

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL059-056</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>04/13/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>LUNSFORD HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>207 LAKE VIEW DRIVE MARION, NC 28752</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on April 13, 2022. The complaint was unsubstantiated (NC# 199609). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living.</p> <p>This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 108	<p><b>27G .0202 (F-I) Personnel Requirements</b></p> <p><b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b></p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <ol style="list-style-type: none"> <li>(1) general organizational orientation;</li> <li>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</li> <li>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</li> <li>(4) training in infectious diseases and bloodborne pathogens.</li> </ol> <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross,</p>	V 108	<p>V108</p> <p>Back-up caregiver policy has been updated to reflect that AFL staff must request eligible back up staffing when going out of town. All AFL policy manuals will be updated with the correct policy, located in each home. QP will ensure that back up staffing chosen has all necessary trainings prior to working with members. QP will monitor AFLs on a monthly basis with surprise visits to ensure that proper protocols are being followed.</p> <p style="text-align: center;"><b>DHSR - Mental Health</b></p> <p style="text-align: center;"><b>MAY 16 2023</b></p> <p style="text-align: center;"><b>Lic. &amp; Cert. Section</b></p>	5/10/2023

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

TITLE  
*Aimee Smith, CEO*

(X6) DATE

**5/10/2023**

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V 108	<p>Continued From page 1</p> <p>the American Heart Association or their equivalence for relieving airway obstruction.</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure 1 of 3 audited staff, (Staff #1) received training to meet the needs of the MH/DD/SA needs of the clients. The findings are:</p> <p>Review on 4/12/23 of Client #1's record revealed: -Admission date: 7/19/17 -Diagnoses: Post Traumatic Stress Disorder, Unspecified Mood Disorder (D/O), Intermittent Explosive D/O, Morbid Obesity, Obstructive Sleep Apnea, Schizophrenia, Mild Intellectual and Developmental Disabilities, Hyperlipidemia, Bipolar D/O, Pre-Diabetes, Urinary Tract Infection, Tobacco use, Insomnia, and Chronic Obstructive Pulmonary D/O.</p> <p>Review on 4/12/23 of Client #3's record revealed: -Admission date: 1/1/12 -Diagnoses: Severe Intellectual and Developmental Disabilities, Encounter for Observation for other suspected diseases and conditions ruled out, Other generalized Epilepsy and epileptic syndromes not intractable w/out status epilepticus, Autistic D/O, urinary incontinence, full incontinence of feces, obesity unspecified, abnormal coagulation and</p>	V 108		

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V 108	Continued From page 2  constipation.  Review on 4/12/23 of Staff #1's record revealed: -Client specific trainings noted for Client #2 only.  Interview on 4/12/23 with Staff #1 revealed: -agreed to help AFL provider #1 out with her clients while we she was at the beach; -gave nighttime medication to Client #1 on 4/11/23; -was Client #2's one on one day support services provider.	V 108		
V 138	27G .0404 (A-E) Operations During Licensed Period  10A NCAC 27G .0404 OPERATIONS DURING LICENSED PERIOD (a) An initial license shall be valid for a period not to exceed 15 months from the date on which the license is issued. Each license shall be renewed annually thereafter and shall expire at the end of the calendar year. (b) For all facilities providing periodic and day/night services, the license shall be posted in a prominent location accessible to public view within the licensed premises. (c) For 24-hour facilities, the license shall be available for review upon request. (d) For residential facilities, the DHSR complaint hotline number shall be posted in a public place in each facility. (e) A facility shall accept no more clients than the number for which it is licensed.	V 138	V138  All licensed homes must attend mandatory yearly training. Training consists of the rules and procedures that AFLs must follow regarding their licensed home. This includes but is not limited to: how many members they can serve, medicaid fraud, nutrition, drills, expenditures etc.  CCHC has also updated AFL contracts with AFL employees acknowledging their responsibilities and standards that they must follow when being a licensed home. This includes how many members they are allowed to serve.  QP will monitor AFL on a monthly basis to ensure that no other members are living in the home.  Compliance Specialist will conduct periodic unannounced audits of licensed homes to ensure protocols are being followed.	5/10/2023

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V 138	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on interview, record review and observation, the facility to ensure that it would serve no more than the number for which it was licensed. The findings are:</p> <p>Review on 4/11/23 of the License issued by the North Carolina Division of Health Service Regulation (DHSR) effective January 1, 2023 revealed: -the facility had a licensed capacity of 3 clients.</p> <p>Observation and interview with Former Staff#3 (FS#3) on 4/11/23 at 3:24PM of the facility revealed: -an adult male was present on the front porch of the facility; -this was his client (Non-Audited Client #4 (NAC #4)); -he was not currently licensed with DHSR; -"he helped [AFL Provider #1] ....but did not live here;" -he was house sitting for AFL Provider #1 while she was at the beach; -AFL Provider #1 would return to the facility on Friday (4/14/23); -"[Staff #1] was taking care of AFL provider #1's clients;" -construction workers were present at the facility working on the roof.</p> <p>Observation on 4/13/23 at 11:30AM of the facility revealed: -three bedrooms in the facility for the three current clients; -a twin sized roll-away bed in AFL Provider #1's bedroom that was folded up and had sheets on it.</p> <p>Review on 4/12/23 of FS #3's record revealed:</p>	V 138		

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V 138	<p>Continued From page 4</p> <p>-Hire Date: 9/21/15; -Position: AFL provider; -Date of Separation: 10/25/21, not eligible for re-hire.</p> <p>Review on 4/12/23 of Staff #1's record revealed: -Hire Date: 11/20/2016; -Position: Direct Support Professional (DSP)</p> <p>Review on 4/12/23 of AFL Provider #1's record revealed: -Hire Date: 1/1/12; -Position: AFL provider</p> <p>Interview on 4/12/23 with Client #1 revealed: -she lived with momma (AFL Provider #1) and daddy (FS #3), Client #2 and Client# 3; -"Last night [Client#2] signed ...where's momma?" - "I told her momma's driving tonight ...she got a phone call that the state inspector showed up ...she came back;" -"[Staff #1] took care of us only one day .....momma came home after I went to sleep." -she got her nighttime medication from Staff #1;</p> <p>Interview on 4/11/23 with a community advocate revealed; -provided day support services for Client #3 in the facility through another agency; -a few months ago, Client #3 was changed to a different day program; -observed a cot in the facility for NAC #4; -"[NAC#4] deserved a bedroom, not just a cot;" -FS #3 and NAC #4 were always present at the facility in the mornings, evenings, and observed NAC #4 and FS #3 in the facility on weekends when she cleaned for AFL provider #1.</p> <p>Interview on 4/12/23 with Staff #1 revealed:</p>	V 138		

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V 138	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-was a direct support professional and an AFL provider;</li> <li>-was Client #2's one on one staff for individual day support services;</li> <li>-agreed to help AFL provider #1 out with her clients while we she was at the beach;</li> <li>-she brought Client #2 home to the facility on 4/11/23 around 4:00pm and FS #3 and NAC #4 were present at the facility;</li> <li>-other day support staff brought Client #1, and #2 to the facility ( on 4/11/23) and FS#3 and NAC #4 later left the facility;</li> <li>-she didn't know how long AFL provider #1 would be gone, "she left yesterday ... (4/11/23);"</li> <li>-AFL provider #1 returned to the facility on 4/11/23 between 7pm and 8pm;</li> <li>-she reported AFL provider #1 took good care of her clients and "hasn't had a break;"</li> <li>-FS #3 and NAC #4 are at the house a lot, "but they don't live there;"</li> <li>-did not tell the licensee about providing care for AFL provider #1's clients.</li> </ul> <p>Interview on 4/13/23 with AFL Provider #1 revealed:</p> <ul style="list-style-type: none"> <li>-"[FS #3] is here a lot ...he is my boyfriend."</li> <li>-denied that FS #3 and NAC #4 lived with her, "[FS #3] has two houses;"</li> <li>-did not tell the licensee she was going out of town to the beach;</li> <li>-did not leave her clients longer than 24 hours because she "didn't have coverage;"</li> <li>-Staff #1 agreed to help her;</li> <li>-denied coming back to the facility on 4/11/23 because a surveyor showed up to the facility;</li> <li>- "[FS# 3] called and said that a surveyor was here;"</li> <li>-FS #3 helped her when she broke her leg and had surgery last year (2022);</li> <li>-NAC #4 had slept overnight in the facility before</li> </ul>	V 138		

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V 138	<p>Continued From page 6</p> <p>but it stopped when FS#3 got in trouble with his own licensing agency; -NAC #4 has rested on the roll-away bed during the day; -they all go out to eat together sometimes," ...[FS #3] doesn't run goals."</p> <p>Interview on 4/13/23 with the Qualified Professional revealed: -her home visits were scheduled at the AFL provider #1's home with the care coordinator; -FS #3 and NAC #4 were not present during her visits; -FS #3 was a natural support for AFL provider #1 but was not back-up staff, or employed by the licensee.</p>	V 138		