

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL054-126</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/12/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>OAKWOOD FACILITY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2002 D &amp; E SHACKLEFORD ROAD KINSTON, NC 28504</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on October 12, 2023. Two complaints were unsubstantiated (NC00208155 and NC00207317) and one complaint was substantiated (NC00207216). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents.</p> <p>This facility is licensed for 12 and currently has a census of 12. The survey sample consisted of audits of 4 current clients.</p>	V 000		
V 315	<p>27G .1902 Psych. Res. Tx. Facility - Staff</p> <p>10A NCAC 27G .1902 STAFF</p> <p>(a) Each facility shall be under the direction a physician board-eligible or certified in child psychiatry or a general psychiatrist with experience in the treatment of children and adolescents with mental illness.</p> <p>(b) At all times, at least two direct care staff members shall be present with every six children or adolescents in each residential unit.</p> <p>(c) If the PRTF is hospital based, staff shall be specifically assigned to this facility, with responsibilities separate from those performed on an acute medical unit or other residential units.</p> <p>(d) A psychiatrist shall provide weekly consultation to review medications with each child or adolescent admitted to the facility.</p> <p>(e) The PRTF shall provide 24 hour on-site coverage by a registered nurse.</p>	V 315		

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

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V 315	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record reviews, observation and interviews the facility failed to ensure at least 2 direct care staff were present with every 6 children or adolescents at all times. The findings are:</p> <p>Review on 10/12/23 of the facility "Residential Treatment Plan (Scope of Service) Psychiatric Residential Treatment Facility (PRTF)" policy and procedure effective 01/01/16 revealed: - "Purpose: To comply with Section 10A NCAC 27G .1900, of the Rules for MH (Mental Health)/DD (Developmental Disability)/SA (Substance Abuse) Facilities and Services Clinical Policy No. 8D-1 of the Division of Medical Assistance, and applicable national accreditation standards." - "Personnel...A compliment of well-trained Paraprofessional Staff, provide direct supervision and services for Consumers, consistent with Person Centered Plans and the [Program] evidence-based model. All Paraprofessional Staff are trained in First Aid, CPR (Cardiopulmonary Resuscitation), emergency equipment use, North Carolina Interventions and CPI (Crisis Prevention Institute). NOVA maintains a minimum Staff to Consumer ratio of 1:3."</p> <p>Review on 10/12/23 of client #5's record revealed: - 15 year old female. - Admission date of 05/10/23. - Diagnoses of Post-Traumatic Stress Disorder and Conduct Disorder.</p> <p>Review on 10/12/23 of staff #1's personnel record</p>	V 315		

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V 315	<p>Continued From page 2</p> <p>revealed:</p> <ul style="list-style-type: none"> <li>- Date of hire 07/31/23.</li> <li>- Paraprofessional.</li> </ul> <p>Observation on 10/12/23 at approximately 9:46am revealed:</p> <ul style="list-style-type: none"> <li>- Client #5 and staff #1 entered the facility (D).</li> <li>- No other staff accompanied client #5 and staff #1.</li> <li>- Upon exit of the facility, client #5 and staff #1 were in the facility alone with no other staff present.</li> </ul> <p>Interview on 10/12/23 client #5 stated:</p> <ul style="list-style-type: none"> <li>- She had resided at the facility for approximately 4 months.</li> <li>- There are usually 2 staff at the facility.</li> <li>- There are times there is one staff in the facility for brief periods of time.</li> </ul> <p>Interview on 10/12/23 staff #1 stated:</p> <ul style="list-style-type: none"> <li>- There is always 2 staff in the facility.</li> <li>- She had to take client #5 to the facility to change clothes.</li> <li>- The staff to client ratio is 1 staff to 3 clients.</li> </ul> <p>Interview on 10/12/23 the Residential Services Manager stated client #5 came to the facility to change clothes.</p> <p>Interview on 10/11/23 Licensed Practical Nurse (LPN) #1 stated:</p> <ul style="list-style-type: none"> <li>- She had worked at the facility for 8 years.</li> <li>- The staff to client ratio was 1 staff to 3 clients.</li> </ul> <p>Interview on 10/11/23 Registered Nurse #1 stated:</p> <ul style="list-style-type: none"> <li>- She had worked at the facility approximately 2 years.</li> <li>- She worked the night shift.</li> </ul>	V 315		

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V 315	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>- At times there may be 1 staff in one house and 2 staff in another house.</li> <li>- There are staff call outs and or staff may come in late. When that occurred there may be 1 staff in the facility.</li> <li>- She could not recall a specific date or time there was one staff in the facility with clients.</li> </ul> <p>Interview on 10/11/23 the Residential Service Supervisor #1 stated:</p> <ul style="list-style-type: none"> <li>- She had worked at the facility for 5 years.</li> <li>- She was a supervisor for Pinewood Facility and a sister facility.</li> <li>- Staff to client ratio was 1 staff to 3 clients.</li> </ul> <p>Interview on 10/12/23 the Director of Services stated:</p> <ul style="list-style-type: none"> <li>-The rule did not specify 2 staff to 1 client.</li> <li>-She did not understand the interpretation of the rule.</li> <li>-The rule states 2 staff to 6 clients.</li> </ul>	V 315		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to ensure the home was maintained in a safe, clean and attractive manner. The findings are:</p> <p>Observation on 10/12/23 at approximately 9:38am revealed:</p>	V 736		

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V 736	<p>Continued From page 4</p> <p><b>Facility D</b></p> <ul style="list-style-type: none"> <li>- A black mark on the ceiling of the living room area.</li> <li>- The left side bathroom had marks on the walls.</li> <li>- Bedroom D2 had a baseball sized unpainted white patched area.</li> <li>- The right side bathroom had rust on the commode, a bent shower curtain rod and dark stains on the tile grout.</li> <li>- Bedroom D6 had smudge and scuff marks on the walls.</li> </ul> <p><b>Facility C</b></p> <ul style="list-style-type: none"> <li>- The inside of the front door had scuff marks on the bottom.</li> <li>- The left bathroom had a rusty electrical plate cover and the shower had dark grout on the tiles.</li> <li>- The right side bathroom had paint peeling off the wall, a rusty electric plate cover and dark grout on the shower tiles.</li> <li>- The front right bedroom had a white substance and scuff marks on the walls.</li> </ul> <p>Interview on 10/12/23 the Maintenance Staff stated he repaired items at the facility.</p> <p>Interview on 10/12/23 the Program Director had no questions regarding the facility items discussed at exit.</p>	V 736		