STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL034-389	A. BUILDING: _____ B. WING _____	R 04/05/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ELEVATED FAMILY SERVICES, LLC	128 LAURA AVENUE WINSTON SALEM, NC 27105

(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	INITIAL COMMENTS An annual, complaint and follow up survey was completed on 4/5/23. The complaint was unsubstantiated (intake #NC00198125). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents. This facility is licensed for 4 and currently has a census of 4. The survey sample consisted of audits of 2 current clients and 1 former client.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to ensure fire drills were completed quarterly on each shift. The findings are:	V 114		

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V 114	Continued From page 1 Review on 4/5/23 of the facility's fire drill log revealed: -No documentation drills were completed during the quarter of April 2022 - June 2022 on 3rd shift; -No documentation drills were completed during the quarter of July 2022 - September 2022 on 1st of 3rd shifts; -No documentation drills were completed during the quarter of October 2022 - December 2022 on 2nd or 3rd shifts. Interview on 4/5/23 with the Chief Executive Officer/Director/Qualified Professional revealed: -Aware that fire drills were required to be completed quarterly on each shift; -A schedule of when to complete fire drills was located on the facility calendar and she had depended on staff to complete drills as scheduled; -Not aware that staff had not completed the fire drills as required. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 114		
V 296	27G .1704 Residential Tx. Child/Adol - Min. Staffing 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS (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. (b) 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	V 296		

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V 296	Continued From page 2 one, two, three or four children or adolescents; (2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and (3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents. (c) The minimum number of direct care staff during child or adolescent sleep hours is as follows: (1) two direct care staff shall be present and one shall be awake for one through four children or adolescents; (2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and (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. (d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this 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. (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.	V 296		

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V 296	Continued From page 3 This Rule is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure two direct care staff were present, the minimum number required, when clients were present in the facility, for 2 of 2 audited clients (#1 and #2). The findings are: Review on 4/5/23 of client #1's record revealed: -Admission date of 2/17/23; -Age of 17; -Diagnoses included: Conduct Disorder and Oppositional Defiant Disorder. Review on 4/5/23 of client #2's record revealed: -Admission date of 11/21/22; -Age of 16; -Diagnoses included: Generalized Anxiety Disorder and Attention Deficit Hyperactivity Disorder; -Admission assessment dated 11/15/22 included "...defiant behaviors." Interview on 4/5/23 with client #2 revealed: -Usually 2 staff at the facility; -Schools were closed for spring break and "nobody wants to work." Observations of the facility on 4/5/23 from approximately 9:00am - 11:30am revealed the clients were at the facility with only 1 staff (the Chief Executive Officer/Director/ Qualified Professional (CEO/D/QP) present. Interview on 4/5/23 with the CEO/D/QP revealed: -"I'm the only staff here (facility);" -Aware that 2 staff were required to be present when clients were in the facility; -Already short staffed and then had to recently	V 296		

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V 296	Continued From page 4 terminate employment of a paraprofessional; -Schools were closed for spring break and she was unable to find staff that were willing to work.	V 296		