STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL068-131	A. BUILDING: _____ B. WING _____	R-C 06/02/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
APOGEE HOME TWO	7612 NC HIGHWAY 49 MEBANE, NC 27302

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V 000	INITIAL COMMENTS A complaint and follow up survey was completed on 6/2/22. The complaint was substantiated (intake #NC00188387). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness. This facility is licensed for 6 and currently has a census of 5. The survey sample consisted of audits of 3 current clients and 1 former client.	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		

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V 112	Continued From page 1	V 112		

This Rule is not met as evidenced by:
Based on record reviews and interviews, the facility failed to develop and implement strategies to meet the needs and behaviors affecting three of three audited current clients (#1, #2 and #3) and one of one former client (FC #6). The findings are:

Cross Reference: 10A NCAC 27G .5602 SUPERVISED LIVING-STAFF (V290)
Based on record review and interviews, the facility failed to assess client's capability of having unsupervised time in the community without staff supervision affecting one of three audited current clients (#1).

a. Review on 6/2/22 of client #1's record revealed:
-Client #1's Person Centered Plan (PCP) dated 3/14/22 had no strategies to address walking away from the facility.

Review on 6/2/22 of a police communication event reports revealed:
-4/28/22-Neighbor reported client #1 was wandering around the neighborhood trying to talk to people stuck in traffic off of the major highway.
-4/10/22-Neighbor reported client #1 was walking along major highway.
-4/9/22-Neighbor reported client #1 was walking in the major highway.

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V 112	Continued From page 2 b. Review on 6/2/22 of client #2's record revealed: -Admission date of 11/12/20. -Diagnoses of Schizophrenia, Hyperlipidemia, Astigmatism, History of Alcohol and Cocaine Use. -Annual Forensic Update from federal prison, no date indicated- Client #2 was accused of stealing, making threats to harm and cocaine use. He was alleged to have committed assault on a Federal Officer while housed at federal prison. -Client #2's PCP dated 12/7/21 had no strategies to address walking away from the facility. Review on 6/2/22 of a police communication event report dated 1/2/22 revealed: -Facility staff contacted the police department about client #2 walking away from the facility. Client #2 was seen at local store in the area. The Director was notified and picked client #2 up from the local store. Review on 6/2/22 of a incident report dated 10/24/21 revealed: -Staff noticed client #2 was not at the facility around 2:30 PM. The Director and Qualified Professional were informed. The Director looked for client #2 at two of the local stores in the area. The store clerk for one of the stores informed the Director that client #2 had been there about 30 minutes prior to her arrival. The Director contacted the police department to get assistance with locating client #2. Client #2 was found in the next county over by an Officer. Client #2 said he caught a ride with a stranger who dropped him off to a restaurant. c. Review on 6/2/22 of client #3's record revealed: -Admission date of 3/19/09. -Diagnoses of Schizophrenia-Paranoid Type and Allergic Rhinitis.	V 112		

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V 112	Continued From page 3 -Referral for Residential Admission dated 3/10/09- He had poor insight into his mental illness. He had a history of psychiatric hospitalizations. -Admission Assessment dated 3/19/09-He had poor judgment. He had previous incidents of running away when he lived with his parents. -Client #3's PCP dated 7/30/21 had no strategies to address walking away from the facility. Review on 6/2/22 of an incident report dated 4/18/22 revealed: -Client #3 went outside. Staff went out a few minutes later to call him back into the facility because there was a scheduled appointment. Staff could not find client #3. Client #3 left the facility. Staff and the other clients got into the van and rode around looking for client #3. Staff returned to the facility and client #3 was standing on the back steps. d. Review on 6/2/22 of FC #6's record revealed: -Admission date of 2/18/22. -Diagnoses of Schizophrenia, Intellectual Developmental Disability-unspecified, Type II Diabetes and Nicotine Dependence. -Discharge date of 5/31/22. -FC #6's PCP had no strategies to address walking away from the facility. Interview on 6/2/22 with client #1 revealed: -He liked walking along the major highway near the facility. He just liked walking and really had no destination. He was unsupervised whenever he walked along the main highway. -The major highway was busy and he had to watch out for traffic when he crossed over to the other side of the road. -Police officers picked him up 2-3 times while he was walking along the major highway. He was not	V 112		

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sure why the police officers picked him up. He had not done anything.
-He also walked through some of the neighbors yards and the Director told him he should not be doing that.

Interview on 6/2/22 with client #2 revealed:
-On January 2, 2022 he walked away from the facility. He walked to a store in the area because he wanted to purchase cigarettes. He thought the Director picked him up from the store and took him back to the facility.
-He walked away from the facility on another occasion. He walked away from the facility in October 2021. He walked to the store because he wanted to purchase cigarettes. While he was at the store he met a stranger and caught a ride with him to a nearby city. The stranger dropped him off to a restaurant. A police officer brought him back to the facility.

Interview on 6/2/22 with client #3 revealed:
-He walked away from the facility. "I walked to my home which is right down the street from the facility. My wife lives in that home and I wanted to see her."

Interview on 6/1/22 with Neighbor #1 revealed:
-He lived near a facility in his neighborhood.
-He saw client #1 "bothering" other people throughout the neighborhood. He saw him going to neighbors houses, the church and a store in the area. He started seeing client #1 about 3-4 months ago walking down the major highway and throughout the neighborhood.
-Client #1 walked up and down the road asking for cigarettes and rides to the store.
-He saw client #1 walking along the major highway near a road construction site. Client #1 was flagging cars down to ask for cigarettes or a

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ride to the store. He just saw client #1 this week walking along the major highway. He saw client #1 at least 4 times a week walking along the major highway.
-He called law enforcement at least twice about client #1. He was afraid client #1 was going to get hit because sometimes he was walking in the major highway. The major highway was "very busy and some people drive really fast."

Interview on 6/1/22 with Neighbor #2 revealed:
-He lived near a facility in his neighborhood.
-He saw client #1 walking up and down the major highway on several occasions. He saw client #1 walking up and down the major highway on a weekly basis.
-Client #1 once flagged him down on the major highway and asked him for a cigarette. He also saw client #1 flagging down other cars along the major highway. He assumed client #1 was also begging the people in those cars he flagged down for cigarettes. The major highway was busy and client #1 should not be walking around unsupervised.
-Client #1 also walked over to the church he attended not far from the facility. Client #1 knocked on the door during the Sunday morning service more than once. He wanted to come into the church for service and he was denied access to the church each time.

Interview on 6/2/22 with staff #1 revealed:
-Client #1 walked away from the facility without staff supervision. Client #1 walked away from the facility just about every week. He walked away at least 2 days a week. She thought client #1 started walking away about 2 weeks after he was admitted to the facility in March 2022.
-Client #1 walked down the major highway, she was not sure where he was going. The major

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V 112	Continued From page 6	V 112		

highway he walked along was "very busy."
-She thought the Director once picked client #1 up by the stop sign across the street near the major highway.
-She thought police officers picked client #1 up and returned him to the facility 4-5 times. She didn't think any staff called to report client #1 missing. She didn't know why he was picked up by police officers.
-Staff talked to client #1 about leaving the facility unsupervised. Client #1 would still leave the facility.
-Client #3 walked away from the facility unsupervised in April 2022. They were getting ready to go out into the community for an appointment. She called for client #3 and realized he was no longer at the facility. She looked for client #3 throughout the neighborhood and found him sitting on a neighbor's porch.
-FC #6 also walked away from the facility without staff supervision. She thought FC #6 walked away from facility on two separate occasions. She thought he walked away from the facility around March or April 2022. She recalled him walking to one of the local stores both times. She thought staff picked him up from the store each time.
-She confirmed clients #1, #2, #3 and FC #6 had no strategies to address walking away from the facility.

Interview on 6/2/22 with the Qualified Professional (QP) revealed:
-She was aware of clients #1, #2, #3 and FC #6 walking away from the facility without staff supervision.
-She and the Director were responsible for creating and making revisions to the PCP's.
-She provided no explanation for PCP's not being revised to address clients #1, #2, #3 and FC #6 walking away from the facility.

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V 112	Continued From page 7 -She confirmed clients #1, #2, #3 and FC #6 had no strategies to address walking away from the facility. Interview on 6/2/22 with the Director revealed: -She knew client #1 walked away from the facility on several occasions. -Client #1 walked along the major highway and would normally return within 30 minutes. -When client #1 was first admitted to the facility he would walk onto the neighbor's property. She talked to him about that and he was not doing that as often. -Police officers brought client #1 back to the facility a few times. She was not sure why they picked him up. -She was aware client #2 walked away from the facility in January 2022. Client #2 walked to a store in the neighborhood. -She thought a store clerk from a neighborhood store or police officer called them about client #2. She thought a staff brought client #2 back to the facility. -Client #2 also walked away from the facility last year in October 2021. The police department was contacted to report that incident with client #2. Client #2 caught a ride with someone he met at a local store. The stranger drove him to a nearby city. A police officer in that area contacted staff to report client #2 was located. -She knew client #3 recently walked away from the facility. Staff #1 was working and said she was looking for client #3 and he just disappeared. She had family in the neighborhood and client #3 walked over to their house. Staff picked client #3 up from the neighbor's house and returned him to the facility. -FC #6 also walked away from the facility. She thought he only walked away from the facility once. She picked FC #6 up from a local store.	V 112		

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V 112	Continued From page 8 She could not remember the exact date FC #6 walked away. -She and the QP were responsible for revisions to the PCP's for clients. She provided no explanation for PCP's not being revised to address clients #1, #2, #3 and FC #6 walking away from the facility. -She confirmed clients #1, #2, #3 and FC #6 had no strategies to address walking away from the facility. Review on 6/2/22 of a Plan of Protection (POP) written by the Director dated 6/2/22 revealed: What immediate action will the facility take to ensure the safety of the consumers in your care?: "[QP, Director and Clinical Staff] will revise plans as it relates to the residents walking off the premises or facility site. It may be necessary to discharge any resident that do not comply with this house rule. The plans will be updated within 7 days as required. The meeting will also assess residents to see if they meet the criteria for unsupervised time." Describe your plans to make sure the above happens: "Staff will inform [QP, Director and Clinical Staff] of any resident walk off the facility grounds. Monthly meeting notes will incorporate information of walk off from the facility. If a resident is granted permission for unsupervised time, it will be monitored to see if the unsupervised time should continue." Clients in the facility diagnoses included Schizoaffective Disorder, Schizophrenia, Depression, Attention Deficit Hyperactivity Disorder, Generalized Anxiety Disorder, Intellectual Developmental Disability-unspecified, Type II Diabetes Nicotine Dependence, History of Cannabis Use, History of Alcohol and Cocaine Use. Client #1 walked along a major highway and	V 112		

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V 112	Continued From page 9 throughout the neighborhood without staff supervision. Two neighbors were concerned about client #1 walking along the major highway because it was a heavy traffic area. Client #1 was seen by those two neighbors stopping cars while the driver was in traffic in order to ask for cigarettes or a ride to the store. Client #1 had a history of panhandling. The Director stated client #1 had a verbal consent from his guardian to have unsupervised time in the community. There was no documentation that client #1 was assessed for his capability to have unsupervised time in the community. Client #2 walked away from the facility on two occasions without staff supervision. Client #2 walked to a local store October 2021 and caught a ride with a stranger to a nearby city. A police officer in that nearby city returned client #2 to the facility. Client #2 also walked to a local store in January 2022. Client #3 had a history of walking away when he lived with his parents. Client #3 walked away from the facility without staff supervision in April 2022. Staff found client #3 at a neighbor's home sitting on the porch. FC #6 walked away from the facility twice without staff supervision. FC #6 walked to one of the local stores on both occasions. The Director and QP were responsible for revising clients #1, #2, #3 and FC #6's PCP to address walking away from the facility. This deficiency constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days. An administrative penalty of $5000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of $500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.	V 112		

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V 290	Continued From page 10	V 290		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. (b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body. (d) In facilities which serve clients whose primary diagnosis is substance abuse dependency: (1) at least one staff member who is on	V 290		

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V 290	Continued From page 11 duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to assess client's capability of having unsupervised time in the community without staff supervision affecting one of three audited current clients (#1). The findings are: Review on 6/2/22 of client #1's record revealed: -Admission date of 3/14/22. -Diagnoses of Schizoaffective Disorder, Depression, Attention Deficit Hyperactivity Disorder, Generalized Anxiety Disorder, Nicotine Dependence and History of Cannabis Use. Psychological Evaluation dated 12/14/20-Client #1's mother reported that he panhandles in the middle of the road in city downtown in another county and smoked Cannabis in public. -There was no documentation that client #1 had been assessed for capability of having unsupervised time in the community without staff supervision. Interview on 6/2/22 with client #1 revealed: -He liked walking along the major highway near the facility. He just liked walking and really had no destination. He was unsupervised whenever he walked along the main highway. -The major highway was busy and he had to watch out for traffic when he crossed over to the	V 290		

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V 290	Continued From page 12 other side of the road. -Police officers picked him up 2-3 times while he was walking along the major highway. He was not sure why the police officers picked him up. He had not done anything. -He also walked through some of the neighbors yards and the Director told him he should not be doing that. Interview on 6/2/22 with the Qualified Professional revealed: -Client #1 had to be supervised at all times. -She didn't know client #1's guardian gave a verbal consent for unsupervised time in the community. -She had a recent conversation with the Director to discuss how appropriate client #1 was for the facility. -She confirmed the facility failed to assess client #1's capability of having unsupervised time in the community. Interview on 6/2/22 with the Director revealed: -Client #1's guardian approved unsupervised time in the community for him about 2 months ago. She thought client #1's guardian gave him two hours each day. -There was no paperwork to determine how the unsupervised time was assessed for client #1. It was a verbal consent for client #1 to have unsupervised time in the community. -She could not remember if she talked to client #1 about the unsupervised time in the community. -She confirmed the facility failed to assess client #1's capability of having unsupervised time in the community. This deficiency is cross referenced into 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE	V 290		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
APOGEE HOME TWO	7612 NC HIGHWAY 49 MEBANE, NC 27302

(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 290	Continued From page 13 PLAN(V112) for a Type A1 rule violation and must be corrected within 23 days.	V 290		