

DHSR LIMITED USE STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL036-372	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 10/17/2022
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NAME OF PROVIDER OR SUPPLIER AMBER HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 3100 Spring Valley Drive Gastonia, NC 28052
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(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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	<p>Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan.</p> <p>(e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and needs as specified in the treatment plan.</p> <p>This Rule is not met as evidenced by: Based on interview and observation, the facility failed to maintain a minimum staffing ratio of two staff for up to four adolescents. The findings are:</p> <p>Observation of the facility on 10-10-22 at approximately 4:00 pm revealed: -One staff (staff #1) and one client (Client #2). -4:19 pm two more clients arrived. -4:30 pm the Qualified Professional arrived.</p> <p>Interview on 10-10-22 with Client #2 revealed: -There was only one staff working per shift. -There had been no incidents that she knew of.</p> <p>Interview on 10-10-22 with Client #3 revealed: -She had been at the facility approximately 6 weeks. -There is usually only one staff working per shift at the facility. -There had been no incidents of clients going AWOL (Absent Without Leave) or any other incidents that she knew of.</p> <p>Interview on 10-14-22 with Staff #1 revealed: -She doesn't work alone. The day of 10-10-22 The Qualified Professional had gone out to get some groceries.</p> <p>Interview on 10-14-22 with the Qualified Professional revealed: -There are two staff per shift working. The day of 10-10-22 she had just gone out to get groceries.</p>			
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DHSR - Mental Health

NOV 15 2022

Lic. & Cert. Section

PROVIDER LICENSEE OR LICENSEE DESIGNEE'S SIGNATURE

TITLE

DATE

CEO 11/10/2022

STATEMENT OF DEFICIENCIES

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V000	<p>A complaint survey was completed on 10-17-22. The complaint was unsubstantiated (Intake #NC 00193870). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G 1700. Residential Treatment Staff Secure for Children or Adolescents.</p> <p>This facility is licensed for three and currently has a census of three. The survey sample consisted of three current clients.</p>	V000		
V296	<p>27G .1704 Residential Tx. Child/Adol - Min. Staffing</p> <p>10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS</p> <p>(a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times.</p> <p>(b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows:</p> <p>(1) two direct care staff shall be present for one, two, three or four children or adolescents;</p> <p>(2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and</p> <p>(3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents.</p> <p>(c) The minimum number of direct care staff during child or adolescent sleep hours is as follows:</p> <p>(1) two direct care staff shall be present and one shall be awake for one through four children or adolescents;</p> <p>(2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and</p> <p>(3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.</p> <p>(d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this</p>			

PROVIDER LICENSEE OR LICENSEE DESIGNEE'S SIGNATURE _____ TITLE _____ DATE 11/10/2022

STATEMENT OF DEFICIENCIES

Appendix 1-B: Plan of Correction Form

Plan of Correction

Please complete all requested information and email completed Plan of Correction form to:

Plans.Of.Correction@dhhs.nc.gov

Provider Name:	AMBER HOUSE	Phone:	704-860-7177
Provider Contact Person for follow-up:	[REDACTED]	Fax:	800-292-0277
		Email:	[REDACTED]
Address:	3100 SPRING VALLEY DRIVR GASTONIA, NC 28052 MHL # 036-372		

Finding	Corrective Action Steps	Responsible Party	Timeline
Rule Violation/Tag #/Citation Level: (V 296) 27G .1704 Residential Tx. Child/Adol - Min. Staffing STANDARD DEFICIENCY	MEASURES TO CORRECT: AIG will ensure that the minimum number of direct care staff required when children or adolescents are present and awake is as follows: (1) two direct care staff shall be present for one, two, three or four children or adolescents; MEASURES TO PREVENT: AIG will ensure necessary staff ratio is always maintained. On 11/8/2022 the clinical director provided additional staff training, and updated the on-call staff protocol that includes having Managers on standby and/or on rotation to provide coverage for unplanned and emergency incidents. Manager(s) will continue random unannounced shift visits. WHO WILL MONITOR: Clinical Director and Program Manager(s) HOW OFTEN MONITORED: Monthly	Clinical Director and Program Manager(s)	Implementation Date: 11-8-2022 Projected Completion Date: 11-8-2022