerta 54mg one tablet in the am; -dosing dates of 11/1/21-11/30/21 for the pm dose of risperidone 2mg one tablet twice daily was left blank with no explanation on the MAR.</p> <p>Interview on 11/23/21 with client #1 revealed: -takes her medications every day; -not missed any medications.</p> <p>Finding #2: Review on 11/23/21, 11/24/21 and 12/2/21 of client #2's record revealed: -admission date of 2/8/20; -age 10 years; -diagnoses of Unspecified Trauma and Stressor Related Disorder, Oppositional Defiant Disorder, ADHD, Enuresis and Encopresis; -physician's order dated 10/25/21 for Sertraline 125mg at bed;</p>	V 118		

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V 118	<p>Continued From page 18</p> <p>-printed form from a pharmacy dated 6/10/21 documented Sertraline(depression) 100mg one tablet daily;</p> <p>-printed form from a pharmacy dated 5/28/21 documented Sertraline 25mg one tablet daily;</p> <p>Observation on 11/23/21 at 2:12pm of client #2's medications revealed: -sertraline 100mg one tablet at bed dispensed 10/21/21; -sertraline 25mg one tablet a bed dispensed 10/1/21.</p> <p>Review on 11/23/21 and 12/2/21 of client #2's MAR from 9/1/21-12/2/21 revealed: -sertraline 100mg one tablet at bed documented as administered 10/1/21-12/1/21; -sertraline 25mg one tablet at bed documented as administered 10/1/21-12/1/21.</p> <p>Finding #3: Review on 11/23/21, 11/24/21 and 12/2/21 of client #3's record revealed: -admission date of 9/13/21; -age 11 years; -diagnoses of PTSD, Nocturnal Enuresis and Child Sexual Abuse-Victim; -physician's order dated 9/12/21 for Melatonin(sleep) 3mg one tablet at bed; -no standing orders for OTC(over the counter) medications signed by a physician present in the record.</p> <p>Review on 12/2/21 of the facility's level I incident reports from 9/1/21-12/2/21 revealed on 10/27/21 staff observed client #1 picking at a scrape on her knee. Prompted her to stop and wash her hands. Staff applied antibiotic cream.</p> <p>Observation on 11/23/21 at 2:29pm of client #3's</p>	V 118		

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V 118	<p>Continued From page 19</p> <p>medications revealed Melatonin 5mg one tablet at bed OTC expires 12/2023.</p> <p>Observation on 12/2/21 at 2:07pm of the facility's OTC medications located in a first aid kit revealed triple antibiotic ointment with expiration of 5/2024.</p> <p>Review on 11/23/21 and 12/2/21 of client #3's MARs from 9/1/21-12/2/21 revealed: -Melatonin 3mg one tablet at bed documented as administered 9/14/21-12/1/21; -no documentation on October 2021 MAR of OTC triple antibiotic applied to client #3's knee.</p> <p>Interview on 11/29/21 and 12/6/21 with the Home Manager revealed: -client #1 takes risperidone twice daily; -not sure why the risperidone was not signed off; -"bad oversight;" -she was "usually on top of medications;" -"I made a mistake;" -reported she signed off on the extra date (9/31); -client #3 never had 5mg of Melatonin; -client #3 only took 3mg of Melatonin; -have her 3mg of Melatonin; -she took the last one last night; -picked up the refill that night; -Melatonin 5mg was from a prior client; -keep the Melatonin 5mg in case have another client come who was on it since it was an over the counter medication.</p> <p>This deficiency constitutes a re-cited deficiency and is crossed referenced into 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents V293 for a Type A1 rule violation and must be corrected within 23 days.</p>	V 118		

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V 293	Continued From page 20	V 293		
V 293	<p>27G .1701 Residential Tx. Child/Adol - Scope</p> <p>10A NCAC 27G .1701 SCOPE</p> <p>(a) A residential treatment staff secure facility for children or adolescents is one that is a free-standing residential facility that provides intensive, active therapeutic treatment and interventions within a system of care approach. It shall not be the primary residence of an individual who is not a client of the facility.</p> <p>(b) Staff secure means staff are required to be awake during client sleep hours and supervision shall be continuous as set forth in Rule .1704 of this Section.</p> <p>(c) The population served shall be children or adolescents who have a primary diagnosis of mental illness, emotional disturbance or substance-related disorders; and may also have co-occurring disorders including developmental disabilities. These children or adolescents shall not meet criteria for inpatient psychiatric services.</p> <p>(d) The children or adolescents served shall require the following:</p> <p>(1) removal from home to a community-based residential setting in order to facilitate treatment; and</p> <p>(2) treatment in a staff secure setting.</p> <p>(e) Services shall be designed to:</p> <p>(1) include individualized supervision and structure of daily living;</p> <p>(2) minimize the occurrence of behaviors related to functional deficits;</p> <p>(3) ensure safety and deescalate out of control behaviors including frequent crisis management with or without physical restraint;</p> <p>(4) assist the child or adolescent in the acquisition of adaptive functioning in self-control, communication, social and recreational skills; and</p> <p>(5) support the child or adolescent in</p>	V 293		

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V 293	<p>Continued From page 21</p> <p>gaining the skills needed to step-down to a less intensive treatment setting.</p> <p>(f) The residential treatment staff secure facility shall coordinate with other individuals and agencies within the child or adolescent's system of care.</p> <p>This Rule is not met as evidenced by: Based on records review, interviews and observations, the facility failed to minimize the occurrence of behaviors related to functional deficits and failed to coordinate with other individuals and agencies within the child or adolescent's system of care affecting 3 of 3 audited clients (clients #1, #2 and #3). The findings are:</p> <p>Cross Reference: 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS V109 Based on records review and interviews, 1 of 1 Qualified Professional (QP) failed to demonstrate the knowledge, skills, and abilities required by the population served.</p> <p>Cross Reference: 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS V110 Based on records review and interviews, 1 of 1 Home Manager (Home Mgr) failed to demonstrate the knowledge,</p>	V 293		

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V 293	<p>Continued From page 22</p> <p>skills, and abilities required by the population served.</p> <p>Cross Reference: 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN V112 Based on records review and interviews, the facility failed to develop and implement treatment strategies to meet the needs of the clients affecting 1 of 3 audited clients (client #1).</p> <p>Cross Reference: 10A NCAC 27G .0209 MEDICATION REQUIREMENTS V118 Based on records review, observations and interviews, the facility failed to ensure prescription and non-prescription drugs were administered on the written order of a person authorized by law to prescribe drugs and that MARs were kept current affecting 3 of 3 audited clients (clients #1, #2, #3).</p> <p>Cross Reference: 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS V296 Based on records review, observations and interviews, the facility failed to ensure minimum staffing requirements of at least two direct care staff for up to four adolescents.</p> <p>Cross Reference: 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS V736 Based on observations and interviews, the facility was not maintained in a safe, clean, and orderly manner.</p> <p>Review on 12/6/21 of a Plan of Protection dated 12/6/21 completed by the Licensee/CEO(Chief Executive Officer) revealed the following documented: "Plan of Protection: 12-6-2021 The immediate actions that Community</p>	V 293		

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V 293	<p>Continued From page 23</p> <p>Treatment Alternatives(CTA) will take to ensure the safety of the consumers in our care will be as follows:</p> <ol style="list-style-type: none"> 1. V109- Community Treatment Alternatives will ensure that the LP will work with the QP to recognize any behaviors and all client needs as she develops goals and strategies. The LP will be contacted on 12-6-2021 to meet with the QP on 12-6-2021. 2. V110- Community Treatment Alternatives will ensure that the LP will work with the House Manager to address all consumers' needs to include all day to day operations and coordination of care on 12-6-2021. 3. V112 -Community Treatment Alternatives will ensure all Treatment Plans address all clients needs/issues not to exclude anything as well as putting goals and strategies in place to address all of the consumers need per CEO, will conduct a self audit on all client records by Wednesday December 8th 2021. 4. V118- Community Treatment Alternatives will ensure that all medication records are revise and color coded to prevent medication errors by 12-6-201. The AP will conduct Medication audit to ensure Medication Compliance. 5. V296- Community Treatment Alternatives will ensure that proper staffing is provided and a meeting will be held on 12-6-2021 to discuss CTA's proper protocol for calling off, No Call No show or late. 6. V736- Community Treatment Alternatives has repaired the broken window and cleaned all gutters on 12-2-2021. 7. V293- Community Treatment Alternatives has contacted [local school] on 12-3-21 to schedule a meeting to ensure coordination of care. The 	V 293		

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V 293	<p>Continued From page 24</p> <p>meeting will be held via Zoom on 12-13-2021. On 12-2-2021 CTA purchased 2 additional eye glasses for consumer. CTA will develop a sign in sheet to ensure consumer has her glasses on 12-7-21 which will include weekly meetings."</p> <p>Client #1, #2 and #3 had diagnoses which included PTSD, ODD, ADHD and Trauma History and had a history of behaviors which included physical aggression, property destruction, poor boundaries, sexualized behaviors, defiance, self-harm(including cutting), suicidal ideation and anxiety. There was only one staff working on third shift. There was a broken window in the facility with jagged edges. Clients #1, #2 and #3's MARs had blank dosing dates, discrepancies with the physician orders, medication bottles and medications listed on the MARS and no physician orders for administered over the counter medications. Client #1 was prescribed glasses for reading and long distance sight. She exhibited repeated behaviors of breaking, losing and hiding her glasses and was without her glasses for extended periods of time at the school and at the facility. The Qualified Professional(QP) was aware of client #1's ongoing problems with her glasses but did not develop and implement strategies to address client #1's behaviors regarding her glasses. The Home Manager did not know the location of client #1's glasses since August 2021, did not communicate with the school to determine the location of the glasses and did not follow-up to get client #1 new glasses. The lack of staffing, the lack of documentation on the MARs, the poor maintenance of the facility, the absence of strategies in the treatment plan to address client #1's issues with her glasses, the lack of competency of the QP and the Home Manager and the lack of coordination of care results in a Type A1 rule violation for serious</p>	V 293		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-739	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 12/08/2021
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NAME OF PROVIDER OR SUPPLIER COMMUNITY TREATMENT ALTERNATIVES II	STREET ADDRESS, CITY, STATE, ZIP CODE 4901 ROSENA DRIVE CHARLOTTE, NC 28227
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V 293	Continued From page 25 neglect and must be corrected within 23 days. An administrative penalty of \$2,000.00 is imposed. If the violation is not corrected within 23 days, an additional penalty of \$500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.	V 293		
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 for five, six, seven or eight children or adolescents; and (3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents. (c) The minimum number of direct care staff during child or adolescent sleep hours is as follows: (1) two direct care staff shall be present and one shall be awake for one through four children or adolescents; (2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and (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	V 296		

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V 296	<p>Continued From page 26</p> <p>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 records review, observations and interviews, the facility failed to ensure minimum staffing requirements of at least two direct care staff for up to four adolescents. The findings are:</p> <p>Review on 11/23/21 and 11/24/21 of client #1's record revealed: -admission date of 5/25/18; -age 10 years; -diagnoses of PTSD(Post Traumatic Stress Disorder) and Attention Deficit Hyperactivity Disorder(ADHD); -client #1 had a history of the following behaviors/issues: physical aggression, increased PTSD symptoms, nightmares, sleep issues, sexualized behaviors, struggles with maintaining appropriate boundaries with peers and adults, destruction of property, impulsivity, lying and running away.</p>	V 296		

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V 296	<p>Continued From page 27</p> <p>Review on 11/23/21, 11/24/21 and 12/2/21 of client #2's record revealed: -admission date of 2/8/20; -age 10 years; -diagnoses of Unspecified Trauma and Stressor Related Disorder, Oppositional Defiant Disorder, ADHD, Enuresis and Encopresis; -client #2 had a history of the following behaviors/issues: struggled with emotional regulation, aggressive behaviors, failure to comply with authority, lying, stealing, tantrums, defiant, anger issues, property destruction, cutting/self-harm and failure to accept authority.</p> <p>Review on 11/23/21, 11/24/21 and 12/2/21 of client #3's record revealed: -admission date of 9/13/21; -age 11 years; -diagnoses of PTSD, Nocturnal Enuresis and Child Sexual Abuse-Victim; -client #3 had a history of the following behaviors/issues: inappropriate sexualized behaviors, lying, gets scared to point of being panicky, nightmares, sleep issues, flashbacks, hypervigilance, anxiety, some suicidal ideation but no actions, struggled with physical boundaries with other children and sneaky behaviors.</p> <p>Interview on 11/23/21 with client #1 revealed: -woke up at 4am; -have to catch the school bus at 530am; -this morning only one staff(QP/Qualified Professional) was working; -on Sundays sometimes only 1 staff worked; -went to bed last night, only staff #1 was working.</p> <p>Interview on 11/23/21 with client #2 revealed: -woke up this morning at 6am; -the QP was the only staff at the facility; -went to bed last night;</p>	V 296		

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V 296	<p>Continued From page 28</p> <p>-only staff #1 was working.</p> <p>Interview on 11/23/21 with client #3 revealed: -woke up this morning and the QP was working; -nobody else was working.</p> <p>Interview on 11/30/21 with former staff#3 revealed: -was hired on 5/3/21; -last worked there in October 2021; -worked on all shifts; -started on 3rd shift; -went to 1st shift and filled in on 3rd shift; -worked alone on 3rd shift when she started working there; -worked alone by herself on 3rd shift in May and June; -worked some 3rd shifts in October and September; -usually worked 3rd shift alone.</p> <p>Observations on 12/2/21 revealed: -2:18pm: client #3 arrived at the facility; -the QP was the only staff on site; -the QP said to client #3: "oh you got home early;" -client #3 asked the QP, "where is [staff #1]?" -the QP told client #3 she got a text and staff #1 was coming by a hired car ride; -2:32pm: client #3 still on site with the QP; -no other staff on site; -the QP was on the phone with someone; -the QP told the person on the phone staff #1 can't come; -she told staff #1 to call a hired car ride; -the QP told the person on the phone "better come on over, are you going to swing through?" -2:44pm: client #3 and the QP still present in facility, no other staff present; -2:48pm: Licensee/CEO(Chief Executive Officer) arrived at the facility.</p>	V 296		

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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

COMMUNITY TREATMENT ALTERNATIVES II **4901 ROSENA DRIVE**
CHARLOTTE, NC 28227

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V 296	Continued From page 29 This deficiency is crossed referenced into 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents V293 for a Type A1 rule violation and must be corrected within 23 days.	V 296		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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. This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a safe, clean, and orderly manner. The findings are: Observations on 11/23/21 at 12:50pm of the outside of the facility revealed: -broken outer upper pane of doubled paned window to left on the front of the facility where the driveway is located; -large hole in the outer upper pane; -jagged edges inside the hole; -window pane was made of Plexiglass; -front yard covered with leaves; -gutters filled with leaves; -weeds growing out of the gutters near the front door. Continued observations on 11/23/21 at 4:05pm of	V 736		

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V 736	<p>Continued From page 30</p> <p>client #2's bedroom located to left of hall bathroom revealed: -8 unpainted patched areas on the walls; -hole in the wall to the left of the closet.</p> <p>Interview on 11/23/21 with client #2 revealed: -the hole in the wall was an accident where she slammed the closet door; -when she is upset, she picks at stuff and tears stuff up.</p> <p>Continued observation on 11/23/21 at 4:30pm of client #3's bedroom located to the right of the hall bathroom revealed: -unpainted patched area in the wall near the floor by the door; -missing handles on the dresser; -2 detached electric socket covers, loose from the wall; -window on the right not properly flushed and did not close properly with a small crack at bottom.</p> <p>Interview on 11/23/21 with client #3 revealed: -her window was open a little at the bottom; -her window did not close properly.</p> <p>Additional observations on 11/23/21 at 3:00pm of the facility revealed: -broken rod in client #1's bedroom closet; -small crack in the window in the master bedroom; -unpainted patched areas on the wall in the master bathroom; -back yard covered with leaves.</p> <p>Further observation on 12/2/21 at 1:04pm of the facility revealed: -window that was broken had been repaired; -gutters were cleaned out; -yard still covered with leaves.</p>	V 736		

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V 736	<p>Continued From page 31</p> <p>This deficiency has been cited 3 prior times on 7/30/18, 9/30/18 and 5/24/19.</p> <p>This deficiency is crossed referenced into 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents V293 for a Type A1 rule violation and must be corrected within 23 days.</p>	V 736		