

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-436	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/16/2023
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NAME OF PROVIDER OR SUPPLIER ASHEVILLE DETOX CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 25 CHOCTAW STREET ASHEVILLE, NC 28801
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed March 16, 2023. The complaint was substantiated (Intake # NC00197685). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .3100 Nonhospital Medical Detoxification for Individuals Who are Substance Abusers.</p> <p>The facility is licensed for 16 and has a current census of 14 clients. The survey sample consisted of audits of 3 current clients and 1 former client.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to conduct fire and disaster drills quarterly for each shift. The findings are:</p>	V 114	<p>RECEIVED</p> <p>MAR 28 2023</p> <p>DHSR-MH Licensure Sect</p>	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

[Redacted Signature]

TITLE

D00

(X6) DATE

3-23-23

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V 114	Continued From page 1 Review on 3/14/23 of the facility's fire and disaster drill logs from July 2022 (when facility opened) to December 2022 revealed: -No documentation of fire drills for: -July through September 2022, 2nd and 3rd shifts; a drill was conducted at 11:17, however no a.m. or p.m. was documented. -October through December 2022, 1st and 3rd shifts; a drill was conducted at 12:30, however no a.m. or p.m. was documented. -No documentation of disaster drills for: -Any of the quarters reviewed. Interview on 3/14/23 with the Director of Operations revealed: -There were 3 shifts - 7:30 a.m. - 4:00 p.m., 3:30 p.m. - 12:00 a.m. and 11:30 p.m. - 8:00 a.m. -He was not aware fire and disaster drills needed to be conducted each quarter on each shift. -He would ensure this requirement was met in the future.	V 114		
V 115	27G .0208 Client Services 10A NCAC 27G .0208 CLIENT SERVICES (a) Facilities that provide activities for clients shall assure that: (1) space and supervision is provided to ensure the safety and welfare of the clients; (2) activities are suitable for the ages, interests, and treatment/habilitation needs of the clients served; and (3) clients participate in planning or determining activities. (h) Facilities or programs designated or described in these Rules as "24-hour" shall make services available 24 hours a day, every day in the year.	V 115		

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V 115	<p>Continued From page 2</p> <p>unless otherwise specified in the rule.</p> <p>(c) Facilities that serve or prepare meals for clients shall ensure that the meals are nutritious.</p> <p>(d) When clients who have a physical handicap are transported, the vehicle shall be equipped with secure adaptive equipment.</p> <p>(e) When two or more preschool children who require special assistance with boarding or riding in a vehicle are transported in the same vehicle, there shall be one adult, other than the driver, to assist in supervision of the children.</p> <p>This Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to provide supervision to ensure the safety and welfare of 1 of 1 former client (FC #4) audited. The findings are:</p> <p>Review on 3/14/23 of FC #4's record revealed: -Admitted 10/24/22; Discharged 10/31/22. -Age 18 years old. -Diagnoses of Sedative, Hypnotic, or Anxiolytic Use Disorder, severe, Generalized Anxiety Disorder, Major Depressive Disorder, recurrent episode, severe, Hallucinogen Abuse with other Hallucinogen-Induced Disorder, Alcohol Use Disorder, mild, Cannabis Use Disorder, severe, and Opioid Use Disorder, severe. -10/27/22 - "Behavioral Contract" signed by client and Director of Operations - "...Additional Notes: broke window seal and opened window to access the roof during the middle of the night." -10/28/22 - Psychiatrist note - "The patient (FC</p>	V 115		
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V 115	<p>Continued From page 3</p> <p>#4) was asked about breaking out of his window and going onto the roof...He states he was not trying to kill himself and knew what he was doing the entire time. He states he didn't know why he did it, and knows that he should not have...."</p> <p>"Rounds" were documented every 30 minutes by Former Staff (FS) #4, Behavior Health Technician (BHT) that FC #4 was "sleeping."</p> <p>-Nursing rounds were documented at 12:00 a.m. and 4:00 a.m. that FC #4 was observed in his bedroom.</p> <p>Interview attempt on 3/16/22 with FC #4 was unsuccessful.</p> <p>Observation on 3/14/23 at 2:20 p.m. with Staff #1 revealed:</p> <ul style="list-style-type: none"> -FC #4's bedroom while he was at the facility. -The bed he slept in was next to a window that led to a small roof that was the overhang for the patio below. -The window would not open as small metal tabs were observed on the outside of the window to ensure it stayed closed. -If the window opened it would be possible to step right outside of it onto the small roof. <p>Review on 3/15/23 of "Notes" dated 11/2/22 by Staff #2 regarding FS #4 revealed:</p> <p>"On October 27, 2022, I had a conversation with employee about sleeping on the job, correctly checking on clients during rounds...After reviewing camera footage I noticed employee slept for hours at the reception desk with the lights turned off...I watched, via camera, employee sit in the same spot while rounds were logged as completed showing that he did not physically get up to lay eyes on clients...."</p> <p>"On 12/2 (2022) [FS #4] and I spoke about sleeping on shift the night/morning of 12/2</p>	V 115		

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V 115	<p>Continued From page 4</p> <p>12:00am-8:00am. A client saw him sleeping when he approached him...[FS #4] was informed that this is his last and final warning...."</p> <p>-12/7/22 - "One of the members on the nursing staff informed me [FS #4] is usually asleep by the time she comes into work...a client informed me that [FS #4] was sleeping in the tech [technician] office the first three nights he was in detox...."</p> <p>Review on 3/15/23 of an incident report regarding FS #4 dated 1/25/23 revealed: -"Description of the Incident: Staff member was caught sleeping during his shift...Action Taken:...management decided to terminate employee...Follow Up/Next Steps: Employee [FS #4] was terminated on 1/25/23...."</p> <p>Interview on 3/15/23 with Staff #2 revealed: -Responsible to supervise 2nd and 3rd shift BHT's. -Had many conversations with FS #4 for sleeping during his shift, not doing rounds correctly and not laying eyes on the clients. -FS #4 sleeping on his shift was "sporadic" as after conversations he would do "very well." -After several verbal warnings, him being written up for this and not completing other duties properly, he was terminated.</p> <p>Interview on 3/15/23 with the Director of Operations revealed: -It was brought to his attention on 10/27/22 at approximately 2:00 p.m. by another client that FC #4's window was open. -After further investigation FC #4 stated he was on the roof of the patio just outside of his bedroom window. -FC #4 said he just sat there for about 15-20 minutes. -FC #4 said he was only on the patio roof and that</p>	V 115		
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V 115	Continued From page 5 he didn't go all the way up to the top of the facility. -This was when he and FC #4 completed the "Behavioral Contract." -The BHT's were to do "Rounds" every 30 minutes and were to conduct visual checks on clients at that time. -FS #4 was terminated for sleeping on his shift. -He went over policies and procedures with all BHT staff on all shifts about expectations during "Rounds." -He did not document this training or take attendance of the BHT staff who were present. -He now had all new 3rd shift staff and he and Staff #2 were doing spot checks every 2-3 weeks to ensure BHT's were awake during 3rd shift.	V 115		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on record review and interview the facility failed to complete Health Care Personnel Registry (HCPR) checks prior to hire for 1 of 3 audited staff (Staff #1). The findings are:	V 131		

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V 131	Continued From page 6 Review on 3/16//23 of Staff #1's personnel record revealed: -Hire date 7/12/22, title Behavior Health Technician. -HCPR check dated 7/13/22. Interview on 3/16/23 with the Director of Operations revealed: -Human Resources was responsible to conduct HCPR checks. -He would notify them and ensure this was corrected.	V 131		
V 133	G.S. 122C-80 Criminal History Record Check G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT. (a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter. (b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record	V 133		

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V 133	<p>Continued From page 7</p> <p>check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider.</p>	V 133		

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V 133	<p>Continued From page 8</p> <p>All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p> <ol style="list-style-type: none"> (1) The level and seriousness of the crime. (2) The date of the crime. (3) The age of the person at the time of the conviction. (4) The circumstances surrounding the commission of the crime, if known. (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled. (6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed. (7) The subsequent commission by the person of a relevant offense. <p>The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith,</p>	V 133		
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V 133	Continued From page 9 complies with this section shall be immune from civil liability for: (1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual. (2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section. (e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public	V 133		

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V 133	<p>Continued From page 10</p> <p>Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p> <p>(1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.</p> <p>(2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p>	V 133		

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V 133	<p>Continued From page 11</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to request within 5 days of making the conditional offer of employment a state criminal background check and to conduct a national criminal background check with the applicant's fingerprints when the applicant was a resident of this State for less than five years for 3 of 3 audited staff (Staff #1, Staff #2 and Counselor #1). The findings are:</p> <p>Review on 3/16//23 of Staff #1's personnel record revealed: -Hire date 7/12/22, title Behavior Health Technician (BHT). -Criminal history check dated 7/24/22 (12 days after hire). -Lived in another state within the last 5 years and no fingerprint check was completed.</p> <p>Review on 3/16/23 of Staff #2's personnel record revealed: -Hire date 7/11/22, title BHT Supervisor. -Criminal history check dated 7/7/22. -Lived in another state within the last 5 years and no fingerprint check was completed.</p> <p>Review on 3/16/23 of Counselor #1's personnel record revealed: -Hire date 7/11/22, title Primary Counselor. -Criminal history check dated 6/26/22. -Lived in another state within the last 5 years and no fingerprint check was completed.</p> <p>Interview on 3/16/23 with the Director of Operations revealed: -Human Resources was responsible to conduct criminal background checks.</p>	V 133		

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V 133	Continued From page 12 -He would notify them and ensure this was corrected.	V 133		

27G .0207 Emergency Plans and Supplies

- Indicate what measures will be put in place to **correct** the deficient area of practice (i.e. changes in policy and procedure, staff training, changes in staffing patterns, etc.). **Procedure for emergency drills has changed to meet standard of quarterly fire and disaster drills for each shift corrected 03/22/23.**
- Indicate what measures will be put in place to **prevent** the problem from occurring again. **Director of Operations has been assigned a QMPI form with checklist to follow each month to ensure the proper amount of fire and disaster drills are assigned to meet the quarterly minimum.**
- Indicate **who will monitor** the situation to ensure it will not occur again. **Chief Compliance officer will monitor QMPI report submissions.**
- Indicate **how often** the monitoring will take place. **Chief Compliance officer will monitor QMPI report submissions monthly.**

27G .0208 Client Services

- Indicate what measures will be put in place to **correct** the deficient area of practice (i.e. changes in policy and procedure, staff training, changes in staffing patterns, etc.). **From incident we have terminated employee and documented incident reports and employee write ups. Also, from incident we have conducted a retraining session with all staff. During this training standard of rounds were reviewed to ensure proper operations and client safety. Policy on sleeping during third shift has been reviewed by necessary staff members. We have implemented check list duties to staff to complete during shift. We also have reinforced windows so they cannot be opened now. All items corrected 03/16/23.**
- Indicate what measures will be put in place to **prevent** the problem from occurring again. **Windows have been reinforced to prevent destruction of property. We have implemented check list duties to prevent staff from being unproductive during shift.**
- Indicate **who will monitor** the situation to ensure it will not occur again. **Director of Operations will monitor staff performance and client safety.**
- Indicate **how often** the monitoring will take place. **Director of Operations will monitor daily.**

G.S. 131E-256 (D2) HCPR - Prior Employment Verification

- Indicate what measures will be put in place to **correct** the deficient area of practice (i.e. changes in policy and procedure, staff training, changes in staffing patterns, etc.). **Procedure for prior employment verification has been changed implemented HCPR checks prior to hire date. Corrected 03/22/23.**
- Indicate what measures will be put in place to **prevent** the problem from occurring again. **HR employment checklist has been changed to include HCPR check prior to employment.**
- Indicate **who will monitor** the situation to ensure it will not occur again. **HR director will monitor the performance of this procedure to ensure HCPR are done before employment decision is made.**
- Indicate **how often** the monitoring will take place. **Hiring process is monitored each month on QMPI leadership submissions.**

G.S. 122C-80 Criminal History Record Check

- Indicate what measures will be put in place to **correct** the deficient area of practice (i.e. changes in policy and procedure, staff training, changes in staffing patterns, etc.). **Prior to employment candidates are now required to fill out an agency form listing residency for past 5 years, any applicants with out of state history will be sent for fingerprint checks included in the background check hiring process. Process corrected 03/23/23.**

- Indicate what measures will be put in place to ***prevent*** the problem from occurring again. **Resident history form implemented for all employment candidates moving forward.**
- Indicate ***who will monitor*** the situation to ensure it will not occur again. **HR director will monitor correct process for candidate hiring.**
- Indicate ***how often*** the monitoring will take place. **QMPI hiring submission will be monitored monthly.**