

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL047-158	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 02/10/2023
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NAME OF PROVIDER OR SUPPLIER CANYON HILLS TREATMENT FACILITY	STREET ADDRESS, CITY, STATE, ZIP CODE 769 ABERDEEN ROAD RAEFORD, NC 28376
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on February 10, 2023. The complaints were unsubstantiated (intake #NC00197812 and #NC00198263). As a result of the follow-up survey the following was brought back into compliance: North Carolina General Statue 131E (V9999). 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 24 and currently has a census of 19. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 537	<p>27E .0108 Client Rights - Training in Sec Rest & ITO</p> <p>10A NCAC 27E .0108 TRAINING IN SECLUSION, PHYSICAL RESTRAINT AND ISOLATION TIME-OUT</p> <p>(a) Seclusion, physical restraint and isolation time-out may be employed only by staff who have been trained and have demonstrated competence in the proper use of and alternatives to these procedures. Facilities shall ensure that staff authorized to employ and terminate these procedures are retrained and have demonstrated competence at least annually.</p> <p>(b) Prior to providing direct care to people with disabilities whose treatment/habilitation plan includes restrictive interventions, staff including service providers, employees, students or volunteers shall complete training in the use of seclusion, physical restraint and isolation time-out and shall not use these interventions until the training is completed and competence is</p>	V 537		

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

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V 537	<p>Continued From page 1</p> <p>demonstrated.</p> <p>(c) A pre-requisite for taking this training is demonstrating competence by completion of training in preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(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.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider plans to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Acceptable training programs shall include, but are not limited to, presentation of:</p> <ol style="list-style-type: none"> (1) refresher information on alternatives to the use of restrictive interventions; (2) guidelines on when to intervene (understanding imminent danger to self and others); (3) emphasis on safety and respect for the rights and dignity of all persons involved (using concepts of least restrictive interventions and incremental steps in an intervention); (4) strategies for the safe implementation of restrictive interventions; (5) the use of emergency safety interventions which include continuous assessment and monitoring of the physical and psychological well-being of the client and the safe use of restraint throughout the duration of the restrictive intervention; (6) prohibited procedures; (7) debriefing strategies, including their 	V 537		

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V 537	<p>Continued From page 2</p> <p>importance and purpose; and</p> <p>(8) documentation methods/procedures.</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualification and Training Requirements:</p> <p>(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.</p> <p>(2) Trainers shall demonstrate competence by scoring 100% on testing in a training program teaching the use of seclusion, physical restraint and isolation time-out.</p> <p>(3) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(4) 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.</p> <p>(5) 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 (j)(6) of this Rule.</p> <p>(6) Acceptable instructor training programs shall include, but not be limited to, presentation of:</p> <p>(A) understanding the adult learner;</p>	V 537		

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V 537	<p>Continued From page 3</p> <p>(B) methods for teaching content of the course;</p> <p>(C) evaluation of trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(7) Trainers shall be retrained at least annually and demonstrate competence in the use of seclusion, physical restraint and isolation time-out, as specified in Paragraph (a) of this Rule.</p> <p>(8) Trainers shall be currently trained in CPR.</p> <p>(9) Trainers shall have coached experience in teaching the use of restrictive interventions at least two times with a positive review by the coach.</p> <p>(10) Trainers shall teach a program on the use of restrictive interventions at least once annually.</p> <p>(11) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(k) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcome (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(l) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times, the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(m) Documentation shall be the same</p>	V 537		

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V 537	<p>Continued From page 4</p> <p>preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, one of four audited staff (the Facility Manager) failed to demonstrate competence in physical restraint affecting one of three audited clients (#1). The findings are:</p> <p>Review on 2/9/23 of the personnel record for the Facility Manager revealed: -Hire date was 6/1/17 -Nonviolent Crisis Intervention was completed on 11/30/22.</p> <p>Review on 2/8/23 of client #1's record revealed: -Admission date of 9/9/22. -Diagnoses of Intellectual Disability-not specified, Disruptive Mood Dysregulation Disorder, Post-Traumatic Stress Disorder and Attention Deficit Hyperactivity Disorder. -He was 11 years old. -Mental Health Assessment dated 5/27/22-He had a history of verbal and physical aggression, poor impulse control, extreme tantrum behaviors, anger outburst and other trauma related reactions.</p> <p>Review on 2/8/23 of an incident report dated 1/1/23 revealed: -"At approximately 7:40pm [staff #2] was called to the unit because [client #1] was in crisis. [Client #1] was being defiant, physically aggressive as well as verbally aggressive. Residential Advisor (RA) staff directed [client #1] to go down to the room to reset. When [client #1] begins to escalate</p>	V 537		

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V 537	<p>Continued From page 5</p> <p>further [Staff #2] asked staff to escort [client #1] down to his room. Once [client #1] reaches his room he continues to display physically aggression and verbal aggression towards staff. [Client #1] attempted to rush towards staff to attack them. [Client #1] missed [the Facility Manager] subsequently the left side of [client #1's] face by his eye came into contact with his doorknob. [Client #1] was assessed [client #1] rated his pain at 2 out of 10. [Client #1] is given an ice pack to prevent swelling. Will continue to assess [client #1's] condition."</p> <p>Interview on 2/9/23 with client #1 revealed:</p> <ul style="list-style-type: none"> -There was an incident a few weeks ago with the Facility Manager. -The Facility Manager pushed him in his chest. -He lost his balance and he hit his eye on the door knob. -He was not sure why the Facility Manager pushed him into the door. -He thought staff #2 was in the room during that incident. -He thought there was another staff present during that incident. He couldn't remember the other staff. -His eye was bruised and swollen after that incident. -Staff #2 looked at his eye after the incident. -He got an ice pack and took some Tylenol. <p>Interview on 2/9/23 with staff #1 revealed:</p> <ul style="list-style-type: none"> -He recalled an incident with client #1 on 1/1/23. -Client #1 was having behaviors. Client #1 was upset with one of the other clients and tried to fight that client. -He and the Facility Manager escorted client #1 to his bedroom. -Once client #1 walked into his bedroom he dropped to the floor. 	V 537		

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V 537	<p>Continued From page 6</p> <ul style="list-style-type: none"> -Staff #2 was also in the bedroom during that incident. -He recalled staff #2 trying to process with client #1 while he was sitting on the floor. -He and the Facility Manger were standing near the door. -The Facility Manager also tried to process with client #1. -A little later client #1 got up onto his knees, lunged and swung at the Facility Manager. -The Facility Manager moved to the side with his hands up in the air and client #1 fell forward. -Client #1 hit the side of his eye on the doorknob when he fell forward. <p>Interviews on 2/9/23 and 2/10/23 with staff #2 revealed:</p> <ul style="list-style-type: none"> -She did witness incident with client #1 on 1/1/23. -She was called to unit during that incident and was told client #1 was being noncompliant. -The Facility Manager and staff #1 escorted client #1 to his bedroom. -The Facility Manager interacted with client #1 by trying to process with him. -Staff #1 did not really interact with client #1. Staff #1 was there as a "spotter." -Client #1 was hitting, punching and kicking at the Facility Manager during that incident -She never saw the Facility Manager block any punches or kicks with client #1. -She remembers saying to herself "why are you letting [client #1] beat up on you." -The Facility Manager was standing in the doorway of client #1's bedroom. -Client #1 was in the bedroom trying to push past the Facility Manager. -She saw client #1 charge at the Facility Manager. -The Facility Manager moved to the side. -Client #1 was in a bent over position. Client #1 	V 537		

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V 537	<p>Continued From page 7</p> <p>fell forward and hit the doorknob with the edge of eye. -Client #1 had a black eye after the incident and she assessed him.</p> <p>Interviews on 2/8/23 and 2/9/23 with the Facility Manager revealed: -There was an incident with client #1 at the beginning of January 2023. -He was called into client #1's bedroom to assist during that incident because client #1 was having behaviors. -When he went into client #1' bedroom, another staff was there and he switched places with that staff. -He couldn't remember who the staff person was at that time. -He thought once he went into the room that staff left. -He recalled staff #2 standing in the door way of client #1's bedroom as a spotter. -After the other staff left client #1 started hitting and swinging at him while he was still standing. He blocked client #1 as he hit and swung at him. -Client #1 then went down to the floor and sat on his butt and started kicking him. He was blocking client #1 while he was kicking at him, he put his foot up and blocked client #1 from kicking him. -Client #1 then got up on his knees after trying to kick him and swung at him and missed. -He stepped to the side with his arms raised in order to avoid being hit by client #1. -Client #1 fell forward and hit his eye on the doorknob. -Client #1 did have a bruise underneath his eye shortly after the incident. -Staff #2 evaluated client #1 after the incident and gave him an ice pack.</p> <p>Interviews on 2/8/23 and 2/9/23 with the Program</p>	V 537		

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V 537	<p>Continued From page 8</p> <p>Director revealed:</p> <ul style="list-style-type: none"> -She was aware of the incident with client #1 on 1/1/23. -She was informed client #1 was being noncompliant -She was told by staff, client #1 was charging at the Facility Manager and the Facility Manager stepped to the side. -She was also told client #1 hit his face on the doorknob when the Facility Manager stepped to the side and that was how client #1 got the black eye. -She was one of the Nonviolent Crisis Intervention instructors with the facility. -Staff are taught to block a client if they are swinging, punching and kicking at them. -The Facility Manager should not have stepped to the side during that incident. -"You only step away from the client after blocking a hit or punch. You step back and continue to talk and deescalate with that client." -She confirmed staff failed to demonstrate competence in physical restraint. 	V 537		