

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL068-117</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/21/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MAGGIE ALVIS WOMEN'S HALFWAY HOUSE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>114 NEW STATESIDE DRIVE CHAPEL HILL, NC 27516</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on January 21, 2022. Deficiencies cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 5600E Supervised Living for Substance Abuse Adults</p> <p>The survey sample consisted of audits of 3 current clients, 0 former clients, 0 deceased clients.</p>	V 000		
V 108	<p><b>27G .0202 (F-I) Personnel Requirements</b></p> <p><b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b></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"> <li>(1) general organizational orientation;</li> <li>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</li> <li>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</li> <li>(4) training in infectious diseases and bloodborne pathogens.</li> </ol> <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		

Division of Health Service Regulation

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

TITLE

(X6) DATE

Division of Health Service Regulation

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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 the Program Manager and two of two Health Care Counselor's (#1 and #2) had current training in First Aid and Cardiopulmonary Resuscitation (CPR). The findings are:</p> <p>Review on 1/21/22 of the Program Manager personnel record revealed: -Hired date: 12/1/21. -There was no evidence of a current First Aid and CPR training certificate in the record.</p> <p>Review on 1/21/22 of the HCC #1's personnel record revealed: -Hired date: 8/28/20. -First Aid and CPR expired 1/7/21. -There was no evidence of a current First Aid and CPR training certificate in the record.</p> <p>Review on 1/21/22 of the HCC#2's personnel record revealed: -Hired date: 6/11/21. -There was no evidence of a First Aid and CPR training certificate in the record.</p> <p>Interview on 1/21/22 with the Clinical Director revealed: -Due to staff changes in the Human Resources</p>	V 108	<p><b>Measures to Correct:</b> Staff #1 has completed the first aide/CPR training on 1/21/22. (see attached) Staff # 2 is scheduled to attend first aide / CPR training on 2/26/22</p> <p><b>Measure to Prevent:</b> HR staff has been re-educated on the policy to schedule new hires for training. HR staff will ensure that each new hire is scheduled to attend the monthly first aide / cpr training. Evidence of attendance shall be maintained in the HR folder.</p> <p><b>Who will monitor and frequency:</b> Program Manager and HR will ensure that all new hires have a completed first aide/ CPR training at the monthly training session. Most trainings will be monitored by Relias, a system recently implemented to ensure trainings are completed on time. We are adding CPR to the online training lineup</p>	2/26/2022

Division of Health Service Regulation

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V 108	Continued From page 2  Department some files were misplaced. -Confirmed staff were scheduled for First Aid/CPR training on 1/21/22. -Trainings were scheduled monthly.	V 108		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to access the Health Care Personnel Registry (HCPR) prior to employment for two of three audited staff (Health Care Counselor #1 and #2). The findings are:</p> <p>Review on 1/21/22 of the HCC #1's personnel record revealed: -Hire date: 8/28/20. -There was no evidence the HCPR check was accessed prior to employment.</p> <p>Review on 1/21/22 of the HCC #2's personnel record revealed: -Hire date: 6/11/21. -There was no evidence the HCPR check was</p>	V 131	<p><b>Measures to Correct:</b> HR staff has accessed the health care personnel registry for the missing staff hired 8/20/20 (<b>see attached</b>). Due to staffing changes in the department, this was not completed at the time of hire.</p> <p><b>Measure to Prevent:</b> HR staff will ensure that each new hire has been checked in the state health care registry and evidence of that check will be documented in the HR folder</p> <p><b>Who will monitor and frequency:</b> Program Manager and HR will ensure that all new hires have a completed health care personnel registry verification at the time of hire and filed in the HR folder</p>	1/28/2022

Division of Health Service Regulation

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V 131	Continued From page 3  accessed prior to employment. -HCPR check was accessed 1/20/22.  Interview on 1/21/22 with the Clinical Director revealed: -Due to staff changes in the Human Resources Department some files were misplaced. -The Human Resource Department was responsible for accessing HCPR prior to staff 's employment.	V 131		
V 133	G.S. 122C-80 Criminal History Record Check  G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT. (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. (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 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	V 133		

Division of Health Service Regulation

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V 133	Continued From page 4  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 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,	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 5</p> <p>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"> <li>(1) The level and seriousness of the crime.</li> <li>(2) The date of the crime.</li> <li>(3) The age of the person at the time of the conviction.</li> <li>(4) The circumstances surrounding the commission of the crime, if known.</li> <li>(5) The nexus between the criminal conduct of the person and the job duties of the position to be filled.</li> <li>(6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed.</li> <li>(7) The subsequent commission by the person of a relevant offense.</li> </ol> <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 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>	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 6</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 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;</p>	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 7</p> <p>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 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:</p>	V 133		



Division of Health Service Regulation

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V 133	<p>Continued From page 8</p> <p>Based on record review and interview, the facility failed to ensure the state criminal record check was ordered within five business days of making the conditional offer of employment for one of three audited staff (Health Care Counselor #1). The findings are:</p> <p>Review on 1/21/22 of HCC#1's personnel record revealed: -Hire date: 8/28/20. -There was no evidence the criminal record check was ordered prior to employment. -Criminal record check was ordered 10/15/20.</p> <p>Interview on 1/21/22 with the Clinical Director revealed: -Due to staff changes in the Human Resources Department some files were misplaced. -The Human Resource Department was responsible for ordering the criminal record check for employees.</p>	V 133	<p><b>Measures to Correct:</b> Due to staff changes in the HR Department, the criminal background check failed to be completed within the required time. HR staff have been re-educated on the requirement to order the state criminal record check within five business days of making the conditional offer of employment</p> <p><b>Measure to Prevent:</b> HR staff has been re-educated on the policy to order the state criminal background check within five business days of the conditional employment offer. HR staff will verify request of background check prior to employment.</p> <p><b>Who will monitor and frequency:</b> Program Manager and HR will ensure that all new hires have requested criminal background check within five business days of the conditional offer of employment. Evidence of the request shall be maintained in the HR folder.</p>	1/28/2022
V 536	<p>27E .0107 Client Rights - Training on Alt to Rest. Int.</p> <p>10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS</p> <p>(a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions.</p> <p>(b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or</p>	V 536		

Division of Health Service Regulation

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V 536	<p>Continued From page 9</p> <p>property damage is prevented.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> <li>(1) knowledge and understanding of the people being served;</li> <li>(2) recognizing and interpreting human behavior;</li> <li>(3) recognizing the effect of internal and external stressors that may affect people with disabilities;</li> <li>(4) strategies for building positive relationships with persons with disabilities;</li> <li>(5) recognizing cultural, environmental and organizational factors that may affect people with disabilities;</li> <li>(6) recognizing the importance of and assisting in the person's involvement in making decisions about their life;</li> <li>(7) skills in assessing individual risk for escalating behavior;</li> <li>(8) communication strategies for defusing and de-escalating potentially dangerous behavior;</li> </ol>	V 536		

Division of Health Service Regulation

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V 536	<p>Continued From page 10</p> <p>and</p> <p>(9) positive behavioral supports(providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training andthe outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name;</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at anytime.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p>	V 536		

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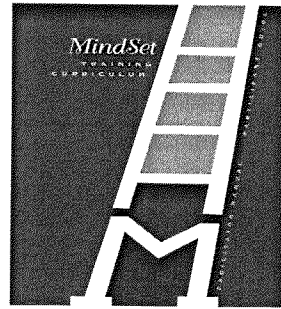
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 536	<p>Continued From page 11</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p>	V 536		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL068-117</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/21/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MAGGIE ALVIS WOMEN'S HALFWAY HOUSE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>114 NEW STATESIDE DRIVE CHAPEL HILL, NC 27516</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 536	<p>Continued From page 12</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure one of three audited staff (Health Care Counselor #1) had current training on the use of alternatives to restrictive interventions. The findings are:</p> <p>Review on 1/21/22 of the HCC #1's personnel record revealed: - Hired date of 8/28/20. - Mindset Certification expired 8/29/21. - There was no evidence of a current Mindset training.</p> <p>Interview on 1/21/22 with the Clinical Director revealed: - Due to staff changes in the Human Resources Department some files were misplaced. - Trainings were scheduled monthly. - HCC #1 should be scheduled for mindset training this month.</p>	V 536	<p><b>Measures to Correct:</b> Staff LS is scheduled for the next training on the use of alternatives to restrictive interventions (mindSet Training) on February 18, 2022</p> <p><b>Measure to Prevent:</b> The Program Director will ensure that all staff have the required restrictive intervention training at hire and annually thereafter. The Mindset trainer will forward certificate for completion to the Program Manager and HR for inclusion in the staff personnel folder. Program Director and HR staff have been re-educated on the importance of ensuring staff have all required training.</p> <p><b>Who will monitor and frequency:</b> Program Managers and HR will ensure that required trainings are completed and evidence of compliance is documented in the HR file at the time of hire and annually thereafter. Most of the trainings will be monitored by Relias, a system recently implemented, to ensure trainings are completed on time.</p>	2/18/2022



# *MindSet Certification*

AnnE O'Neil

Let it be known, the above named has successfully completed the course requirements for certification in Mind Set Foundations; De-escalation, Crisis Communication, and Avoidance. This certification is good for one calendar year.

**\*\*Special Note:** This training was provided online via Teams. It did not provide training in Avoidance Techniques. **\*\***

Presented on 10 December, 2021

A handwritten signature in black ink, appearing to read 'Carol McClelland'. The signature is written over a horizontal line.

Carol McClelland, MindSet Trainer

# CPR Consultants, Inc.

7404 Chapel Hill Road  
Suite G  
Raleigh, NC 27607



919-850-9295 Fax # 919-235-0842

## Invoice

<b>Bill To</b>
Freedom House Recovery Center 104 New Stateside Dr., Chapel Hill, NC 27516

Terms	P.O. No.	Date	Invoice #
Due on receipt		1/27/2022	19866

Item	Description	Qty	U/M	Rate	Amount
Heartsaver® CP...	Heartsaver® Adult Child CPR AED First Aid Course 226012150626 1/26/2022 AE 226012150627 1/26/2022 K H 226012150628 1/26/2022 A O'N 3 can attend an in-house class within 90 days, call the office to register them	6		89.00	534.00
	eCards can be accessed/verified after claimed by the participant 1- Go to <a href="http://www.heart.org/cpr/mycards">www.heart.org/cpr/mycards</a> 2- Click on the employer tab 3- Enter the eCodes from above				
	Thank you ~Ruth				

<b>Subtotal</b>	\$534.00
<b>Sales Tax (7.25%)</b>	\$0.00
<b>Total</b>	\$534.00
<b>Balance Due</b>	\$534.00

<b>Payments/Credits</b>	\$0.00	<b>Customer Total Balance</b>	\$534.00
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[www.cprconsultants.com](http://www.cprconsultants.com)



## NORTH CAROLINA

Nurse Aide I Registry

Medication Aide Registry

Health Care Personnel Registry

Verification of Listing/Search Results:

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**The requested social security number was not found on the Nurse Aide I Registry, the North Carolina Medication Aide Registry or the Health Care Personnel Registry. This verification does not apply to Medication Aides working in Adult Care Homes. Employers of Medication Aides working in Adult Care Homes must verify listing by calling at <https://mats.ncdhhs.gov/>.**

Social Security Number: X [REDACTED]

The listing verification is completed. Please record confirmation number [REDACTED] in your business files to validate this inquiry which was made on 01/28/2022.

Note: If there are pending investigations or substantiated findings noted above, detailed information, including evidence summary, hearing, or rebuttal statement, may only be obtained by calling 919-855-3969 Monday through Friday from 8:00 a.m. to 3:00 p.m. and speaking with a registry representative.

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(To print this verification, please click on the Print button in your browser.)

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[Verify More Listings](#)

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