STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	mhl060-972	A. BUILDING: _____ B. WING _____	03/25/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALEXANDER YOUTH NETWORK - DICKSON UNIT	6220 - B THERMAL ROAD CHARLOTTE, NC 28211

(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	INITIAL COMMENTS A complaint survey was completed on 3/25/22. The complaint was unsubstantiated(Intake #187177). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children or Adolescents. The facility is licensed for 6 beds and currently has a census of 6. The survey sample consisted of audits of 1 current client.	V 000		
V 315	27G .1902 Psych. Res. Tx. Facility - Staff 10A NCAC 27G .1902 STAFF (a) Each facility shall be under the direction a physician board-eligible or certified in child psychiatry or a general psychiatrist with experience in the treatment of children and adolescents with mental illness. (b) At all times, at least two direct care staff members shall be present with every six children or adolescents in each residential unit. (c) If the PRTF is hospital based, staff shall be specifically assigned to this facility, with responsibilities separate from those performed on an acute medical unit or other residential units. (d) A psychiatrist shall provide weekly consultation to review medications with each child or adolescent admitted to the facility. (e) The PRTF shall provide 24 hour on-site coverage by a registered nurse.	V 315		

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V 315	Continued From page 1 This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to ensure at least two direct care staff members were present with every six children or adolescents in each residential unit. The findings are: Review on 3/18/22 of the facility's incident reports from 1/1/22-3/18/22 revealed: -an incident report dated 3/12/22 completed by staff #1; -incident reports was regarding client #1; -staff #1 asked client #1 to go to his room to regulate after an argument with a peer; -client #1 refused directions; -client #1 became verbally and physically aggressive; -client #1 threatened to hit staff #1; -client #1 approached staff #1 aggressively; -staff #1 was sitting on the couch in the commons area; -staff #1 stood up as client #1 approached her; -staff #1 put her hand up to block client #1; -staff #1 tripped over client #1's feet and fell to the ground with client #1. Interview on 3/21/22 with client #2 revealed: -saw client #1 restrained; -staff #1 restrained client #1 in front of the other clients; -client #1 was cussing out his peers and saying he was going to hurt somebody; -Former Staff #2(FS#2) was gone; -FS#2 was out getting tea for herself and staff #1; -FS#2 went down to the cafeteria to get the tea; -all the kids were in the cottage. Interview on 3/21/22 with client #1 revealed: -restrained by staff twice; -don't remember the staff who restrained him.	V 315		

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V 315	Continued From page 2 Interview on 3/22/22 with FS#2 revealed: -was working with staff#1 at the cottage; -went out to her car to grab some stuff; -"before I left, I gave expectations to the clients;" -client #1 does not like staff #1 or the Supervisor(Sup); -"will give them h**l;" -client #1 said "will get the b***h fired" referring to staff #1; -client #1 responds better to male staff; -staff #1 told client #1 "no" several times when she and staff #1 worked together; -"he(client #1) gave her(staff #1) h**l;" -client #1 doesn't do well with females; -client #1 has a history of making false allegations against staff. Interview on 3/22/22 with staff #1 revealed: -was working on day of incident with client #1; -client #1 was having words with his peer; -she redirected both to their rooms; -peer went to his room but client #1 refused; -client #1 kept yelling and walking towards his peer's room; -prompted him several times to go to his room; -he began to yell at her and threatened to hit her; -she was sitting on the couch; -he walked towards her; -she stood up and prompted him to his room; -she put her arm out; -he was in front of her; -she grabbed him under his arm to escort him to his room; -"we fell;" -she fell on top of him; -FS#2 came in the cottage; -"I was the only one in there, six kids in there;" -FS#2 was working with her in the cottage; -FS#2 took a short break.	V 315		

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V 315	Continued From page 3 Interview on 3/21/22 with the Sup revealed: -talked to staff #1; -staff#1 stated did not know what client #1 and his peer were arguing about; -staff #1 reported she told client #1 and his peer to go to their rooms; -client #1 did not go; -staff #1 stated kept telling him to go to his room and he was being defiant; -staff #1 reported client #1 stood up and starting walking towards her; -staff #1 stated she stood up, grabbed client #1's arms and tried to restraint him; -staff #1 said she tripped and they both fell; -staff #1 said she was only staff in the cottage; -in the process of her and client #1 falling, the other staff came in the cottage; -staff #1 said FS#2 stepped out for a minute; -staff#1 did not say why FS#2 stepped out; -if staff need to step away for a long period of time, they let her(Sup) know; -have bathrooms in cottages staff can use; -may go to the cafeteria and get a tea; -should not be stepping away without her knowledge; -"knowing how [client #1] can be with female staff, I would not have agreed to let [FS#2] leave [staff #1] by herself in the cottage; -staff #1 is a newer staff; -if things get out of hand, will bring in a male staff to process with client #1 to avoid a physical restraint; -the expectation is staff let her(Sup) know they are stepping out of the cottage; -client #1 does not like staff #1; -staff #1 was trying to build that rapport with the clients.	V 315		

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V 537	Continued From page 4	V 537		
V 537	27E .0108 Client Rights - Training in Sec Rest & ITO 10A NCAC 27E .0108 TRAINING IN SECLUSION, PHYSICAL RESTRAINT AND ISOLATION TIME-OUT (a) Seclusion, physical restraint and isolation time-out may be employed only by staff who have been trained and have demonstrated competence in the proper use of and alternatives to these procedures. Facilities shall ensure that staff authorized to employ and terminate these procedures are retrained and have demonstrated competence at least annually. (b) Prior to providing direct care to people with disabilities whose treatment/habilitation plan includes restrictive interventions, staff including service providers, employees, students or volunteers shall complete training in the use of seclusion, physical restraint and isolation time-out and shall not use these interventions until the training is completed and competence is demonstrated. (c) A pre-requisite for taking this training is demonstrating competence by completion of training in preventing, reducing and eliminating the need for restrictive interventions. (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. (e) Formal refresher training must be completed by each service provider periodically (minimum annually). (f) Content of the training that the service provider plans to employ must be approved by the Division of MH/DD/SAS pursuant to	V 537		

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V 537	Continued From page 5 Paragraph (g) of this Rule. (g) Acceptable training programs shall include, but are not limited to, presentation of: (1) refresher information on alternatives to the use of restrictive interventions; (2) guidelines on when to intervene (understanding imminent danger to self and others); (3) emphasis on safety and respect for the rights and dignity of all persons involved (using concepts of least restrictive interventions and incremental steps in an intervention); (4) strategies for the safe implementation of restrictive interventions; (5) the use of emergency safety interventions which include continuous assessment and monitoring of the physical and psychological well-being of the client and the safe use of restraint throughout the duration of the restrictive intervention; (6) prohibited procedures; (7) debriefing strategies, including their importance and purpose; and (8) documentation methods/procedures. (h) Service providers shall maintain documentation of initial and refresher training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where they attended; and (C) instructor's name. (2) The Division of MH/DD/SAS may review/request this documentation at any time. (i) Instructor Qualification and Training Requirements: (1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the	V 537		

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V 537	Continued From page 6 need for restrictive interventions. (2) Trainers shall demonstrate competence by scoring 100% on testing in a training program teaching the use of seclusion, physical restraint and isolation time-out. (3) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program. (4) 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. (5) 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 (j)(6) of this Rule. (6) Acceptable instructor training programs shall include, but not be limited to, presentation of: (A) understanding the adult learner; (B) methods for teaching content of the course; (C) evaluation of trainee performance; and (D) documentation procedures. (7) Trainers shall be retrained at least annually and demonstrate competence in the use of seclusion, physical restraint and isolation time-out, as specified in Paragraph (a) of this Rule. (8) Trainers shall be currently trained in CPR. (9) Trainers shall have coached experience in teaching the use of restrictive interventions at least two times with a positive review by the coach. (10) Trainers shall teach a program on the use of restrictive interventions at least once	V 537		

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V 537	Continued From page 7 annually. (11) Trainers shall complete a refresher instructor training at least every two years. (k) Service providers shall maintain documentation of initial and refresher instructor training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcome (pass/fail); (B) when and where they attended; and (C) instructor's name. (2) The Division of MH/DD/SAS may review/request this documentation at any time. (l) Qualifications of Coaches: (1) Coaches shall meet all preparation requirements as a trainer. (2) Coaches shall teach at least three times, the course which is being coached. (3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction. (m) Documentation shall be the same preparation as for trainers. This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to ensure staff demonstrated competency in restrictive interventions for 1 of 1 current staff(#1). The findings are: Review on 3/2/122 of staff #1's personnel record revealed: -hire date of 1/20/22 with job title of Behavioral Health Counselor; -documentation of completed TCI(Therapeutic Crisis Intervention) dated 1/29/22.	V 537		

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V 537	Continued From page 8 Review on 3/18/22 of the facility's incident reports from 1/1/22-3/18/22 revealed: -an incident report dated 3/12/22 completed by staff #1; -incident reports was regarding client #1; -staff #1 asked client #1 to go to his room to regulate after an argument with a peer; -client #1 refused directions; -client #1 became verbally and physically aggressive; -client #1 threatened to hit staff #1; -client #1 approached staff #1 aggressively; -staff #1 was sitting on the couch in the commons area; -staff #1 stood up as client #1 approached her; -staff #1 put her hand up to block client #1; -staff #1 tripped over client #1's feet and fell to the ground with client #1; -supervisor spoke to staff #1 about concern of touching clients without using TCI techniques. Interview on 3/21/22 with client #2 revealed: -saw client #1 restrained; -staff #1 restrained client #1 in front of the other clients; -client #1 was cussing out his peers and saying he was going to hurt somebody. Interview on 3/21/22 with client #3 revealed: -staff #1 was getting on one of kids nerves; -saw staff #1 restrain client #1; -client #1 was coming out of his room and setting alarm off, -client #1 was trying to hit staff #1. Interview on 3/21/22 with client #4 revealed: -staff #1 just restrained client #1; -he was trying to put his hands on staff #1; -he was arguing with staff #1.	V 537		

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V 537	Continued From page 9 Interview on 3/21/22 with client #1 revealed: -restrained by staff twice; -don't remember the staff who restrained him. Interview on 3/22/22 with staff #1 revealed: -was working on day of incident with client #1; -client #1 was having words with his peer; -she redirected both to their rooms; -peer went to his room but client #1 refused; -client #1 kept yelling and walking towards his peer's room; -prompted him several times to go to his room; -he began to yell at her and threatened to hit her; -she was sitting on the couch; -he walked towards her; -she stood up and prompted him to his room; -she put her arm out; -he was in front of her; -she grabbed him under his arm to escort him to his room; -"we fell;" -she fell on top of him; -admitted she did pushed on his shoulder to push him back; "we are literally the same size, I am four eleven." Interview on 3/21/22 with the Supervisor revealed: -talked to staff #1; -staff#1 stated did not know what client #1 and his peer were arguing about; -staff #1 reported she told client #1 and his peer to go to their rooms; -client #1 did not go; -staff #1 stated kept telling him to go to his room and he was being defiant; -staff #1 reported client #1 stood up and starting walking towards her; -staff #1 stated she stood up, grabbed client #1's	V 537		

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V 537	Continued From page 10 arms and tried to restraint him; -staff #1 said she tripped and they both fell; -staff #1 said she was only staff in the cottage; -in the process of her and client #1 falling, the other staff came in the cottage.	V 537		