

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411215	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/14/2022
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NAME OF PROVIDER OR SUPPLIER BRANNOCK HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1612 BRANNOCK DRIVE GREENSBORO, NC 27406
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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 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 2/14/22. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600B Supervised Living for Minors with Developmental Disability</p> <p>The survey sample consisted of audits of 1 current client.</p>	V 000		
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 ensure the Health Care Personnel Registry (HCPR) was accessed prior to the date of hire affecting 2 of 3 audited staff (staff #1 and the Qualified Professional (QP) #2). The findings are:</p> <p>Review on 2/10/22 of staff #1's record revealed: - Date of hire: 8/18/20 - The HCPR was accessed on 9/7/21 - No evidence the HCPR had been accessed on</p>	V 131		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 131	Continued From page 1 behalf of staff #1 at time of hire. Review on 2/10/22 of the QP #2's record revealed: - Date of hire: 5/12/16 - The HCPR was accessed on 10/13/21 - No evidence the HCPR had been accessed on behalf of the QP #2 at time of hire. Interview on 2/10/22 with the Licensee revealed: - The HCPR had been accessed for staff #1 and QP #2 at time of hire but a former clinician had purged the original HCPR records.	V 131		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a	V 289		

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V 289	<p>Continued From page 2</p> <p>developmental disability but may also have other diagnoses;</p> <p>(3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses;</p> <p>(4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses;</p> <p>(5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or</p> <p>(6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e) (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL).</p>	V 289		

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V 289	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to operate under the scope for which it is licensed. This affected one of one client (#1). The findings are:</p> <p>Review on 2/9/22 of facility's license revealed: - The program code and description: 5600B Supervised Living for Minors with Developmental Disabilities.</p> <p>Review on 2/9/22 of client #1's record revealed: - Admission date: 7/1/21 - Age: 16 - Diagnoses: Mild Intellectual Disability; Post-Traumatic Stress Disorder; Reactive Attachment Disorder; Attention Deficit Hyperactivity Disorder and Oppositional Defiant Disorder</p> <p>Interview on 2/9/22 with the Qualified Professional #1 revealed: - The home was a private residence and staff #1 lived in the home.</p> <p>Interview on 2/14/22 with the Licensee revealed: - He filled out the license application for the group home. - On the license application the program code should have been 5600F not 5600B. - When he filled out the license application "it was put in the wrong way, and it was an error."</p>	V 289		