

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL079-142 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 01/04/2022 |
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| NAME OF PROVIDER OR SUPPLIER AGAPE HOME LIVING CARE PHASE II, LLC | STREET ADDRESS, CITY, STATE, ZIP CODE 315 MAPLE STREET EDEN, NC 27288 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on 1/4/22. The complaint (intake #NC00183190) was substantiated. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>The survey sample consisted of audits of 3 of 3 current clients.</p> | V 000 | | |
| V 108 | <p>27G .0202 (F-I) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <ol style="list-style-type: none"> (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.</p> | V 108 | | |

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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| V 108 | <p>Continued From page 1</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure 1 of 3 audited staff (the House Manager) had completed training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan. The findings are:</p> <p>Review on 12/22/21 of the House Manager's record revealed:</p> <ul style="list-style-type: none"> - A hire date of 6/19/21 - No evidence the House Manager had completed training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan <p>Interview on 1/4/22 with the Director revealed:</p> <ul style="list-style-type: none"> - The House Manager had been employed to work at the facility in June of 2021 - She could provide no documentation the House Manager had completed training to meet the mh/dd/sa needs of the clients being served at the facility. | V 108 | | |
| V 109 | <p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> | V 109 | | |

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| V 109 | <p>Continued From page 2</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 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 record review and interview, 1 of 2</p> | V 109 | | |

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| V 109 | <p>Continued From page 3</p> <p>qualified professionals (the Director) failed to demonstrate the knowledge, skills and abilities required by the population served. The findings are:</p> <p>Review on 12/21/21 of the North Carolina Incident Response Improvement System (IRIS) revealed: - An incident report completed by the Director and last submitted to IRIS on 11/14/21 revealed: "Director was in the process of making lunch and began to heat up a pan of grease on the stove. During the heating process, the phone rung and Director step out of the kitchen into the office to get the phone. While on the phone for about 2-3 minutes, Director turned around and noticed smokiness in the air. Director immediately evacuated the consumers from the home and turn the stove off and called 911. Director went back into the home to check the stove, and the pan was on fire. Director grabbed the fire extinguisher and sprayed it as directed. After putting out the fire, Director went back outside with consumers and a police office was first on the scene. The police office went inside and sprayed the fire extinguisher again. The fire department arrived and started their process. They talked to the police officer who stated the fire was out and put up fans and opened the windows. Fire Marshall contacted DSS. Director contacted guardians for the consumers and notified them of the incident and to ask permission to move them to a temporary location until smoke clear out and repairs were made. Consumers declined medical attention and stated that they were not directly involved in the fire outside of being in the home when it was starting ..."</p> <p>Review on 12/21/21 of an "Emergency Relocation Information" form completed by the Director and</p> | V 109 | | |

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| V 109 | <p>Continued From page 4</p> <p>dated 11/12/21 revealed:</p> <ul style="list-style-type: none"> - A request to relocate to another location due to a "house fire." - As a result of the fire, the staff and the clients no longer had access to the kitchen and "several part of the power need to be restored due to damage from the fire..." - There was structural damage to the facility; however, the Director was "...waiting for the insurance company to come out quote the specific amount of damage that occurred..." - The Director did not have an expected date of return to the facility as she was "...awaiting the insurance quotes..." <p>Interview on 12/21/21 with clients (#1, #2 and #3) revealed:</p> <ul style="list-style-type: none"> - On the day of the fire, the Director evacuated all of them from the home quickly - The waited outside and then sat in the facility's vehicle while emergency personnel (police/fire) were onsite - A member of the fire department "checked" them asked if any of them needed medical attention - None of the clients requested medical attention as they reported it was unnecessary as none of them had been harmed. <p>Interview on 12/21/21 with the Director revealed:</p> <ul style="list-style-type: none"> - She had been in the facility's kitchen preparing lunch for the clients (#1, #2, #3) which included the heating cooking oil on the stove - The telephone rang and she stepped out of the kitchen to answer it - She was on the telephone for less than five minutes when she observed smoke in the air - She immediately hung up the phone and went back into the kitchen, turned the stove off and called 911 | V 109 | | |

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| V 109 | <p>Continued From page 5</p> <ul style="list-style-type: none"> - She instructed the clients (#1, #2 and #3) to evacuate the facility immediately and accompanied them outside to ensure they were away from the facility and not in harm's way - She returned inside the facility and observed the pan on the stove to be on fire - She put the fire out by using the facility's fire extinguisher - She returned outside to monitor the clients (#1, #2 and #3) and await the arrival of the fire department - A police officer arrived prior to fire department personnel getting to the facility and the police officer went inside the facility and used his fire extinguisher to ensure the fire remained out - The fire department arrived and assessed the situation and determined the fire had been fully extinguished - Fans were put out and the windows of the facility were opened to assist with pushing out the smoke from the facility and to allow fresh air in - All clients (#1, #2 and #3) were asked by the emergency services personnel (police/fire) onsite if they needed medical attention and all the clients declined - She had requested emergency relocation of the clients as a result of the fire damage to areas of the kitchen and the stove - Kitchen appliances were scheduled to be delivered to the facility on 12/26/21 and she hoped the staff and the clients would be able to return to the facility soon afterwards. <p>Interview on 12/22/21 with the Qualified Professional revealed:</p> <ul style="list-style-type: none"> - She had spoken with the Director regarding the fire on 11/10/21 and what was listed in the incident report was the Director reported to her - The damages in the home were mainly to the stove and the cabinet above the stove | V 109 | | |

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| V 109 | Continued From page 6 Best practice would have been for the Director to have turned off the stove and moved the pot or pan from the burner while she was on the telephone in another area of the facility - The Director had maintained her composure and ensured all the clients (#1, #2 and #3) were evacuated from the home immediately and no one was injured, including the Director - The clients were familiar with evacuating the home as they had participated in fire drills and knew exactly what to do - The hope was that staff and clients would be able to return to their facility soon. | V 109 | | |
| V 131 | G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure the Health Care Personnel Registry (HCPR) was accessed on behalf of 2 of 3 audited staff (the House Manager and the Qualified Professional) prior to the date of hire. The findings are: | V 131 | | |

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| V 131 | <p>Continued From page 7</p> <p>Review on 12/22/21 of the House Manager's (HM's) record revealed:</p> <ul style="list-style-type: none"> - A hire date of 6/19/21 - The HCPR had been accessed on 10/31/21 <p>Review on 12/22/21 of the Qualified Professional's (QP's) record revealed:</p> <ul style="list-style-type: none"> - No documentation of a date of hire - The HCPR had been accessed on 12/22/21 <p>Interview on 1/4/22 with the Director revealed:</p> <ul style="list-style-type: none"> - The date of hire for the QP was 12/31/20 - She had accessed the HCPR on behalf of the HM and the QP prior to each of their dates of hire; however, she had been unable to locate those documents - Once she realized she could not locate the documents, she accessed the HCPR a second time for the HM and the QP. | V 131 | | |
| V 133 | <p>G.S. 122C-80 Criminal History Record Check</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</p> <p>(a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter.</p> <p>(b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment</p> | V 133 | | |

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| V 133 | <p>Continued From page 8</p> <p>is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State</p> | V 133 | | |
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| V 133 | <p>Continued From page 9</p> <p>criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p> <ol style="list-style-type: none"> (1) The level and seriousness of the crime. (2) The date of the crime. (3) The age of the person at the time of the conviction. (4) The circumstances surrounding the commission of the crime, if known. (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled. (6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed. (7) The subsequent commission by the person of a relevant offense. <p>The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the</p> | V 133 | | |

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| V 133 | <p>Continued From page 10</p> <p>provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:</p> <p>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.</p> <p>(2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.</p> <p>(e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or</p> | V 133 | | |

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| V 133 | <p>Continued From page 11</p> <p>Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p> <p>(1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.</p> <p>(2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins</p> | V 133 | | |

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL079-142 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 01/04/2022 |
|--|---|---|---|

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|---|---|
| NAME OF PROVIDER OR SUPPLIER AGAPE HOME LIVING CARE PHASE II, LLC | STREET ADDRESS, CITY, STATE, ZIP CODE 315 MAPLE STREET EDEN, NC 27288 |
|---|---|

| (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 133 | <p>Continued From page 12</p> <p>conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure a request for a criminal history record check was completed within five business days of a conditional offer of employment for 1 of 3 audited staff (the House Manager (HM)). The findings are:</p> <p>Review on 12/22/21 of the HM's revealed:</p> <ul style="list-style-type: none"> - A date of hire of 6/19/21 - A criminal history record check dated 12/22/21 <p>Interview on 1/4/22 with the Director revealed:</p> <ul style="list-style-type: none"> - She had requested a criminal history record check prior to the HM's date of hire, however, she had been unable to locate the document - Once she realized she could not locate the document, she requested a criminal history record check for a second time on behalf of the HM. | V 133 | | |