

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-386	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/14/2023
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NAME OF PROVIDER OR SUPPLIER LIVINGSTONE'S HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 212 BALDWIN ROAD ARDEN, NC 28704
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(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
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed 6/14/23. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G Supervised Living for Alternative Family Living.</p> <p>The facility is licensed for 3 and currently has a census of 2. The survey sample consisted of audits of 2 current clients.</p>	V 000		
V 290	<p>27G .5602 Supervised Living - Staff</p> <p>10A NCAC 27G .5602 STAFF</p> <p>(a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs.</p> <p>(b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time.</p> <p>(c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present:</p> <p>(1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or</p>	V 290	<p>DHSR - Mental Health</p> <p>JUL 05 2023</p> <p>Lic. & Cert. Section</p>	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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6/27/23
Kelly Ersever QMA

Division of Health Service Regulation

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V 290	<p>Continued From page 1</p> <p>(2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body.</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:</p> <p>(1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and</p> <p>(2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure the client's treatment or habilitation plan documented the client was capable of remaining in the home or community without supervision affecting 1 of 2 clients (Client #2). The findings are:</p> <p>Review on 6/13/23 of Client #2's record revealed: -Admitted 4/1/03. -Diagnoses of Autism Spectrum Disorder, Oppositional Defiant Disorder, Impulse Disorder and Unspecified Mood Disorder. -3/10/22 - unsupervised time assessment - approved up to 3 hours - includes home and community time - completed by the Qualified Professional (QP).</p>	V 290	<p>Unsupervised time has now been added to consumer's ISP by the Care Coordinator from VAYA MCO. All QPs being trained to assure this information appears in all ISPs. QA person will perform internal audits to assure this is completed. QA visit a regional office monthly</p>	

Kelly Ersever *QPM*
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V 290	<p>Continued From page 2</p> <p>-3/9/23 - Person-Centered Profile - no treatment goal indicating the client's ability to remain in the home or community unsupervised.</p> <p>Interview on 6/13/23 with Client #2 and his guardian, who was also present, revealed:</p> <ul style="list-style-type: none"> -Confirmed he was able to stay at home alone, up to 2 hours, per the guardian. -Client was unsure of how many hours he had approved. -Per the guardian, it had been documented in his treatment plan for "like 7 years now." <p>Interview on 6/13/23 with the AFL provider revealed:</p> <ul style="list-style-type: none"> -Client #2 had 3 to 4 hours of approved unsupervised time. -He spent "maybe 30 minutes" alone at the facility every once in a while when he got home before anyone else. -She believed this was documented in his treatment plan. <p>Interview on 6/13/23 with the QP revealed:</p> <ul style="list-style-type: none"> -She had an updated unsupervised time assessment for Client #2, but it was in her other office. -The client continued to have up to 3 hours of unsupervised time, which included in the home and community. -She had not put it in the treatment plan yet, she just learned from the Program Manager yesterday that this needed to be in the plan. <p>Interview on 6/14/23 with the Program Manager revealed:</p> <ul style="list-style-type: none"> -Client #2's unsupervised time was in his treatment plan and must have been deleted. -She would contact the Local Management Entity and ensure it was put back into the plan. 	V 290		

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Robby Ersever QPMA
6/27/23