

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-857 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED R 02/02/2022 |
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NAME OF PROVIDER OR SUPPLIER
COMMUNITY TREATMENT ALTERNATIVES 1

STREET ADDRESS, CITY, STATE, ZIP CODE
**2005 BREEZEWOOD DRIVE
CHARLOTTE, NC 28262**

| (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 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>A limited follow up survey for the Type A1 was completed on February 2, 2022. The was a limited follow up survey, only 10A NCAC 27G .0202 Personnel Requirements (V108), 10A NCAC 27G .0203 Competencies of Qualified Professionals and Associate Professionals (V109), 10A NCAC 27G .0205 Assessment and Treatment/Habilitation or Service Plan (V112), 10A NCAC 27G .0209 Medication Requirements (V118), 10A NCAC 27G .1704 Minimum Staffing Requirements (V296), General Statute 122C-62 Additional Rights in a 24-Hour Facility (V364), 10A NCAC 27G .0603 Incident Response Requirements for Category A and B Providers (V366), 10A NCAC 27G .0604 Incident Reporting Requirements for Category A and B Providers (V367), 10A NCAC 27F .0102 Living Environments (V539) cross referenced to 10A NCAC 27G .1701 Scope (V293) and 10A NCAC 27G .0304 Facility Design and Equipment (V750) cross referenced to 10A NCAC 27G .0303 Location and Exterior Requirements (V736) were reviewed for compliance. The following were brought back into compliance 10A NCAC 27G .0202 Personnel Requirements (V108), 10A NCAC 27G .0203 Competencies of Qualified Professionals and Associate Professionals (V109), 10A NCAC 27G .0209 Medication Requirements (V118), 10A NCAC 27G .1704 Minimum Staffing Requirements (V296), General Statute 122C-62 Additional Rights in a 24-Hour Facility (V364), 10A NCAC 27G .0603 Incident Response Requirements for Category A and B Providers (V366), 10A NCAC 27G .0604 Incident Reporting Requirements for Category A and B Providers (V367), 10A NCAC 27F .0102 Living Environments (V539) cross referenced to 10A NCAC 27G .1701 Scope (V293) and 10A NCAC 27G .0304 Facility Design and Equipment (V750).</p> | V 000 | | |

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Angela DeLass owner 2/22/22

Division of Health Service Regulation

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| V 000 | Continued From page 1 Deficiencies were cited. The facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents. The sample survey consisted of audits of 4 current clients. | V 000 | | |
| V 112 | 27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (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. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (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. | V 112 | Treatment plans for each consumer will be kept up to date and properly stored after being reviewed by house manager and QP. Utilization person will gather all treatment plans after CFT's to put in consumer chart. Audits will be in place of charts by March 1, 2022. | |

hegua release owner 2/22/22

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Regina Debus owner 2/22/22

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| V 112 | <p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based upon interview and record review, the facility failed to develop and implement treatment strategies to meet the needs of the clients affecting 4 of 4 audited clients (Clients #1, #2, #3, and #4). The findings are:</p> <p>Review on 1/31/22 and 2/1/22 of Client #1's record revealed: -Admitted 6/11/21; -Diagnosed with Attention Deficit Hyperactivity Disorder, Nocturnal Enuresis, and Anxiety Disorder; -12 years old; -History of sexualized behaviors with unsafe online behavior and grooming and running away; -Treatment Plan dated 1/31/22 did not include strategies to address sexualized behaviors, running away, stuffing the toilets with toilet paper, or using soap products during masturbation.</p> <p>Review on 1/31/22 and 2/1/22 of Client #2's record revealed: -Admitted 4/7/17; -Diagnosed with Bipolar Disorder, Post-Traumatic Stress Disorder, Attention Deficit Hyperactivity Disorder; Mild Intellectual Developmental Disability, and History of Sexual Abuse; -17 years old; - Treatment plan dated 12/20/21 did not include strategies to address stuffing the toilets with toilet paper or using soap products during masturbation.</p> | V 112 | | |

Alegna DeLaso, Director 2/22/22

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| V 112 | <p>Continued From page 3</p> <p>Review on 1/31/22 and 2/1/22 of Client #3's record revealed: -Admitted 5/10/18; -Diagnosed with Attention Deficit Hyperactivity Disorder, Disinhibited Social Engagement Disorder, Intermittent Explosive Disorder, and Mild Intellectual Developmental Disability; -15 years old; -History of property destruction of clothing and possessions, sexualized behaviors, and running away; -Treatment Plan dated 12/6/21 did not include strategies to address sexualized behaviors, running away, property destruction of personal clothing and possessions, stuffing the toilets with toilet paper, or using soap products during masturbation.</p> <p>Review on 1/31/22 and 2/1/22 of Client #4's record revealed: -Admitted 12/20/20; -Diagnosed with Unspecified Trauma and Stressor Related Disorder, Oppositional Defiant Disorder, and Reaction to Severe Stress; -13 years old; -History of running away and sexualized behaviors; -Treatment plan dated 1/22 did not include strategies to address sexualized behaviors, running away, stuffing the toilets with toilet paper, or using soap products during masturbation.</p> <p>Interview on 2/2/22 with the Licensee/Qualified Professional revealed: -Clients had histories of stuffing the toilets with toilet paper and using soap products during masturbation; -Treatment plans were revised monthly but will be revised again to address the specific needs of each client.</p> | V 112 | | |

Hegina Wilkerson owner 2/22/22

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| V 112 | Continued From page 4 This deficiency constitutes a re-cited deficiency and must be corrected within 30 days. | V 112 | | |
| V 736 | <p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based upon interview, record review, and observation, the facility was not maintained in a safe, clean, and orderly manner. The findings are:</p> <p>Observation on 1/31/22 at approximately 11:45am of the facility revealed: -Clients #3 and #4's bedroom dressers were missing or had loose drawer pulls; -Client #3's bedroom door was missing a piece of door trim; -Client #4's closet did not have a doorknob.</p> <p>Interview on 2/2/22 with the Licensee/Qualified Professional revealed: -Completed many repairs to the home and these repairs were missed but would be addressed immediately.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p> | V 736 | <p>CTA will replace/fix consumer property destruction in a timely manner. Once property is vandalized by consumer a request by the house manager will be made to upper management within 24hrs to request a replacement or repair. CTA will then try to fix/replace item within 7 days. Maintenance will complete all service request to repair. And conduct a monthly check to stay on top of destruction around facility as soon as March 1, 2022</p> | |

Regina DeLass owner 2/22/22

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Regina Delass, Director 2/22/22