

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL047-103	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/16/2023
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NAME OF PROVIDER OR SUPPLIER GRACE HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 1892 TURNPIKE ROAD RAEFORD, NC 28376
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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
V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on February 16, 2023. The complaint was unsubstantiated (intake #NC00197146). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents.</p> <p>This facility is licensed for 12 and currently has a census of 11. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(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.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(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>	V 112		

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

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to develop and implement goals and strategies to address one of three audited clients (#1) behavior of ingesting and smearing feces. The findings are:</p> <p>Review on 2/16/23 of Client #1's record revealed: -Age 10 years old. -Admission date of 8/17/22. -Diagnoses of Disruptive Mood Dysregulation Disorder, Conduct Disorder-Childhood Onset Type, Attention Deficit Hyperactivity Disorder-Combined Type and Posttraumatic Stress Disorder. -Treatment Plan dated 2/6/23 had no goal or strategy to address the behavior. -Progress report on the treatment plan included: " ... [Client #1] has licked the inside of the toilet bowl. [Client #1] has also been eating his own feces and then laughs about it towards staff and peers..."</p> <p>Interview on 2/16/23 with Client #1 revealed: -He ate and smeared his feces all the time. -He also drank his urine off the floor. -He did it all the time.</p> <p>Interview on 2/16/23 with the Senior Team Leader revealed:</p>	V 112		

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V 112	<p>Continued From page 2</p> <ul style="list-style-type: none"> -Client #1 was eating his feces when admitted. -Client #1 would spread his feces all over his face and walls. -Client #1 did this every day. -He felt client #1 would get sick if he continued to eat his feces. -He put something in place for client #1 to stop the behavior. -Client #1 kept saying he was bored. -Client #1 was allowed to exercise in the morning and get a DVD player. -No issues since putting something in place. -Staff documented client #1's behavior on every shift. -Client's behavior should also be documented in the behavioral log briefing book. -Client #1 had no issues with eating, smearing or playing with his feces since he started exercising. <p>Interview on 2/16/23 with the Assistant Executive Director revealed:</p> <ul style="list-style-type: none"> -Client #1 ate and smeared his feces on the wall and his legs. -Client #1 would throw his feces at staff. -The therapist did not provide any help in preventing client #1's behavior. <p>Interview on 2/16/23 with the Executive Director revealed:</p> <ul style="list-style-type: none"> -He was hired as the ED two weeks ago. -He would meet with the therapist to ensure a goal and strategies were added to client #1's treatment plan. 	V 112		