

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL092-474</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/14/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>RES SUPPORT SVCS OF WAKE CO - ATLANTA</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3416 ATLANTIC AVENUE RALEIGH, NC 27604</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on 7/14/23. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for 5 and has a census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000	<p>Residential Support Services of Wake County has added Policy # 341.2 entitled Evidenced Based Protective Interventions E B P I Staff Training Requirements.</p> <p>Specifically, the policy states that "RSS shall train and certify all Group Home staff (Full &amp; Part Time) in EBPI prior to reporting for work with group home residents."</p> <p>The stated Purpose of this policy is "...the purpose of EBPI training is to teach skills that help prevent the use of restraints, seclusion or isolation time out. Further, the purpose is to ensure that all staff (full &amp; part time) receive this training and satisfactorily pass all subsequent test requirements for certification in EBPI proficiency."</p>	
V 536	<p><b>27E .0107 Client Rights - Training on Alt to Rest. Int.</b></p> <p><b>10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS</b></p> <p>(a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions.</p> <p>(b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p>	V 536	<p>The stated Procedure states that "EBPI shall be included in the RSS Orientation requirement process immediately after employee hiring and prior to beginning work in the Group Home Program." And, that training shall be provided by the RSS QP/EBPI Certified Trainer and that the trainer shall provide ongoing training and monitoring in conjunction with Group Home Coordinators who supervise group home staff. Documentation of satisfactory completion of and proficiency in EBPI requirements shall be placed in employee personnel records. EBPI re-training may also be required when EBPI or Supervisors determine is to be necessary to ensure protection of group home residents.</p> <p>Formal refresher training for staff shall be provided annually and every two years for the RSS EBPI trainer. Documentation of all training shall be filed and maintained in the RSS administrative office.</p> <p>The employee citations in the monitoring visit have been corrected after EBPI training has been completed and properly filed in staff personnel records.</p>	

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

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V 536	<p>Continued From page 1</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> <li>(1) knowledge and understanding of the people being served;</li> <li>(2) recognizing and interpreting human behavior;</li> <li>(3) recognizing the effect of internal and external stressors that may affect people with disabilities;</li> <li>(4) strategies for building positive relationships with persons with disabilities;</li> <li>(5) recognizing cultural, environmental and organizational factors that may affect people with disabilities;</li> <li>(6) recognizing the importance of and assisting in the person's involvement in making decisions about their life;</li> <li>(7) skills in assessing individual risk for escalating behavior;</li> <li>(8) communication strategies for defusing and de-escalating potentially dangerous behavior; and</li> <li>(9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</li> </ol> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p>	V 536		

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V 536	<p>Continued From page 2</p> <p>(B) when and where they attended; and (C) instructor's name; (2) The Division of MH/DD/SAS may review/request this documentation at any time. (i) Instructor Qualifications and Training Requirements: (1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions. (2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program. (3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule. (5) Acceptable instructor training programs shall include but are not limited to presentation of: (A) understanding the adult learner; (B) methods for teaching content of the course; (C) methods for evaluating trainee performance; and (D) documentation procedures. (6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach. (7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once</p>	V 536		

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V 536	<p>Continued From page 3</p> <p>annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p> <p> </p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure two of three audited staff (#1, #2) was trained in Alternative to Restrictive Interventions. The findings are:</p> <p> </p> <p>Review on 7/14/23 of staff #1's record revealed: -Hire date of 1/18/23</p>	V 536		

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V 536	<p>Continued From page 4</p> <p>-Title- Paraprofessional -No evidence of training in Alternatives to Restrictive Intervention</p> <p>Review on 7/14/13 of staff #2's record revealed -Hire date of 1/13/23 -Title- Paraprofessional -No evidence of training in Alternatives to Restrictive Intervention</p> <p>Interview on 7/14/23 The Director stated: -Staff was to get trained within the first 90 days of hire. -Was not aware staff had to be trained in Alternatives to Restrictive Interventions prior to working with clients. -Had personnel out in the last few months who usually scheduled those trainings. -Will get staff trained immediately.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 536		