

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-872	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/20/2023
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NAME OF PROVIDER OR SUPPLIER MR BILL'S PLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 8612 NATIONS FORD ROAD CHARLOTTE, NC 28217
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V 000	<p>INITIAL COMMENTS</p> <p>An annual, complaint and follow up was completed on 4-20-23. The complaint was unsubstantiated (#NC00199236). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G 1700 Residential Treatment Staff Secure for Children or Adolescents.</p> <p>This facility is licensed for four and currently has a census of four. The survey sample consisted of audits of three current clients.</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 interviews the facility failed to ensure that disaster drills were completed at least on each shift quarter. The</p>	V 114		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 114	Continued From page 1 findings are: Attempted review on 4-17-23 of facility disaster drills revealed: -No disaster drills had been completed for the first quarter on 2023 and the third and fourth quarter of 2022. Interview on 4-17-23 with Client #2 revealed: -They have meetings about disaster drills, but don't practice them. Interview on 4-11-23 with the Director revealed: -They have meetings and discuss what to do in situations. -In the future they would practice scenarios.	V 114		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented. (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.	V 536		

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V 536	<p>Continued From page 2</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 wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). 	V 536		

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V 536	<p>Continued From page 3</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 Qualifications 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 a passing grade on testing in an instructor training program.</p> <p>(3) 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>(4) 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 (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing,</p>	V 536		

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V 536	<p>Continued From page 4</p> <p>reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) 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 outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) 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>(l) Documentation shall be the same preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews one of</p>	V 536		

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V 536	<p>Continued From page 5</p> <p>one staff failed to ensure competencies in training on alternatives to restrictive interventions. The findings are:</p> <p>Review on 4-17-23 of Client #1's record revealed: -Admitted 8-23-21. -16 years old. -Diagnoses include: Attention Deficit/Hyperactivity Disorder, Opposition Defiant Disorder, Disruptive Mood Dysregulation Disorder, Specific Learning Impairment specifically in reading, writing and mathematics. -7-12-22 psychological evaluation:... lies frequently, very manipulative, steals ...temper outbursts, reacts by cutting ...blames others, refusing to accept responsibility for actions ...verbal and physical aggression ...needs reminders for personal hygiene ...recommended that she continues to reside in level III for at least another year ... -Goals include: : demonstrate an improvement of attitude as evidenced by; expressing self without arguing, decrease behavioral outburst.</p> <p>Review on 4-17-23 of Staff #1's record revealed: -Hire date on 10-4-22. -Trainings include North Carolina Interventions (NCI) Plus 10-10-22 and 2-28-23.</p> <p>Interview on 4-17-23 with Client #1 revealed: -Client #1 was upset with another client. -"She called me the biggest person in the house." -That "triggered" Client #1 and she attacked Staff #1.</p> <p>Interview on 4-11-23 with Client #2 revealed: -Client #1 had an altercation with Staff #1. -Client #1 cursed at Staff #2 and started</p>	V 536		

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V 536	<p>Continued From page 6</p> <p>hitting her. -Staff #1 was always yelling at the clients when she got mad.</p> <p>Interview on 4-17-23 with Client #3 revealed: -Client #1 told Staff #1 to "stop acting like you are the biggest in the house." -Then Staff #1 said; "Lord knows you are the biggest in the house." -Client #1 then punched and Staff #1 started fighting back. -Staff #1 would curse at them.</p> <p>Interview on 4-11-23 with Staff #1 revealed: -The clients were upset and she was trying to de-escalate them but "that wasn't happening." -She told Client #1 that "she should be the bigger person." -She had been told that Client #1 thought she was referring to her weight, but that was not the case.</p> <p>Interview on 4-11-23 with the Director revealed: -If Staff #1 came back to the facility, she would receive a lot more training on de-escalation. -Staff #1 has already retaken NCI plus.</p>	V 536		
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 (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</p>	V 537		

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V 537	<p>Continued From page 7</p> <p>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 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 	V 537		

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V 537	<p>Continued From page 8</p> <p>incremental steps in an intervention);</p> <p>(4) strategies for the safe implementation of restrictive interventions;</p> <p>(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;</p> <p>(6) prohibited procedures;</p> <p>(7) debriefing strategies, including their 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</p>	V 537		

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V 537	<p>Continued From page 9</p> <p>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> <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>	V 537		

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V 537	<p>Continued From page 10</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 preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews Staff #1 failed to demonstrate competencies when performing restrictive interventions. The findings are:</p> <p>Review on 4-17-23 of Client #1's record revealed: -Admitted 8-23-21. -16 years old. -Diagnoses include: Attention Deficit/Hyperactivity Disorder, Opposition Defiant Disorder, Disruptive Mood Dysregulation Disorder, Specific Learning Impairment specifically in reading, writing and mathematics. -7-12-22 psychological evaluation:... lies frequently, very manipulative, steals ...temper outbursts, reacts by cutting ...blames others, refusing to accept responsibility for actions ...verbal and physical aggression ...needs reminders for personal hygiene ...recommended that she continues to reside in level III for at least another year ...</p>	V 537		

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V 537	<p>Continued From page 11</p> <p>-Goals include: : demonstrate an improvement of attitude as evidenced by; expressing self without arguing, decrease behavioral outburst.</p> <p>Review on 4-17-23 of Staff #1's record revealed: -Hire date on 10-4-22. -Trainings include North Carolina Interventions (NCI) Plus 10-10-22 and 2-28-23.</p> <p>Interview on 4-17-23 with Client #1 revealed: -She and Staff #1 started fighting. -Staff #1 was trying to restrain her and punched her in the eye.</p> <p>Interview on 4-17-23 with Staff #1 revealed: -Client #1 ran up to her and started punching her. -"I tried to grab her wrist. I pushed he back to the wall and she slid down." -"I had her by her shoulders." -"My legs were spread apart (standing over Client #1) and so were my hands. I was trying to secure her in that one area." -"I was not able to hold her. I had her by her shoulders." -She said she never did an NCI restraint and that she would be taking more classes for restraints.</p> <p>Interview on 4-20-23 with the Director revealed: -Staff #1 had not worked at the facility since the incident. -She was unsure if Staff #1 would be coming back. -If Staff #1 did return, she would have to have more training in working with the clients in a therapeutic manner.</p>	V 537		