

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL033-132	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 07/18/2022
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NAME OF PROVIDER OR SUPPLIER OPEN ARMS FAMILY SERVICES, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 1649 HARPER STREET ROCKY MOUNT, NC 27801
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{V 000}	<p>INITIAL COMMENTS</p> <p>A follow up survey was completed on 7/18/22. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 4 and currently has a census of 4. The survey sample consisted of audits of 3 current clients.</p>	{V 000}		
{V 109}	<p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.</p>	{V 109}		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Division of Health Service Regulation

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{V 109}	<p>Continued From page 1</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.</p> <p>(g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to ensure of 1 of 2 Qualified Professionals (QP) (Licensee) demonstrated, knowledge, skills and abilities required by the population served. The findings are:</p> <p>A. Cross reference tag: 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (V112). Based on observation, record review and interview the facility failed to develop & implement goals and strategies to address 1 of 3 audited clients (#2) behaviors.</p> <p>B. Cross reference tag: 10A NCAC 27G .5601 SCOPE (V289). Based on record review and interview the facility failed to meet the scope of the program by admitting clients without a diagnosis of a developmental disability for 1 of 3 audited clients (#2).</p> <p>C. Cross reference tag: 10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE (V513).</p>	{V 109}		

Division of Health Service Regulation

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{V 109}	<p>Continued From page 2</p> <p>Based on observation, record review and interview the facility failed to use the least restrictive and most appropriate settings and method.</p> <p>Review on 7/11/22 of the Licensee's personnel record revealed:</p> <ul style="list-style-type: none"> - Master in Education 2005 <p>Interview on 7/11/22 the QP reported:</p> <ul style="list-style-type: none"> - Been the QP since 6/5/22 - He was informed about the Plan of Correction (POC) from the previous survey. - He had been working on bringing everything where it needed to be that was listed on the POC - He knew there were things that still needed to be done and they were working on them - They had made much progress since he had been the QP in such a short period of time. <p>Interview on 7/18/22 the Licensee reported:</p> <ul style="list-style-type: none"> - He was acting QP from Dec. 2021 until the new QP was hired in June 2022. - Duties as a QP were assessments and making sure the clients were taken care of. - They were making progress with what was on the POC. - He was working with the new QP on correcting the issues from the last survey. <p>Review on 7/18/22 of the Plan of Protection dated 7/18/22 written by the QP revealed:</p> <p>"What immediate action will the facility take to ensure the safety of the consumers in your care?"</p> <ul style="list-style-type: none"> - We will meet with entire team to complete updated treatment plans they have been finished waiting on our meeting in re (regards) new updated home goal Also one resident client rights violation (refrigerator) will be included in his plan 	{V 109}		

Division of Health Service Regulation

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{V 109}	Continued From page 3 Describe your plans to make sure the above happens: - We have and will continue meet with team to finalize plans that have address all updates. We have made tremendous progress and will immediately clear these (4) tags. Team will evaluate diagnosis on all consumers to meet DD (Developmental Disability) criteria will be made to apply for waiver if needed." The facility served clients diagnosed with Psychotic disorder, Intellectual delay, Schizophrenia Disorder, Schizoffective Disorder, Learning Disorder, and Attention Deficit/Hyperactivity disorder. Client #2 did not have an updated treatment plan to include goals and strategies to address his needs. This included restricting client rights by continuing to have a chain lock around the refrigerator to prevent client #2 from eating raw meat. The facility continued to serve client #2 with no DD diagnosis which is outside of the scope of their license. The facility Licensee had failed to implement the above corrections. This deficiency constitutes a Failure to Correct the Type A1 rule violation for serious neglect. An administrative penalty of \$500 per day is imposed for failure to correct within 23 days.	{V 109}		
{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	{V 112}		

Division of Health Service Regulation

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{V 112}	<p>Continued From page 4</p> <p>of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <ol style="list-style-type: none"> (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. <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to develop & implement goals and strategies to address 1 of 3 audited clients (#2) behaviors. The findings are:</p> <p>A. Review on 7/11/22 of Client #2's record revealed:</p> <ul style="list-style-type: none"> - Admitted 12/1/21 - Diagnosis of Schizophrenia - A treatment plan dated 1/7/22: no goals or strategies to address client #2's behaviors of eating raw meat. 	{V 112}		

Division of Health Service Regulation

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{V 112}	<p>Continued From page 5</p> <p>Observations on 7/11/22 revealed the following:</p> <ul style="list-style-type: none"> - 10:00am there was a locked silver link chain wrapped around the handle of the upper and lower portion of the refrigerator/freezer <p>During interview on 7/13/22 Client #4 reported:</p> <ul style="list-style-type: none"> - The lock was on the refrigerator because client #2 always went in there and ate raw food. <p>During interview on 7/11/22 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> - He had been the QP since the beginning of June 2022. - One of his duties was completing/updating the clients' treatment plans. - Client #2 would eat raw meats out of the refrigerator. - They didn't use the chain on the refrigerator all the time. - The treatment team had met and they were trying to get an appointment with client #2's doctor to add strategies to his treatment. plan. - The treatment plan had not been finalized and strategies for eating raw meat was still not in client #2's treatment plan. <p>Interview on 7/18/22 the Licensee reported:</p> <ul style="list-style-type: none"> - The chain was for the client's safety. - They were trying to make sure the clients were safe. - Client #2 will continue to eat raw meat so "what are we supposed to do?" <p>This deficiency is cross referenced into 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS (V109) for a Type A1 and must be corrected within 23 days.</p>	{V 112}		

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{V 289}	Continued From page 6	{V 289}		
{V 289}	<p>27G .5601 Supervised Living - Scope</p> <p>10A NCAC 27G .5601 SCOPE</p> <p>(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.</p> <p>(b) A supervised living facility shall be licensed if the facility serves either:</p> <p>(1) one or more minor clients; or</p> <p>(2) two or more adult clients.</p> <p>Minor and adult clients shall not reside in the same facility.</p> <p>(c) Each supervised living facility shall be licensed to serve a specific population as designated below:</p> <p>(1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses;</p> <p>(2) "B" designation means a facility which serves minors whose primary diagnosis is a 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>	{V 289}		

Division of Health Service Regulation

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{V 289}	<p>Continued From page 7</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> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to meet the scope of the program by admitting clients without a diagnosis of a developmental disability for 1 of 3 audited clients (#2). The findings are:</p> <p>Review on 7/11/22 of Client #2's record revealed:</p> <ul style="list-style-type: none"> - Admitted 12/1/21 - Diagnosis of Schizophrenia <p>Interview on 7/18/22 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> - He thought client #2's diagnosis had been 	{V 289}		
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{V 289}	Continued From page 8 changed. - He would speak with the doctor about client #2 being reassessed. - They would apply for a waiver through the State if client #2's diagnosis couldn't be changed to reflect a developmental disability. This deficiency is cross referenced into 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS (V109) for a Type A1 and must be corrected within 23 days.	{V 289}		
{V 513}	27E .0101 Client Rights - Least Restrictive Alternative 10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE (a) Each facility shall provide services/supports that promote a safe and respectful environment. These include: (1) using the least restrictive and most appropriate settings and methods; (2) promoting coping and engagement skills that are alternatives to injurious behavior to self or others; (3) providing choices of activities meaningful to the clients served/supported; and (4) sharing of control over decisions with the client/legally responsible person and staff. (b) The use of a restrictive intervention procedure designed to reduce a behavior shall always be accompanied by actions designed to insure dignity and respect during and after the intervention. These include: (1) using the intervention as a last resort; and (2) employing the intervention by people trained in its use.	{V 513}		

Division of Health Service Regulation

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{V 513}	<p>Continued From page 9</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to use the least restrictive and most appropriate settings and method. The findings are:</p> <p>Review on 7/11/22 of Client #2's record revealed:</p> <ul style="list-style-type: none"> - Admitted 12/1/21 - Diagnosis of Schizophrenia <p>Observations on 7/11/22 revealed:</p> <ul style="list-style-type: none"> - 10:00am a locked silver link chain wrapped around the handle of the upper and lower portion of the refrigerator/freezer <p>Interview on 7/13/22 client #4 reported:</p> <ul style="list-style-type: none"> - He got "plenty" to eat. - The chain is "always" on the refrigerator because his housemate, client #2, ate raw food out of the refrigerator. <p>Interview on 7/11/22 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> - Client #2 ate raw meat from the refrigerator. - The chain was not used all the time. <p>Interview on 7/18/22 the Licensee reported:</p> <ul style="list-style-type: none"> - The chain was for client #2's safety. - They were trying to make sure the clients were safe. - Client #2 will continue to eat raw meat so "what are we supposed to do?" <p>This deficiency is cross referenced into 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND</p>	{V 513}		

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{V 513}	Continued From page 10 ASSOCIATE PROFESSIONALS (V109) for a Type A1 and must be corrected within 23 days.	{V 513}		