

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL036-364</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/24/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>COGNITIVE CONCEPTS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1970 BROWNSTONE COURT</b> <b>GASTONIA, NC 28054</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual, follow up and compliant survey was completed on 7-24-23. The complaint was unsubstantiated (#NC00203049). 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 four and currently has a census of four. The survey sample consisted of audits of three current clients.</p>	V 000		
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews the facility failed to ensure that fire and disaster drills were completed at least once per quarter on each</p>	V 114		

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

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V 114	<p>Continued From page 1</p> <p>shift. The findings are:</p> <p>Review on 7-24-23 of disaster drill for the third quarter of 2022 through the second quarter of 2023 revealed:</p> <ul style="list-style-type: none"> <li>-1st quarter of 2023 was missing second and third shift disaster drills.</li> <li>-2nd quarter had no disaster drills documented on any shift.</li> <li>-Fourth quarter of 2022 had no disaster drill documented on any shift.</li> <li>-There were several disaster drill that did not have a date or time on them.</li> </ul> <p>Interview on 7-24-23 with Clients #2-4 revealed:</p> <ul style="list-style-type: none"> <li>-The facility does have regular disaster drills.</li> </ul> <p>Interview on 7-24-23 with the Qualified Professional revealed:</p> <ul style="list-style-type: none"> <li>-She would ensure going forward that all fire and disaster drills were properly documented.</li> </ul> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114		
V 295	<p>27G .1703 Residential Tx. Child/Adol - Req. for A P</p> <p>10A NCAC 27G .1703 REQUIREMENTS FOR ASSOCIATE PROFESSIONALS</p> <p>(a) In addition to the qualified professional specified in Rule .1702 of this Section, each facility shall have at least one full-time direct care staff who meets or exceeds the requirements of an associate professional as set forth in 10A NCAC 27G .0104(1).</p> <p>(b) The governing body responsible for each facility shall develop and implement written policies that specify the responsibilities of its</p>	V 295		

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V 295	<p>Continued From page 2</p> <p>associate professional(s). At a minimum these policies shall address the following:</p> <ul style="list-style-type: none"> <li>(1) management of the day to day day-to-day operations of the facility;</li> <li>(2) supervision of paraprofessionals regarding responsibilities related to the implementation of each child or adolescent's treatment plan; and</li> <li>(3) participation in service planning meetings.</li> </ul> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to ensure that they had at least one full time, direct care staff that met the criteria for the Associate Professional position. The findings are:</p> <p>Review on 3-20-23 of staff listing for the facility revealed: -An Associate Professional was listed.</p> <p>Interview on 7-24-23 with the Director revealed: -They used to have an Associate Professional but she went on maternity leave and didn't return. -The person listed on the staffing sheet had been hired as an Associate Professional, but she had not started yet. -She understood that the facility needed to have an Associate Professional and would have the new person start as soon as possible.</p>	V 295		
V 296	<p>27G .1704 Residential Tx. Child/Adol - Min. Staffing</p> <p>10A NCAC 27G .1704 MINIMUM STAFFING</p>	V 296		

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V 296	<p>Continued From page 3</p> <p><b>REQUIREMENTS</b></p> <p>(a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times.</p> <p>(b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows:</p> <p>(1) two direct care staff shall be present for one, two, three or four children or adolescents;</p> <p>(2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and</p> <p>(3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents.</p> <p>(c) The minimum number of direct care staff during child or adolescent sleep hours is as follows:</p> <p>(1) two direct care staff shall be present and one shall be awake for one through four children or adolescents;</p> <p>(2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and</p> <p>(3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.</p> <p>(d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan.</p> <p>(e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and</p>	V 296		

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V 296	<p>Continued From page 4</p> <p>needs as specified in the treatment plan.</p> <p>This Rule is not met as evidenced by: Based on observation and interviews the facility failed to ensure that two staff were present when client were in the facility. The findings are:</p> <p>Observation on 7-20-23 at approximately 11:30am revealed: -One staff (Staff #1) and one client (Client #1) present in the facility.</p> <p>Interview on 7-20-23 with Staff #1 revealed: -Client #1 was new so he had no gotten a day placement yet. -She works by herself with him. -There had never been any incidents when she was with Client #1.</p> <p>Interview on 7-20-23 with Client #1 revealed: -There is only one staff with him during the day. -He did not have a day placement yet. -Things were going well at the facility and he liked the staff.</p> <p>Interview on 7-20-23 with the Facility Manager revealed: -She had been at the facility earlier, but had stepped out for a meeting. -Staff do not work by themselves.</p>	V 296		

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V 296	Continued From page 5  Interview on 7-24-23 with the Qualified professional revealed: -There are usually two staff at the facility at all times. -The facility manager had stepped out to go to a meeting. -There had been no incidents due to only one staff working.	V 296		