

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL042-087</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>05/26/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>FAMILY ADVANTAGE, LLC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>289 WADE ROAD</b> <b>SCOTLAND NECK, NC 27874</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on May 26, 2023. 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 4 and currently has a census of 4. The survey sample consisted of audits of 2 current clients and 1 former client.</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> <p>(1) general organizational orientation;</p> <p>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</p> <p>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</p> <p>(4) training in infectious diseases and bloodborne pathogens.</p> <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, the American Heart Association or their</p>	V 108		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 108	<p>Continued From page 1</p> <p>equivalence for relieving airway obstruction. (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 provide MH/DD/SA client specific trainings for 1 of 3 audited staff (The Compliance Director). The findings are:</p> <p>Review on 5/23/23 of the Compliance Director's record revealed:</p> <ul style="list-style-type: none"> <li>- No documentation of MH/DD/SA client specific trainings</li> </ul> <p>During interview on 5/23/23 the Compliance Director reported:</p> <ul style="list-style-type: none"> <li>- Her personnel record was at the Sister Facility</li> <li>- "If I go to Pleasant Hill (location of Sister Facility) to get my record I'm not coming back"</li> </ul>	V 108		
V 111	<p>27G .0205 (A-B) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not</p>	V 111		

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V 111	<p>Continued From page 2</p> <p>be limited to:</p> <ol style="list-style-type: none"> <li>(1) the client's presenting problem;</li> <li>(2) the client's needs and strengths;</li> <li>(3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission;</li> <li>(4) a pertinent social, family, and medical history; and</li> <li>(5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs.</li> </ol> <p>(b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter referred to as the "plan," strategies to address the client's presenting problem shall be documented.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to complete admission assessments for 2 of 2 audited current clients (#1 &amp; #2) and 1 of 1 former client (FC #8). The findings are:</p> <p>Record review on 5/23/23 of client #1's record revealed: - Admitted 4/18/23</p>	V 111		

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V 111	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>- Diagnoses of Posttraumatic Stress Disorder (PTSD), Attention Deficit/Hyperactivity Disorder (ADHD), combined presentation, moderate, Intermittent Explosive Disorder, child physical abuse and neglect child sexual abuse</li> <li>- No admission assessment</li> </ul> <p>Record review on 5/23/23 of client #2's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted 8/18/22</li> <li>- Diagnoses of Oppositional Defiant Disorder, ADHD, PTSD, Obsessive Compulsive Disorder (OCD), Insomnia, Anxiety, Depression, and prediabetic</li> <li>- No admission assessment</li> </ul> <p>Record review on 5/23/23 of FC #8's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted 1/19/23 and discharged 3/27/23</li> <li>- Diagnoses of Conduct Disorder, Disruptive Mood Dysregulation Disorder, PTSD, and child physical abuse</li> <li>- No admission assessment</li> </ul> <p>During interview on 5/23/23 the Associate Professional (AP) reported:</p> <ul style="list-style-type: none"> <li>- Did not recall if admission assessments were completed</li> </ul> <p>During interview on 5/24/23 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> <li>- The Mental Health Counselor was responsible for ensuring admission assessments were completed</li> </ul> <p>During interview on 5/25/23 the Director reported:</p> <ul style="list-style-type: none"> <li>- Admissions assessments were completed within the client's first week of being admitted</li> <li>- The Mental Health Counselor was responsible for completing admission</li> </ul>	V 111		

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V 111	Continued From page 4  assessments - Admission assessments for client #1, #2, and former client #8 were completed electronically - "Everything is electronic now"	V 111		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan  10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.	V 112		

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V 112	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure goals and strategies were developed to meet the needs of 1 of 2 audited current clients (#1). The findings are:</p> <p>Record review on 5/23/23 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted 4/18/23</li> <li>- Diagnoses of Posttraumatic Stress Disorder (PTSD), Attention Deficit/Hyperactivity Disorder (ADHD), combined presentation, moderate, Intermittent Explosive Disorder, child physical abuse and neglect child sexual abuse</li> <li>- Treatment plan dated 3/23/23 with no goals or strategies listed to address bedwetting</li> </ul> <p>During interview on 5/23/23 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- Staff woke client #1 at 12am to use the restroom daily</li> </ul> <p>During interview on 5/24/23 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> <li>- She was unaware of a toileting schedule for client #1</li> <li>- Client #1 loved to drink water</li> <li>- Staff encouraged client #1 to minimize the amount of water he consumed after 7pm to prevent frequent urination and bedwetting at night</li> <li>- Had no knowledge of staff waking client #1 up to use the restroom at night</li> </ul>	V 112		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>(1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on observations, record review and interviews the facility failed to administer medications on the written order of a physician for 2 of 2 audited current clients (#1 &amp; #2). The facility also failed to ensure medications were</p>	V 118		

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V 118	<p>Continued From page 7</p> <p>available in the facility and that all the MAR was kept current affecting 1 of 2 audited current clients (#2). The findings are:</p> <p>A. Record review on 5/23/23 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted 4/18/23</li> <li>- Diagnoses of Posttraumatic Stress Disorder (PTSD), Attention Deficit/Hyperactivity Disorder (ADHD), combined presentation, moderate, Intermittent Explosive Disorder, child physical abuse and neglect child sexual abuse</li> <li>- No signed physician orders for the following medications: <ul style="list-style-type: none"> <li>- Fluoxetine HCL 10 milligram (mg) take 1 capsule (cap) by mouth (PO) everyday (depression)</li> <li>- Risperidone .25 mg take 1 tablet (tab) PO two times a day (BID) (mood/behavior)</li> <li>- Levothyroxine 88 microgram (mcg) take 1 tab PO every day except Sunday (thyroid)</li> </ul> </li> </ul> <p>Record review on 5/23/23 of client #2's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted 8/18/22</li> <li>- Diagnoses of Oppositional Defiant Disorder, ADHD, PTSD, Obsessive Compulsive Disorder (OCD), Insomnia, Anxiety, Depression, and prediabetic</li> <li>- No signed physician orders for the following medications: <ul style="list-style-type: none"> <li>- Vitamin D3 2,000 units take 1 cap PO every morning (supplement)</li> <li>- Guanfacine HCL 1 mg take 1 tag PO daily (hyperactivity)</li> <li>- Levetiracetam 500 mg take 1 tab PO BID (seizures)</li> </ul> </li> </ul> <p>During interview on 5/23/23 the Associate Professional (AP) reported:</p>	V 118		



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V 118	<p>Continued From page 8</p> <ul style="list-style-type: none"> <li>- Physician orders were put into their "system" once received</li> <li>- Physician orders should be kept in client records</li> </ul> <p>During interview on 5/24/23 of Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> <li>- Was not aware physician orders were no in client records</li> <li>- Spoke with Compliance Director about keeping physician orders in a separate notebook</li> </ul> <p>B. Review of client #2's March, April, and May 2023 MAR revealed:</p> <ul style="list-style-type: none"> <li>- Melatonin 5 mg take 1 tab PO every night at bedtime as needed (sleep)</li> <li>- Melatonin not administered in the months of March, April, and May of 2023</li> </ul> <p>Observation at 12:13pm on 5/23/23 of client #2's medication bin revealed:</p> <ul style="list-style-type: none"> <li>- Melatonin 5 mg was not present in the facility</li> </ul> <p>During interview on 5/23/23 the AP revealed:</p> <ul style="list-style-type: none"> <li>- Client #2's Melatonin was not in the facility</li> <li>- Did not recall why the medication was not in the facility</li> </ul> <p>During interview on 5/24/23 the QP revealed:</p> <ul style="list-style-type: none"> <li>- She was responsible for checking medications and MARs</li> <li>- She was aware the Melatonin was not in the facility</li> <li>- She noticed the missing medication on 5/22/23</li> <li>- She "immediately" notified the Compliance Director of the missing medication</li> <li>- Did not know how long the medication was missing</li> </ul>	V 118		

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V 118	<p>Continued From page 9</p> <p>C. Observation at 12:13pm on 5/23/23 of client #2's medication bin revealed:</p> <ul style="list-style-type: none"> <li>- Hydroxyzine Pam 100 mg take 1 cap PO every morning (anxiety/agitation) (8/1/23)</li> </ul> <p>Review of client #2's March, April, and May 2023 MARs revealed:</p> <ul style="list-style-type: none"> <li>- Hydroxyzine Pam 50 mg take 1 cap PO BID daily as needed (PRN) documented on each MAR</li> <li>- Hydroxyzine Pam 50 mg was documented as administered 1 day in April 2023</li> <li>- Hydroxyzine Pam 50 mg was documented as administered 14 days in May 2023</li> </ul> <p>During interview on 5/23/23 the AP revealed:</p> <ul style="list-style-type: none"> <li>- The Hydroxyzine Pam 50 mg should have been discarded</li> <li>- Discarded medications were sent back to the pharmacy</li> <li>- He could not recall why the medication was still in the facility</li> </ul>	V 118		
V 122	<p>27G .0209 (G) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(g) Medication education:</p> <p>(1) Each client started or maintained on a medication by an area program physician shall receive either oral or written education regarding the prescribed medication by the physician or their designee. In instances where the ability of the client to understand the education is questionable, a responsible person shall be provided either oral or written instructions on behalf of the client.</p> <p>(2) The medication education provided shall be sufficient to enable the client or other responsible</p>	V 122		

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V 122	<p>Continued From page 10</p> <p>person to make an informed consent, to safely administer the medication and to encourage compliance with the prescribed regimen. (3) The area program physician or designee shall document in the client record that education for the prescribed psychotropic medication was offered and either provided or declined. if provided, it shall be documented in what manner it was provided (either orally or written or both) and to whom (client or responsible person).</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 (The Compliance Director) had medication administration training. The findings are:</p> <p>Review on 5/23/23 of the Compliance Director's personnel record revealed:</p> <ul style="list-style-type: none"> <li>- No documentation for medication administration training</li> </ul> <p>During interview on 5/23/23 the Compliance Director reported:</p> <ul style="list-style-type: none"> <li>- She did not have a personnel record for trainings</li> <li>- She was the instructor for staff trainings</li> <li>- Her personnel record was at the Sister Facility</li> <li>- "If I go to Pleasant Hill (location of Sister Facility) to get my record I'm not coming back"</li> </ul>	V 122		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL</p>	V 131		

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V 131	<p>Continued From page 11</p> <p><b>REGISTRY</b> (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.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to provide a Health Care Personnel Registry (HCPR) check for 1 of 3 audited staff (The Compliance Director). The findings are:</p> <p>Review on 5/23/23 of the Compliance Director's record revealed:</p> <ul style="list-style-type: none"> <li>- No HCPR check</li> </ul> <p>During interview on 5/23/23 the Compliance Director reported:</p> <ul style="list-style-type: none"> <li>- Her HCPR check was completed</li> <li>- Her personnel record was at the Sister Facility</li> <li>- "If I go to Pleasant Hill (location of Sister Facility) to get my record I'm not coming back"</li> </ul>	V 131		
V 133	<p>G.S. 122C-80 Criminal History Record Check</p> <p><b>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</b> (a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health,</p>	V 133		

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V 133	Continued From page 12  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 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	V 133		

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V 133	<p>Continued From page 13</p> <p>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. 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"> <li>(1) The level and seriousness of the crime.</li> <li>(2) The date of the crime.</li> <li>(3) The age of the person at the time of the conviction.</li> <li>(4) The circumstances surrounding the commission of the crime, if known.</li> <li>(5) The nexus between the criminal conduct of the person and the job duties of the position to be</li> </ol>	V 133		

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V 133	<p>Continued From page 14</p> <p>filled.</p> <p>(6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed.</p> <p>(7) The subsequent commission by the person of a relevant offense.</p> <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, complies with this section shall be immune from civil liability for:</p> <p>(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.</p> <p>(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.</p> <p>(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,</p>	V 133		

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V 133	<p>Continued From page 15</p> <p>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 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</p>	V 133		



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V 133	<p>Continued From page 16</p> <p>obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:                      (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.                      (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> <p>This Rule is not met as evidenced by:                      Based on record review and interview the facility failed to provide a criminal background check for 1 of 3 audited staff (The Compliance Director).                      The findings are:</p> <p>Review on 5/23/23 of the Compliance Director's record revealed:                      - No criminal background check</p> <p>During interview on 5/23/23 the Compliance Director reported:                      - Her criminal background check was completed                      - Her personnel record was at the Sister Facility                      - "If I go to Pleasant Hill (location of Sister Facility) to get my record I'm not coming back"</p>	V 133		

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V 300	Continued From page 17	V 300		
V 300	<p>27G .1708 Residential Tx. Child/Adol - Trans or dischg</p> <p><b>10A NCAC 27G .1708 TRANSFER OR DISCHARGE</b></p> <p>(a) The purpose of this Rule is to address the transfer or discharge of a child or adolescent from the facility.</p> <p>(b) A child or adolescent shall not be discharged or transferred from a facility, except in case of emergency, without the advance written notification of the treatment team, including the legally responsible person. For purposes of this Rule, treatment team means the same as the existing child and family team or other involved persons as set forth in Paragraph (c) of this Rule.</p> <p>(c) The facility shall meet with existing child and family teams or other involved persons including the parent(s) or legal guardian, area authority or county program representative(s) and other representatives involved in the care and treatment of the child or adolescent, including local Department of Social Services, Local Education Agency and criminal justice agency, to make service planning decisions prior to the transfer or discharge of the child or adolescent from the facility.</p> <p>(d) In case of an emergency, the facility shall notify the treatment team including the legally responsible person of the transfer or discharge of the child or adolescent as soon as the emergency situation is stabilized.</p> <p>(e) In case of an emergency, notification may be by telephone. A service planning meeting as set forth in Paragraph (c) of this Rule shall be held within five business days of an emergency transfer or discharge.</p>	V 300		

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V 300	<p>Continued From page 18</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure a discharge summary was completed for 1 of 1 former client (FC #8). The findings are:</p> <p>Record review on 5/23/23 of FC #8's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted 1/19/23 and discharged 3/27/23</li> <li>- Diagnoses of Conduct Disorder, Disruptive Mood Dysregulation Disorder, Posttraumatic Stress Disorder (PTSD), and child physical abuse</li> <li>- No discharge summary</li> </ul> <p>During interview on 5/23/23 the Associate Professional (AP) reported:</p> <ul style="list-style-type: none"> <li>- FC #8 was discharged 3/27/23</li> <li>- He was unable to find FC #8's discharge summary</li> <li>- The Director was responsible for completing discharge summaries</li> </ul> <p>During interview on 5/26/23 the Director reported:</p> <ul style="list-style-type: none"> <li>- Discharge meetings were held monthly</li> <li>- A discharge summary was completed when a client was discharged from the facility</li> <li>- The Qualified Professional (QP) was responsible for completing discharge summaries</li> <li>- He was the acting QP at the time of FC #8's discharge</li> <li>- He completed the discharge summary for FC #8</li> <li>- The discharge summary was completed electronically</li> <li>- The discharge summary was located as an attachment in an electronic document</li> </ul>	V 300		

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V 540	Continued From page 19	V 540		
V 540	<p>27F .0103 Client Rights - Health, Hygiene And Grooming</p> <p>10A NCAC 27F .0103 HEALTH, HYGIENE AND GROOMING</p> <p>(a) Each client shall be assured the right to dignity, privacy and humane care in the provision of personal health, hygiene and grooming care. Such rights shall include, but need not be limited to the:</p> <p>(1) opportunity for a shower or tub bath daily, or more often as needed;</p> <p>(2) opportunity to shave at least daily;</p> <p>(3) opportunity to obtain the services of a barber or a beautician; and</p> <p>(4) provision of linens and towels, toilet paper and soap for each client and other individual personal hygiene articles for each indigent client. Such other articles include but are not limited to toothpaste, toothbrush, sanitary napkins, tampons, shaving cream and shaving utensil.</p> <p>(b) Bathtubs or showers and toilets which ensure individual privacy shall be available.</p> <p>(c) Adequate toilets, lavatory and bath facilities equipped for use by a client with a mobility impairment shall be available.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interviews, the facility failed to assure 1 of 2 audited current clients (#1) maintained their rights to privacy. The findings are:</p> <p>Record review on 5/23/23 of client #1's record revealed:</p>	V 540		

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V 540	<p>Continued From page 20</p> <ul style="list-style-type: none"> <li>- Admitted 4/18/23</li> <li>- Diagnoses of Posttraumatic Stress Disorder (PTSD), Attention Deficit/Hyperactivity Disorder (ADHD), combined presentation, moderate, Intermittent Explosive Disorder, child physical abuse and neglect child sexual abuse</li> </ul> <p>Observation at 1:08pm on 5/23/23 during the facility tour revealed:</p> <ul style="list-style-type: none"> <li>- Two sectional glass doors with no covering to client #1's bedroom located beside the facility's living room</li> </ul> <p>During interview on 5/23/23 the Associate Professional (AP) reported:</p> <ul style="list-style-type: none"> <li>- The door covering was removed by a previous "socially aggressive" client</li> <li>- Did not recall how long the door did not have a covering</li> </ul> <p>During interview on 5/24/23 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> <li>- She noticed client #1's door did not have a covering</li> <li>- "I guess it (the door) always been that way"</li> <li>- She was concerned for client #1's confidentiality</li> </ul>	V 540		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p>	V 736		

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V 736	<p>Continued From page 21</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to maintain a clean and attractive environment. The findings are:</p> <p>Observations at 1:08pm on 5/23/23 during the facility tour revealed:</p> <ul style="list-style-type: none"> <li>- An unpainted patched area located on client #2's bedroom wall</li> <li>- Missing doorknob on client #2's closet door</li> <li>- Client #4's bedroom door did not close properly</li> <li>- Bottom of client #4's door unhinged with missing screws</li> <li>- Window screen located in client #'s bedroom was cut</li> <li>- Over-the-range microwave was removed exposing the vent and a hole in the kitchen wall</li> </ul> <p>During interview on 5/23/23 client #4 reported:</p> <ul style="list-style-type: none"> <li>- Did not recall what happened to his window screen</li> <li>- Could have come from a previous client</li> <li>- He did not cause the damage</li> <li>- He had to "push hard to close the door"</li> <li>- The bottom hinge of the door was coming off</li> <li>- He noticed it a couple of weeks ago</li> <li>- He reported it to staff</li> </ul> <p>During interview on 5/23/23 the Associate Professional (AP) reported:</p> <ul style="list-style-type: none"> <li>- Did not recall how what happened to client #2's closet doorknob</li> <li>- A previous client punched a hole in client #2's wall</li> <li>- He could not recall when the wall was damaged</li> </ul>	V 736		

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V 736	<p>Continued From page 22</p> <ul style="list-style-type: none"> <li>- He did not notice that client #4's window screen was damaged</li> <li>- The microwave "went out" a few weeks ago and was being replaced</li> </ul> <p>During interview on 5/24/23 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> <li>- She would walk through the facility for damages</li> <li>- She reported damages to the Compliance Director</li> </ul>	V 736		