

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL068-118	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/29/2023
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NAME OF PROVIDER OR SUPPLIER FACILITY BASED CRISIS SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 110 NEW STATESIDE DRIVE CHAPEL HILL, NC 27516
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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
V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on June 29, 2023. The complaint was unsubstantiated (Intake #NC00203631). A deficiency was cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .3100 Non-hospital Medical Detoxification- Individuals who are Substance Abusers. 10A NCAC 27G .3200 Social Setting Detoxification for Substance Abuse. 10A NCAC 27G .5000 Facility Based Crisis Service for Individuals of all Disability Groups.</p> <p>This facility is licensed for 16 and currently has a census of 12. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 107	<p>27G .0202 (A-E) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (a) All facilities shall have a written job description for the director and each staff position which: (1) specifies the minimum level of education, competency, work experience and other qualifications for the position; (2) specifies the duties and responsibilities of the position; (3) is signed by the staff member and the supervisor; and (4) is retained in the staff member's file. (b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility: (1) is at least 18 years of age; (2) is able to read, write, understand and</p>	V 107	<div style="border: 1px solid red; padding: 5px; color: red; text-align: center;"> RECEIVED BY MHL & C 7/17/23 </div>	

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

H. G. Melaney, VP Quality Assurance / Training 7/12/23

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V 107	<p>Continued From page 1</p> <p>follow directions;</p> <p>(3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and</p> <p>(4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry.</p> <p>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on records review and interview the facility failed to ensure one of three audited staff (Staff #6) met the minimum level of education requirements. The findings are:</p> <p>Review on 6/29/23 of Staff #6's personnel record revealed: -Hire date of 10/4/21.</p>	V 107	<p>Measure to correct: The missing GED has been obtained by Human Resources.</p> <p>Measure to prevent: The FHRC staff onboarding protocol was revised. The protocol states potential new staff will not receive a hiring offer letter or be able to start working until HR has a copy of all required degrees. This protocol was reviewed with hiring managers in a meeting on 7/11/23 and with HR staff on 7/12/23.</p> <p>Measure to monitor: Hiring managers will follow DHHS provider monitoring tool as they orient new staff. Hiring managers will verify on agency orientation form that all required diplomas, licenses, trainings are present as required by monitoring tool.</p>	<p>7.13.23</p> <p>7.12.23</p> <p>7.18.23</p>

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V 107	<p>Continued From page 2</p> <ul style="list-style-type: none"> -Staff #6 was hired as a Crisis Worker. -There was no documentation Staff #6 met the minimum level of education required. <p>Interview on 6/29/23 with the Clinical Director revealed:</p> <ul style="list-style-type: none"> -Human Resources informed her that they had been trying to get documentation from Staff #6. -Staff #6 reported that he had been trying to contact his high school for the records and that he would bring them in once he received them. -She confirmed Staff #6 had no documentation that he met the minimum level of education required. 	V 107		