

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL047-174	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 02/10/2023
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NAME OF PROVIDER OR SUPPLIER MULTICULTURAL RESOURCES CENTER GROUP HOI	STREET ADDRESS, CITY, STATE, ZIP CODE 6188 ARABIA ROAD LUMBER BRIDGE, NC 28357
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on February 10, 2023. Complaint #NC00197359 was substantiated and complaint #NC00198087 was unsubstantiated. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for four and currently has a census of three. The survey sample consisted of two current clients and one former client.</p> <p>A sister facility is identified in this report. The sister facility will be identified as sister facility A. Client will be identified using the letter of the facility and a numerical identifier</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> <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 	V 112		

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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>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> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to develop and implement strategies to address physical aggression for 1 of 3 audited clients (Former Client #3). The findings are:</p> <p>Review on 2/1/23 of Client #1's record revealed: -Admission date of 6/12/22. -Diagnoses of Schizoaffective Disorder, Mild Intellectual Development Disability and Paranoia-Unspecified.</p> <p>Review on 2/1/23 of Client #2's record revealed: -Admission date of 3/2/20. -Diagnoses of Autism Spectrum Disorder, Mild Intellectual Developmental Disability, Attention Deficit Hyperactivity Disorder- Predominately Hyperactive/Impulsive and Disruptive Mood Dysregulation Disorder.</p> <p>Review on 2/1/23 of FC #3's record revealed: -Age 17. -Admission date of 9/7/22. -Discharge date of 1/15/23. -Diagnoses of Mild Intellectual Disability and</p>	V 112		

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V 112	<p>Continued From page 2</p> <p>Attention Deficit Hyperactivity Disorder- Combined Type.</p> <p>-The admission assessment dated 9/7/22 identified the presenting problems of aggressive behaviors, property destruction and physical aggression.</p> <p>-Goal #3 of Individual Service Plan (ISP) dated 8/31/22 stated, "Will maintain and increase his appropriate behaviors throughout the plan year."</p> <p>-How?: "A behavior support plan, Community Support Team and Assertive Community Treatment will be investigated once settled in the group home to address noted issues. Staff will provide instructions, prompts, redirection, modeling and assistance including Preparing FC #3 for triggers such as loud and/or crowded environments, someone in his personal space and feeling overwhelmed (e.g. being told 'no' or asking too many questions, or not allowing him to do what he wants). Redirection to a quiet location when he is showing signs of agitation. Use of ear plugs or noise canceling headphones when he must be in crowds or around loud noises. Allow him choices when possible (e.g., what to eat, where to go in the community, etc.)"</p> <p>-There were no strategies to address the physical aggression.</p> <p>Review on 2/1/23 of Client A4's record revealed:</p> <p>-Admission date to sister facility A on 11/21/22.</p> <p>-Diagnoses of Schizoaffective Disorder, Intellectual Developmental Disability-Unspecified and Post Traumatic Stress Disorder.</p> <p>Review on 2/1/23 and 2/3/23 of the facility's incident report logbook revealed:</p> <p>-"[FC #3] attacked a peer in the home on 10/12/22 resulting in property destruction and elopement. Local law enforcement was contacted."</p>	V 112		

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V 112	<p>Continued From page 3</p> <p>-"[FC #3] attacked and bit staff on 10/29/22 when prompted to complete his chore. Local law enforcement was contacted."</p> <p>-"[FC #3] attacked and bit peer in the home on 1/3/23 when accused of breaking peer television. Local law enforcement was contacted."</p> <p>-"[FC #3] accused peers of damaging headphones and went into another peer's room to take his headphones to listen to his MP3 player on 1/5/23. He became upset leaving the facility. Local law enforcement was contacted."</p> <p>-"[FC #3] was attack with a game console and bit peer from a sister facility on 1/15/23. Local law enforcement was contacted."</p> <p>Interview with FC #3 was not possible as he is currently incarcerated.</p> <p>Interview on 2/1/23 with Client A4 revealed: -"Yes, I was attacked by [FC #3] on January 15, 2023." -"Matter of fact, I am going to the jailhouse to press charges on him tomorrow." -"Was at the other group home to complete his school assignment." -"Yes, staff checked medications and then left me with [staff #1] and the clients." -"I used my phone as my Wi-Fi to connect to my laptop to do my assignment." -"FC #3 wanted to use his phone and he told him no." -"[FC #3] bit me and was trying to push my eyes out." -"I did go to the emergency room (ER) but came back home later and was given Ibuprofen to take as I was sore and had scratches on my face."</p> <p>Interview on 2/1/23 with staff #1 revealed: -"Client A4 was at the home to complete schoolwork online as his home internet was</p>	V 112		

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V 112	<p>Continued From page 4</p> <p>down.</p> <p>-FC #3 became upset that Client A4 had a phone, and he did not.</p> <p>-Incident began when all clients were outside for a smoke break.</p> <p>-FC #3 asked Client A4 if he could listen to music on his phone and was told no.</p> <p>-While outside FC #3 started arguing and attacked Client A4.</p> <p>-FC #3 was biting Client A4 on his right shoulder.</p> <p>-"I yelled for [FC #3] to stop and he did get off him."</p> <p>-"[FC #3] charged at [Client A4] while in living room and he fell to the floor."</p> <p>-"I made a call to the Director, and he informed me to call the police."</p> <p>-"While on the phone with 911, I made them aware of [FC #3's] behavior."</p> <p>-"[FC #3] took his thumbs and began pushing [Client A4] eyes."</p> <p>-"Another client came out of their room and yelled for [FC #3] to get off [Client A4]."</p> <p>-FC #3 stopped but then grabbed the game console and began to hit Client A4 in the head and face.</p> <p>-FC #3 continued to hit Client A4 until after he saw the lights of the police car in the driveway.</p> <p>-FC #3 then ran out the door but was caught by the police outside.</p> <p>Interview on 2/1/23 with the Facility Director revealed:</p> <p>-The agency policy is no cellphones, laptops or personal electronics are allowed for the clients.</p> <p>-Client A4 was admitted to program with electronics as he was already enrolled in online schooling.</p> <p>-"I had just left the group home and there were no issues with any of the clients."</p> <p>-Received a call from staff #1 regarding the</p>	V 112		

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V 112	<p>Continued From page 5</p> <p>behavior of FC #3 and informed to call the police. -Agency policy is to seek and obtain police assistance when behaviors become dangerous to other clients in the home, staff or themselves. -FC #3 was transported by the police to the local hospital to be assessed. -Was informed FC #3 assaulted the hospital staff and had resulted in him being charged and going to jail. -He contacted FC #3's guardian to make them aware FC #3 was being discharged from the facility. -FC #3's behaviors were escalated towards other clients and staff. -FC #3 started taking Depakote when prescribed during an assessment at the hospital on 10-28-22. -He was responsible for updates to the PC Plan. -Due to staff -Confirmed there were no update of strategies to FC #3's treatment plan.</p> <p>Review on 2/10/23 of the Plan of Protection dated 2/1/23 and signed by the Facility Coordinator (Facility Director) revealed: -"What will you immediately do to correct the above rule violation in order to protect clients from further risk or additional harm? Don't mix different populations, monitor behaviors more closely, provide additional staffing when combining groups and ensure staffing aware of populations behaviors." -"Describe your plans to make sure the above happens. Ensure staff aware of behavior plans, account for items that may cause disruptions, staff closely monitor all interactions and staff aware of de-escalation techniques."</p> <p>FC #3's diagnoses included: Mild Intellectual Disability and Attention Deficit Hyperactivity</p>	V 112		

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V 112	<p>Continued From page 6</p> <p>Disorder- Combined Type. FC #3 had 5 incidents of physical aggression in attacking peers and staff since 10/12/22. These attacks included biting and property destruction. The police were called to assist during these incidents. The last attack occurred on 1/15/2023 in which FC #3 attacked Client A4, biting him and trying to push his eyes out. Client A4 was evaluated at the ER. No strategies were developed and implemented to address FC #3's continued physical aggression and property destruction on his peers and staff.</p> <p>This deficiency constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days. An administrative penalty of \$2,000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.</p>	V 112		
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</p>	V 289		

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V 289	<p>Continued From page 7</p> <p>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> <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</p>	V 289		

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V 289	<p>Continued From page 8</p> <p>(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 reviews and interview, the facility failed to operate within its scope of licensure affecting one former client (Former Client #3). The findings are:</p> <p>Review on 2/1/23 of Former Client #3's record revealed:</p> <ul style="list-style-type: none"> - Age 17. -Admission date of 9/7/22. -Discharge date of 1/15/23. -Diagnoses of Mild Intellectual Disability and Attention Deficit Hyperactivity Disorder- Combined Type. -There was no evidence of a waiver request on file to admit FC #3 because of his age. <p>Interview on 2/1/23 with the Facility Director revealed:</p> <ul style="list-style-type: none"> -He confirmed Former Client #3 was 17 years old. -He had thought the waiver process had been completed. -Confirmed the facility failed to operate within its scope of licensure. 	V 289		