

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL059-086</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R-C 03/14/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>OLD LINVILLE GROUP HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>145 OLD LINVILLE ROAD MARION, NC 28752</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	D PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint and follow up survey was completed on March 14, 2023. The complaints were substantiated (intake #NC 00198919 and #NC 00198944). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 1300 Residential Treatment for Children or Adolescents.</p> <p>This facility is licensed for 4 and currently has a census of 4. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 109	<p><b>27G .0203 Privileging/Training Professionals</b></p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> <li>(1) technical knowledge;</li> <li>(2) cultural awareness;</li> <li>(3) analytical skills;</li> <li>(4) decision-making;</li> <li>(5) interpersonal skills;</li> <li>(6) communication skills; and</li> <li>(7) clinical skills.</li> </ol> <p>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based</p>	V 109		

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

TITLE Administrator

(X6) DATE 4/5/2023

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V 109	<p>Continued From page 1</p> <p>employment system in the State Plan for MH/DD/SAS.</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.</p> <p>(g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure that 1 of 2 audited Qualified Professionals (QP) (the Clinician) demonstrated the knowledge, skills, and abilities required by the population served. The findings are:</p> <p>Review on 3-13-23 of Client #2's record revealed: -Date of Admission: 1-3-23. -Diagnoses: Post Traumatic Stress Disorder; Attention Deficit Hyperactivity Disorder, Combined Type; Conduct Disorder, Adolescent. -Age:16</p> <p>Review on 3-13-23 of the Clinician's record revealed: -Date of Hire: 8-1-22. -Job Title: Clinician.</p> <p>Review on 3-13-23 of the Clinician's Professional Services Contract dated 8-1-22 revealed: - "...professional services to include but not</p>	V 109		

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V 109	<p>Continued From page 2</p> <p>limited to; Perform duties in compliance with service definition of Out Patient Therapy Plus and Level III services ..."</p> <p>The Clinician failed to demonstrate competency by the following: -She provided nicotine to a minor (Client #2) and allowed him to smoke during a clinical session.</p> <p>Review on 3-13-23 of the Clear Sky Behavioral (CSB)/Licensee's Formal Counseling of the Clinician revealed: -The Clinician allowed a client to smoke in her presence. -This action took place during a clinical session with the client. - "This intervention was not part of the CSB program nor was it consistent with CSB policy ..."</p> <p>Interview on 3-13-23 with the Clinician revealed: -Client #2 "was having a bad day at adult high school ...he was agitated and frustrated ..." -Client #2 informed her that "his Nana told him his Mom died ...he said he need to smoke ..." -She had cigarettes in the console of her car, and she let him smoke. -Client #2 then calmed down.</p> <p>Interview on 3-13-23 with the Behavioral Health Director/QP revealed: -CSB did not approve of the Clinician's decision to allow Client #2 to smoke a cigarette. -The Clinician was counseled and written up as a corrective action. -The Clinician was directed to take an appropriate course based on her supervising clinician's recommendation and a timeline was given. -The Clinician was directed to not make any of these types of errors again.</p>	V 109	<p>Clear Sky Behavioral, LLC was notified by [REDACTED] Licensed Therapist of this decision. She was then advised to self-report what happened to Cherokee County DSS. Once it was reported a safety plan was put into place between DSS and CSB Administration. CSB Administrator then reached out to Healthcare Registry representatives to discuss next steps. We were advised that licensed personnel should be reported to the Board she is credentialed through. We then filed a formal complaint with the Board of Counseling in NC. CSB continued to look for reporting avenues to ensure we remained in compliance. CSB advised Ms. [REDACTED] that it must be reported to her supervising counselor. CSB also directed Ms. [REDACTED] to complete a block of continuing education in Ethics as part of her resolution. Ms. [REDACTED] knew she had made an error in judgment and reported it right away. As part of her counseling and safety planning, she has agreed that this mistake will not happen again. This action has been completed and filed in the employee chart for future reference.</p>	4/5/2023

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V 109	Continued From page 3  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 109		