Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL036150	A. BUILDING: _____ B. WING _____	04/22/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOFFMAN	1482 HOFFMAN ROAD GASTONIA, NC 28054

(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 4/22/22. The complaint was unsubstantiated(NC#187202). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities This facility is licensed for 6 beds and currently has a census of 4. The survey sample consisted of audits of 1 deceased client.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (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. (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	V 108	Human Resources will ensure that all background, HCPR and OIG checks are completed upon hire / rehire in accordance with G.S. The new hire/ rehire packet will be utilized to ensure timely checks. Diabetes training will be provided to all staff supporting individual(s) with Diabetes; UMAR Contract nurse will provide training	6/1/22 6/1/22

Division of Health Service Regulation

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

Dir. of Quality Management 5/1/22

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V 108	Continued From page 1 equivalence for relieving airway obstruction. (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. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure staff completed training to meet the needs of the client as specified in the treatment/habilitation plan for 3 of 3 staff(#1, #2, #3). The findings are: Review on 3/31/22 of Deceased Client #1(DC#1)'s record revealed: -admission date of 12/1/07; -discharge date of 3/15/22(death;) -diagnoses of Intellectual Developmental Disability-Mild, Mood Disorder(D/O), Insomnia, Scoliosis, Hip Pain, Hearing difficulties, allergic rhinitis and iron deficiency; -letter dated 1/19/22 completed by DC#1's primary care physician documented: "medical need for a controlled diet consisted of low carbs(carbohydrates) and no sugary drinks based on her diagnosis of hyperglycemia/diabetes;" -Personal Care Physician Authorization and Care Plan dated 6/14/21 documented DC#1 was verbally abusive, injurious to self, displayed disruptive behavior/socially inappropriate behaviors, was ambulatory, wore leg brace, was on a regular low carb diet, had a hard callous on the area above the right ankle that needed monitoring, normal bowel, normal bladder and	V 108	by June 21, 2022. This training will be added to the client-specific training for all persons where applicable. EHR system will be used to track annual required trainings. Managers will send monthly expiration reminders for staff.	6/1/22

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V 108	Continued From page 2 was oriented. Interview on 4/6/22 with staff #1 revealed: -only thing had to watch was what DC#1 ate; -she was borderline diabetic -per the doctor, made sure DC#1 got plenty of water, no sweets, watched her sodas and her intake of food; -not had training in diabetes at this facility; -had diabetes training a long time ago when worked at a sister facility Interview on 4/6/22 with staff #2 revealed: -been at the facility for 6 years; -the last couple of months, watched DC#1's carb intake and "that is what we were doing;" -DC#1 was a picky eater and wanted to eat certain things; -DC#1 wanted chips as a snack and staff was trying to encourage her to eat other healthy foods. Interview on 4/7/22 with staff #3 revealed: -been at the facility over a year; -had to watch DC#1's sugar intake; -"we all made sure she did not eat a lot of sweets;" -not had any training in diabetes. Review on 4/5/22 and 4/6/22 of personnel records revealed: -staff #1 was rehired on 12/9/19 with the job title of Direct Support Professional(DSP) and there was no documentation of completed training in diabetes present in the record; -staff #2 was rehired on 11/18/21 with the job title of DSP and there was no documentation of completed training in diabetes present in the record; -staff #3 was hired on 2/18/21 with the job title of DSP and there was no documentation of	V 108		

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V 108	Continued From page 3 completed training in diabetes present in the record; Review of a voicemail received from the facility's Human Resources(HR) Coordinator revealed "we do not have the diabetes training information..." Interview on 4/19/22 with the HR Coordinator revealed: -confirmed there was no diabetes training for staff; -stated there has been a lot of changes in staff and leadership at the facility and things "fell through the cracks;" -the House Manager was just rehired in 1/2022; -understand it will probably be a deficiency.	V 108		
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 prior to hire, the Health Care Personnel Registry(HCPR) was accessed for 1 of 3 staff(#2). The findings are:	V 131		

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V 131	Continued From page 4 Interview on 4/6/22 with staff #2 revealed: -been with the parent agency for 21 years; -been at the facility for 6 years; -worked all 3 shifts at the facility. Review on 4/5/22 and 4/6/22 of staff #2's personnel record revealed: -original hire date of 7/18/01 with a resignation date of 8/1/21; -was rehired on 11/18/21 with the job title of DSP; -documentation the HCPR was accessed on 3/1/22 present in the record.	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	V 133		

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V 133	Continued From page 5 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 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	V 133		

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V 133	Continued From page 6 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. (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: (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. 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. (d) Limited Immunity. - A provider and an officer	V 133		

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V 133	Continued From page 7 or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for: (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. (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. (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	V 133		

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V 133	Continued From page 8 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. (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. (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: (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. (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.)	V 133		

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V 133	Continued From page 9 This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure within five business days of making the conditional offer of employment, a request was made to conduct a criminal history record check for 1 of 3 staff(#2). The findings are: Interview on 4/6/22 with staff #2 revealed: -been with the parent agency for 21 years; -been at the facility for 6 years; -worked all 3 shifts at the facility. Review on 4/5/22 and 4/6/22 of staff #2's personnel record revealed: -original hire date of 7/18/01 with a resignation date of 8/1/21; -was rehired on 11/18/21 with the job title of DSP; -documentation the criminal history records check was requested on 4/4/22 was present in the record.	V 133		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (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	V 536		

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V 536	Continued From page 10 which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented. (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered. (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 wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule. (g) Staff shall demonstrate competence in the following core areas: (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior;	V 536		

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V 536	Continued From page 11 (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). (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 Qualifications and Training Requirements: (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. (2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program. (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. (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. (5) Acceptable instructor training programs shall include but are not limited to presentation of: (A) understanding the adult learner;	V 536		

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V 536	Continued From page 13 This Rule is not met as evidenced by: Based on records review and interview, the facility failed to ensure staff completed annual refresher training in alternatives to restrictive interventions for 1 of 5 staff(#3). The findings are: Review on 4/5/22 of staff #3's personnel record revealed: -hire date of 2/18/21 with job title of DSP(Direct Support Professional): -documentation of completed training in NCI(North Carolina Interventions) Preventions and Alternatives Part A dated 2/18/21 with an expiration date of 2/17/22; -no documentation of updated annual refresher training in NCI Part A present in the record. Review of a voicemail received from the facility's Human Resources(HR) Coordinator revealed: -in regards to the NCI training for staff #3 "we do not have this information;" -"checked with the trainers and this employee(staff #3) did not renew their training in February of this year." Interview on 4/19/22 with the HR Coordinator revealed: -confirmed there was no updated NCI training for staff #3; -stated there has been a lot of changes recently in staff and leadership at the facility and things "fell through the cracks;" -will ensure staff #3 completes her renewal training for NCI.	V 536		

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HOFFMAN	1482 HOFFMAN ROAD GASTONIA, NC 28054

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V 536	Continued From page 12 (B) methods for teaching content of the course; (C) methods for evaluating trainee performance; and (D) documentation procedures. (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. (7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually. (8) Trainers shall complete a refresher instructor training at least every two years. (j) 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 outcomes (pass/fail); (B) when and where attended; and (C) instructor's name. (2) The Division of MH/DD/SAS may request and review this documentation any time. (k) 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. (l) Documentation shall be the same preparation as for trainers.	V 536	DHSR - Mental Health MAY 13 2022 Lic. & Cert. Section	