

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0921002</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/19/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ACCESS HEALTH SYSTEM 2</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5208 COUNTRY PINES COURT RALEIGH, NC 27616</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on 10/19/23. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 6 and currently has a census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 105	<p><b>27G .0201 (A) (1-7) Governing Body Policies</b></p> <p><b>10A NCAC 27G .0201 GOVERNING BODY POLICIES</b></p> <p>(a) The governing body responsible for each facility or service shall develop and implement written policies for the following:</p> <p>(1) delegation of management authority for the operation of the facility and services;</p> <p>(2) criteria for admission;</p> <p>(3) criteria for discharge;</p> <p>(4) admission assessments, including:</p> <p>(A) who will perform the assessment; and</p> <p>(B) time frames for completing assessment.</p> <p>(5) client record management, including:</p> <p>(A) persons authorized to document;</p> <p>(B) transporting records;</p> <p>(C) safeguard of records against loss, tampering, defacement or use by unauthorized persons;</p> <p>(D) assurance of record accessibility to authorized users at all times; and</p> <p>(E) assurance of confidentiality of records.</p> <p>(6) screenings, which shall include:</p> <p>(A) an assessment of the individual's presenting problem or need;</p> <p>(B) an assessment of whether or not the facility can provide services to address the individual's needs; and</p>	V 105		

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

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V 105	Continued From page 1  (C) the disposition, including referrals and recommendations; (7) quality assurance and quality improvement activities, including: (A) composition and activities of a quality assurance and quality improvement committee; (B) written quality assurance and quality improvement plan; (C) methods for monitoring and evaluating the quality and appropriateness of client care, including delineation of client outcomes and utilization of services; (D) professional or clinical supervision, including a requirement that staff who are not qualified professionals and provide direct client services shall be supervised by a qualified professional in that area of service; (E) strategies for improving client care; (F) review of staff qualifications and a determination made to grant treatment/habilitation privileges: (G) review of all fatalities of active clients who were being served in area-operated or contracted residential programs at the time of death; (H) adoption of standards that assure operational and programmatic performance meeting applicable standards of practice. For this purpose, "applicable standards of practice" means a level of competence established with reference to the prevailing and accepted methods, and the degree of knowledge, skill and care exercised by other practitioners in the field;	V 105		

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V 105	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to develop and implement adoption of standards that assure operational and programmatic performance meeting applicable standards of practice for the use of a Glucometer instrument including the CLIA (Clinical Laboratory Improvement Amendments) waiver. The findings are:</p> <p>Review on 10/18/23 of client #2's record revealed:</p> <ul style="list-style-type: none"> <li>- admitted 3/3/20</li> <li>- diagnoses: Major Depression, Post Traumatic Stress Disorder and Diabetes</li> <li>- physician order dated 9/21/23: check blood sugar twice day</li> </ul> <p>During interview on 10/18/23 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- she checked client #2's blood sugars twice a day</li> </ul> <p>During interview on 10/19/23 the Licensee reported:</p> <ul style="list-style-type: none"> <li>- she does not have the CLIA waiver</li> <li>- client #2's blood sugars were good</li> <li>- plan to get the blood sugar checks discontinued</li> </ul>	V 105		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>order of a person authorized by law to prescribe drugs.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p> </p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure medications were administered on the written order of a physician for 1 of 3 clients (#5). The findings are:</p> <p> </p> <p>Review on 10/18/23 of client #5's record revealed:</p>	V 118		

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V 118	<p>Continued From page 4</p> <ul style="list-style-type: none"> <li>- admitted 12/3/22</li> <li>- diagnoses: Schizoaffective Disorder, Post Traumatic Stress Disorder, Alcohol &amp; Cocaine Disorder &amp; Antisocial Personality Disorder</li> <li>- physician order dated 9/11/23: Levothyroxine 175mcg daily (hypothyroidism)</li> </ul> <p>Observation on 10/18/23 at 11:30am of client #5's medications revealed:</p> <ul style="list-style-type: none"> <li>- no Levothyroxine</li> </ul> <p>Review on 10/18/23 of client #5's October's MAR revealed:</p> <ul style="list-style-type: none"> <li>- staff initialed until 10/18/23</li> </ul> <p>During interview on 10/18/23 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- she was off for 3 weeks and returned 10/16/23</li> <li>- the Levothyroxine was not available when she returned to work</li> <li>- she mistakenly signed the October MAR</li> <li>- later, it was 3 pills left in the bubble pack when she returned</li> <li>- she called the pharmacy today and the medication will arrive today</li> <li>- she normally called the pharmacy 5 days prior to the medication being out</li> <li>- the Levothyroxine ran out today (10/18/23)</li> </ul> <p>During interview on 10/19/23 the Licensee reported:</p> <ul style="list-style-type: none"> <li>- reviewed the MARs and medications monthly</li> <li>- the pharmacy should be contacted 5 - 7 days prior to the medication being out</li> </ul> <p>Due to the failure to accurately document medication administration, it could not be determined if clients received their medications as ordered by the physician"</p>	V 118		

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V 119	<p>27G .0209 (D) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(d) Medication disposal:</p> <p>(1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion.</p> <p>(2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program.</p> <p>Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction.</p> <p>(3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>(4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to dispose medications in a manner that guards against diversion or accidental ingestion for 1 of 3 audited clients (#1).</p>	V 119		

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V 119	<p>Continued From page 6</p> <p>The findings are:</p> <p>Review on 10/18/23 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- admitted 8/31/23</li> <li>- diagnoses: Schizophrenia, Obsessive Compulsive Disorder, Hypertension, Hyperlipidemia &amp; Hypothyroid</li> <li>- FL2 dated 4/4/23 with the following medications: <ul style="list-style-type: none"> <li>- Potassium 10 milligrams (mg) daily</li> <li>- Atenolol 50mg daily (blood pressure)</li> <li>- Hydrochlorothiazide 25mg daily (blood pressure)</li> </ul> </li> </ul> <p>Observation on 10/18/23 at 2:12pm of client #1's medication box revealed the following bubble pack of medications:</p> <ul style="list-style-type: none"> <li>- Potassium expired 3/3/23 stapled to current Potassium dispensed on 3/28/23</li> <li>- Hydrochlorothiazide expired 11/4/22 stapled to current Hydrochlorothiazide dispensed 5/3/23</li> <li>- 1 pack of Atenolol expired 9/19/23</li> </ul> <p>During interview on 10/18/23 the Qualified Professional reported:</p> <ul style="list-style-type: none"> <li>- expired medications were returned to the pharmacy</li> <li>- would return the expired medications to the pharmacy today</li> </ul> <p>During interview on 10/19/23 the Licensee reported:</p> <ul style="list-style-type: none"> <li>- staff were supposed to check for expired medications</li> <li>- she checked behind staff for expired medications</li> <li>- was not aware any medications had expired</li> </ul>	V 119		

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V 133	Continued From page 7	V 133		
V 133	<p>G.S. 122C-80 Criminal History Record Check</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</p> <p>(a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter.</p> <p>(b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall</p>	V 133		



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V 133	<p>Continued From page 8</p> <p>return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p>	V 133		

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V 133	<p>Continued From page 9</p> <p>(1) The level and seriousness of the crime.                      (2) The date of the crime.                      (3) The age of the person at the time of the conviction.                      (4) The circumstances surrounding the commission of the crime, if known.                      (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled.                      (6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed.                      (7) The subsequent commission by the person of a relevant offense.                      The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.                      (d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:                      (1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.                      (2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.                      (e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or</p>	V 133		

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V 133	Continued From page 10  felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.	V 133		

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V 133	<p>Continued From page 11</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p> <p>(1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.</p> <p>(2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to complete 1 of 2 staff (#1) criminal record checks. The findings are:</p> <p>Review on 10/18/23 of staff #2's record revealed:</p> <ul style="list-style-type: none"> <li>- hire: 6/9/23</li> <li>- job title: Supervised Living Facility Worker</li> <li>- a "people search dated 6/9/23 with staff #2's address but no date or results of findings</li> </ul> <p>During interview on 10/19/23 the Licensee</p>	V 133		
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V 133	Continued From page 12  reported: - she would follow up with the criminal record checks for additional information  During interview on 10/19/23 the QP reported: - the Licensee had no further information to provide regarding the criminal record checks	V 133		
V 290	27G .5602 Supervised Living - Staff  10A NCAC 27G .5602 STAFF (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. (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. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (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 (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients	V 290		

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V 290	<p>Continued From page 13</p> <p>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 observation, record review and interview the facility failed to ensure 1 of 3 audited clients (#4) plan was reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the community without supervision for specified periods of time. The findings are:</p> <p>Review on 10/18/23 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- admitted 8/31/18</li> <li>- diagnoses: Schizophrenia, Obsessive-Compulsive Disorder, Hypertension, Hyperlipidemia &amp; Hypothyroid</li> <li>- treatment plan dated 11/21/22: will utilize supervised time in the community to shop for necessities attend social activities</li> <li>- no guardian signature</li> </ul>	V 290		

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V 290	Continued From page 14  During interview on 10/18/23 client #4 reported: - had 4 hours of unsupervised time in the community - had a guardian ..."I guess she knows I have unsupervised time"  During interview on 10/18/23 the Qualified Professionals reported: - will follow up with client #1's guardian for unsupervised time	V 290		
V 512	27D .0304 Client Rights - Harm, Abuse, Neglect  10A NCAC 27D .0304 PROTECTION FROM HARM, ABUSE, NEGLECT OR EXPLOITATION (a) Employees shall protect clients from harm, abuse, neglect and exploitation in accordance with G.S. 122C-66. (b) Employees shall not subject a client to any sort of abuse or neglect, as defined in 10A NCAC 27C .0102 of this Chapter. (c) Goods or services shall not be sold to or purchased from a client except through established governing body policy. (d) Employees shall use only that degree of force necessary to repel or secure a violent and aggressive client and which is permitted by governing body policy. The degree of force that is necessary depends upon the individual characteristics of the client (such as age, size and physical and mental health) and the degree of aggressiveness displayed by the client. Use of intervention procedures shall be compliance with Subchapter 10A NCAC 27E of this Chapter. (e) Any violation by an employee of Paragraphs (a) through (d) of this Rule shall be grounds for dismissal of the employee.	V 512		

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V 512	<p>Continued From page 15</p> <p>This Rule is not met as evidenced by: Based on record review and interview 1 of 2 staff (#2) failed to protect 1 of 3 audited clients (#1) from exploitation. The findings are:</p> <p>Review on 10/18/23 of staff #2's record revealed:</p> <ul style="list-style-type: none"> <li>- hired: 9/25/23</li> <li>- job title: Supervised Living Facility Worker</li> <li>- facility's Code of Conduct policy signed by staff #2 on 9/25/23: "...I am also aware that I cannot take indecent liberty on the clients under my care and will not exploit...them...I cannot borrow money or goods from the clients I take care of. I have received training on protecting my clients from harm, abuse and exploitation.</li> </ul> <p>Review on 10/18/23 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- admitted 8/31/23</li> <li>- diagnoses: Schizophrenia, Obsessive Compulsive Disorder, Hypertension, Hyperlipidemia &amp; Hypothyroid</li> </ul> <p>During interview on 10/18/23 client #1 reported:</p> <ul style="list-style-type: none"> <li>- staff #2 borrowed \$33.09 from her while on an outing</li> <li>- staff #2 informed her she did not have enough gas money to get them back to the facility</li> <li>- they went to a grocery store and staff asked her to buy 4 pineapple upside down cakes &amp; double layer chocolate cake</li> <li>- she (client #1) used her bank card to make the purchases</li> <li>- staff #2 gave her \$30 when they returned to the facility &amp; 2 ten dollar bills another day</li> <li>- happened about a week or two ago</li> <li>- she did not tell anyone about the incident</li> </ul>	V 512		



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V 512	<p>Continued From page 16</p> <p>During interview on 10/19/23 staff #2 reported:</p> <ul style="list-style-type: none"> <li>- one day she did not bring any money on an outing with the clients</li> <li>- the clients had just got paid their monthly allowance</li> <li>- she took the clients to several places that day (restaurants, shopping stores)</li> <li>- they were running out of gas</li> <li>- asked client #1 to allow her to use her bank card</li> <li>- she (staff #1) got \$25 worth of gas</li> <li>- went to a store and client #1 purchased 2 cakes which cost \$1.99 a piece for her (staff #2)</li> <li>- upon return to the facility, she returned \$40.00 in cash to client #2</li> <li>- gave client #1 an extra \$15 back</li> <li>- will not ask clients for any money in the future</li> <li>- will bring her own money on outings</li> <li>- facility provided training on abuse, neglect and exploitation</li> </ul> <p>During interview on 10/19/23 the Licensee reported:</p> <ul style="list-style-type: none"> <li>- was not aware staff #2 borrowed money from client #1</li> <li>- "staff cannot ask clients for anything"</li> <li>- do not want to get in battle of "I paid her, she did not pay me"</li> </ul>	V 512		
V 513	<p>27E .0101 Client Rights - Least Restrictive Alternative</p> <p>10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE</p> <p>(a) Each facility shall provide services/supports that promote a safe and respectful environment. These include:</p> <p>(1) using the least restrictive and most appropriate settings and methods;</p>	V 513		

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V 513	<p>Continued From page 17</p> <p>(2) promoting coping and engagement skills that are alternatives to injurious behavior to self or others;</p> <p>(3) providing choices of activities meaningful to the clients served/supported; and</p> <p>(4) sharing of control over decisions with the client/legally responsible person and staff.</p> <p>(b) The use of a restrictive intervention procedure designed to reduce a behavior shall always be accompanied by actions designed to insure dignity and respect during and after the intervention. These include:</p> <p>(1) using the intervention as a last resort; and</p> <p>(2) employing the intervention by people trained in its use.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to promote a respectful environment. The findings are:</p> <p>Observation &amp; interview on 10/18/23 at 10:16am during the facility's tour revealed:</p> <ul style="list-style-type: none"> <li>- a wire with a metal lock hung from the (top) &amp; lower part of the refrigerator</li> <li>- there was white glue on the upper part of the refrigerator near the top metal lock</li> <li>- it was unlock during the tour of facility</li> <li>- staff #1 said she could not figure out which client pulled the top lock off.</li> </ul> <p>During interview on 10/18/23 client #1 reported:</p> <ul style="list-style-type: none"> <li>- refrigerator was locked</li> <li>- client #5 went in the refrigerator and would drink the beverages</li> </ul>	V 513		

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V 513	<p>Continued From page 18</p> <p>During interview on 10/18/23 client #2 reported:</p> <ul style="list-style-type: none"> <li>- refrigerator remained locked unless meals were being prepared</li> <li>- somebody drunk all the tea and left it half empty</li> <li>- staff put crazy glue on the top lock but it did not keep the lock on the top of the refrigerator</li> <li>- the refrigerator was locked last night</li> </ul> <p>During interview on 10/18/23 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- the lock was placed on the refrigerator because food went missing</li> <li>- she returned to the facility on 10/16/23 after a 3 week vacation</li> <li>- had not locked the refrigerator since she returned</li> </ul> <p>During interview on 10/19/23 staff #2 reported:</p> <ul style="list-style-type: none"> <li>- staff #1 had the lock on the refrigerator when she filled in for her while she was on vacation</li> <li>- staff #1 said the clients would go in the refrigerator all night long</li> <li>- if the clients were fed before they went to bed, "they should not be hungry"</li> </ul> <p>During interview on 10/19/23 the Licensee reported:</p> <ul style="list-style-type: none"> <li>- she had requested staff not to lock the refrigerator</li> <li>- a former client went in the refrigerator at night &amp; the lock was placed on the refrigerator</li> </ul>	V 513		