

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411039	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/14/2024
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NAME OF PROVIDER OR SUPPLIER BLESSED NEW BEGINNINGS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 WAKEFIELD DRIVE GREENSBORO, NC 27410
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on February 14, 2024. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children and Adolescents.</p> <p>This facility is licensed for 4 and currently has a census of 4. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.</p>	V 112	<p style="text-align: center;">RECEIVED FEB 22 2024 DHSR-MH Licensure Sect</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Robby C. [Signature] TITLE *Director / QP*

(X6) DATE *2/19/2024*

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility staff failed to implement strategies in the clients' treatment plans for 3 of 3 clients (#1, #2 and #3). The findings are:</p> <p>Review on 2/13/24 of client #1's record revealed: -An admission date of 9/4/23 -Diagnoses of Oppositional Defiant Disorder (ODD), Attention Deficit Hyperactivity Disorder (ADHD), Combined and Reactive Attachment Disorder (RAD) -Age 14 -An assessment dated 9/4/23 noted "not attending school, refuses to follow rules of the home, angry at authority figures, constantly on phone and social media, there is involvement with Juvenile Justice (for not attending her initial court ordered Comprehensive Clinical Assessment (CCA) and is currently on probation, only attended a few years of school last year, is currently in respite care and needs placement, presents with poor insight and judgement, deficits in activities of daily living, is unable to care for herself, presents with physical and verbal aggression, does not accept responsibility for her actions and shows no remorse at times, displays behaviors that are at risk towards others, requires supervision and support in order to be safe, denies visual and auditory hallucinations at this time, no reports suicidal or homicidal ideations,</p>	V 112	<p>Staff who have been making bed checks every 15 to 30 minutes each night. Will now assure that those nightly bed checks are documented a bed check form that will be attached to the nightly note completed by the 2nd shift and 3rd shift workers. Please see form attached.</p> <p>The form that already existed was not being consistently by current staff as there have been consistent staff turn over since Covid. Therefore the use of the form will be a part of the staff supervision process to prevent this problem from occurring again.</p> <p>The Qualified Professional who Qs notes and conducts staff supervision, will will monitor this situation to ensure it will not occur again.</p> <p>As notes are Qed weekly and staff supervision occurs monthly. There will be a two fold opportunity for monitoring to occur. Therefore monitoring will take place twice a month or at the least monthly.</p>	02/19/2024

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V 112	<p>Continued From page 2</p> <p>needs outpatient therapy, is currently at a very significant level of risk given her lack of insight and judgement, her excessive cognitive and behavioral impulsivity, needs round the clock program of guidance and accountability, is still 'missing' many higher-level cognitive, adaptive and problem solving skills, is capable of many adolescents activities and daily living skills and her full scale IQ (Intelligence Quotient) is 76, Social Services is currently involved due to the condition of the home and lack of school attendance."</p> <p>-A treatment plan dated 8/23/23 noted "will develop healthy ways to express feelings of anger and frustration towards peers, her guardian, and respect for authority figures, will show a decrease in profanity or verbal/physical aggression, a decrease in hostile and defiant behaviors towards authority figures in the community, at school and a reduction in 'splitting behaviors' among authority figures, will learn to demonstrate impulse control and de-escalation in verbal/physical aggression by having no episodes of truancy from school, increased cooperation with authority figures, no elopement or running away from the group home/family home and/or no uses of objects as weapons, with a decrease in lying/manipulation to authority figures upon confrontations with no more than 2 times, will participate in residential treatment program with no more than 2 incidents of refusal in one month by participating in planned activities, actively working to advance on the point/level system, complying with all nightly bedtime regimes, completing personal hygiene regime, following all household rules, demonstrating chore compliance and making an effort to excel behaviorally, emotionally and academically."</p> <p>-"Support/Intervention: Staff will conduct bed checks every 15 to 30 minutes during sleep hours</p>	V 112		

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V 112	<p>Continued From page 3</p> <p>to ensure client safety and whereabouts." -No documentation bed checks were conducted every 15 to 30 minutes during sleep hours</p> <p>Review on 2/13/24 of client #2's record revealed: -An admission date of 7/17/23 -Diagnoses of Disruptive Mood Dysregulation Disorder, ADHD, Combined Type, and Post-Traumatic Stress Disorder (PTSD) Disorder -Age 14 -An admission assessment dated 7/17/23 noted "has been staying out past curfew, hanging with an 18-year-old male, not telling the truth, running away, inappropriate usage of cell phone and social media, history of inappropriate sexualized behaviors, is currently in a respite home placement, has little contact with biological parents, her legal guardian is her aunt, she needs to be heard and listened to, needs to be able to talk to someone when she is upset." -A treatment plan dated 7/6/23 noted "will develop healthy ways to express feelings of anger and frustration towards peers, her guardian, and respect for authority figures and will show a decrease in profanity or verbal/physical aggression, a decrease in hostile and defiant behaviors towards authority figures in the community, at school and a reduction in 'splitting behaviors' among authority figures and relatives, will learn to demonstrate impulse control and a de-escalation in verbal/physical aggression by having no episodes of truancy from school, increased cooperation with authority figures, no elopement or running away from the group home/family home and/or no use of objects as weapons, with a decrease in lying/manipulation to authority figures upon confrontations with no more than 2 times, will participate in residential treatment program with no more than 2 incidents</p>	V 112		

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V 112	<p>Continued From page 4</p> <p>of refusal in a one month period by participating in planned activities, actively working to advance on the point/level system, complying with nightly bedtime regime, completing personal hygiene regime, following all household rules, demonstrating chore compliance and making an effort to excel behaviorally, emotionally and academically for 120 consecutive days, will actively participate in individual and group therapy sessions effectively and appropriately verbalizing thoughts and emotions, respecting the thoughts and opinions of others and contributing to sessions by actively engaging in discussions, will comply with medication regime as prescribed by physician while in the group home setting as well as during therapeutic home visits with family, one residential counselor can transport consumer to scheduled appointments."</p> <p>"Types of interventions...3rd shift residential counselors will conduct bed checks every 15 to 30 minutes during sleep hours to ensure client safety and whereabouts."</p> <p>-No documentation bed checks were conducted every 15 to 30 minutes during sleep hours</p> <p>Review on 2/13/24 of client #3's record revealed: -An admission date of 6/23/23 -Diagnoses of General Anxiety Disorder (GAD) and Vitamin D Deficiency -Age 17 -An admission assessment dated 6/23/23 noted "was previously placed at a Psychiatric Residential Treatment Facility (PRTF), her biological mother is deceased, inability to regulate her emotions, anxiety and aggression, medication management is recommended, struggles to be open and honest, needs outpatient therapy, likes to be listened to and talked to, needs space to process things, demonstrated issues with age appropriate cognitive processing, demonstrates</p>	V 112		

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V 112	<p>Continued From page 5</p> <p>boundary issues, has problems with anger management, has had some small reoccurring issues with lying and manipulation, will sink into depression at times, has worked with staff to except responsibility for her actions."</p> <p>-A treatment plan dated 6/16/23 noted "will learn age appropriate communication skills that will enable her to process situations in a more mature cognitive manner to get her needs met and express her thoughts more effectively with fewer than 3 refusals, will learn ways to manage past trauma/loss without becoming overwhelmed with negative thoughts and maintain good mental health by being able to openly discuss/process these experiences with group home staff, therapist and family, will participate in the BNB (Blessed New Beginnings) program to improve her interpersonal relationships by working on relationships with family members and participating in family therapy, working toward self-directed improvement in order to rely less on others to make her happy or reduce her sadness or anxiety, learn about healthy peer to peer relationships/interactions and age appropriate romantic relationships that will allow her to successfully live on her own, attend college and consistently make good grades towards graduation, learn about and practice healthy communication patterns (I statements, active listening, speak calmly, not interrupting others), providing feedback in respectful ways, asking for help through assignments, groups and/or therapy at least 3 times a week, will develop healthy ways to express feelings of anger and frustration towards peers, her family and respect for authority figures by having a decrease in verbal aggression, a decrease in hostile and/or defiant behaviors in the community, at school, at home and a reduction in 'splitting behaviors' among authority figures and relatives, will learn to</p>	V 112		

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V 112	<p>Continued From page 6</p> <p>demonstrate impulse control and a decrease in lying/manipulation to authority figures upon confrontations no more than 2 times, will have monthly scheduled therapeutic leave with her family when earned/approved and at least 2 times a week planned activities with peers to help in the development of communication skills and other meaningful relationships with in the next 60 days to help promote self-esteem and practice reciprocity and be compliant while working towards a successful step down from the group home, will participate in residential treatment program with no more than 2 incidents or refusal per month, comply with her nightly bedtime regime, completing personal hygiene regime, following all household rules, demonstrating chore compliance and making an effort to excel behaviorally, emotionally and academically And will actively participate in individual and group therapy sessions effectively and appropriately verbalizing thoughts and emotions, especially those of past traumas, respecting the thoughts and opinions of others and contributing to sessions by actively engaging in discussions."</p> <p>-"Support/Intervention: Staff will conduct bed checks every 15 to 30 minutes during sleep hours to ensure client safety and whereabouts." -No documentation bed checks were conducted every 15 to 30 minutes during sleep hours</p> <p>Interview on with client #1 revealed: -"They (facility staff) do bed checks all the time ..."</p> <p>Interview on 2/14/24 with staff #1 revealed: -"The staff on third shift were conducting bed checks. The documentation is in the communication log. We don't use a form ..."</p> <p>Interview on 2/14/24 with the Associate</p>	V 112		

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V 112	<p>Continued From page 7</p> <p>Professional revealed: -The Qualified Professional (QP) was responsible for the clients' treatment plans -"Both staff on third shift are awake. We document it (clients are checked on) in the communication log. The staff conducts checks every 20 to 30 minutes throughout the duration of the entire night. We call it bed checks."</p> <p>Interview on 2/14/24 with the Licensed Professional revealed: -Treatment plans are the responsible of the QP</p> <p>Interview on 2/14/24 with the QP revealed: -Was responsible for the clients' treatment plans -"Bedroom checks are done every 30 minutes and are documented in their notes (communication log). We used to have a form for the bedroom checks that had the times of the checks on it ... I will see if I can find it on the computer ..."</p>	V 112		
V 114	<p>27G .0207 Emergency Plans and Supplies</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>	V 114		

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V 114	<p>Continued From page 8</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to conduct disaster drills once per shift per quarter. The findings are:</p> <p>Review on 2/14/24 of the facility's fire and disaster drills from February 2023 to February 2024 revealed:</p> <ul style="list-style-type: none"> -No documentation of disaster drills conducted in November 2023 for 1st or 2nd shifts -No documentation disaster drills conducted in December 2023 for 1st, 2nd, or 3rd shifts -No documentation disaster drills conducted in January 2024 for 1st, 2nd ,or 3rd shifts <p>Interviews on 2/13/24 with clients #1, #2 and #3 revealed:</p> <ul style="list-style-type: none"> -Had not participated in disaster drills "recently." -Had only participated in fire drills. <p>Interview on 2/14/24 with staff #1 revealed:</p> <ul style="list-style-type: none"> -"Drills are done three times a month for each shift. Staff document inside the fire drill log. There should be documentation for November, December, and January. Staff are required to document the drills in the book. It is the responsibility of [the Qualified Professional (QP)] to review the drills. I look over them myself and I know [QP] looks over them also. They are usually done around the same time as the fire drills so we can just knock them out..." <p>On 2/14/24 with the Associate Professional revealed:</p> <ul style="list-style-type: none"> -Stated all the fire and disaster drills documentation "should be in the book" 	V 114	<p>Staff shall go through s retraining of disaster drills for the facility. This training is to update the staff on the expectation, procedures and timing of disaster drills in the facility. This training will go to correct the deficient area of practice.</p> <p>A disaster drill schedule will now be posted in the staff office area as a reminder to staff to prevent this problem from occurring again.</p> <p>The monitoring of this situation is now being placed in the hands of the program Director. This will ensure this situation will not occur again.</p> <p>The program Director will monitor the disaster drill schedule and the documentation of disaster drills conducted quarterly. He will also participate in disaster drills on at least two shifts two times a year.</p>	02/19/2024

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V 114	<p>Continued From page 9</p> <p>(notebook)."</p> <p>-"[Staff #1] and [QP] were responsible for ensuring the drills are completed. Now, I do not know what standards they are going by when they do the drills. You will have to ask them."</p> <p>Interview on 2/14/24 with the QP revealed:</p> <p>-"All the fire and disaster drills are done once per shift, per quarter and it should be in that book (notebook). That is what the Fire Marshall checks before they approve our plan."</p> <p>Further interview on 2/14/24 with the QP revealed:</p> <p>-"The disaster drills are conducted by staff once a month on each shift. But the fire department's criteria is once a month. I was not aware some of the disaster drill documentation was not in the notebook..."</p>	V 114		
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(e) Medication Storage:</p> <p>(1) All medication shall be stored:</p> <p>(A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit;</p> <p>(B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container;</p> <p>(C) separately for each client;</p> <p>(D) separately for external and internal use;</p> <p>(E) in a secure manner if approved by a physician for a client to self-medicate.</p> <p>(2) Each facility that maintains stocks of</p>	V 120		

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V 120	<p>Continued From page 10</p> <p>controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to store internal and external medications separately for 1 of 3 clients (#3). The findings are:</p> <p>Review on 2/13/24 of client #3's record revealed: -An admission date of 6/23/23 -Diagnoses of General Anxiety Disorder (GAD) and Vitamin D Deficiency -Age 17 -Physician's orders dated 6/22/23 for Clearasil (used to treat acne) Deep 2% Pad, use once daily in the mornings and Clindamycin Phosphate (used to treat bacterial infections) Topical Solution 1%, apply 1 application topically twice a day -Physician's orders dated 1/10/24 for Benadryl (used to treat allergies) 25 mgs (milligrams), 1 po (by mouth) q (every) hs (night), Hydroxyzine (used to treat insomnia or anxiety) 50 mgs, 1 po bid (twice daily), Melatonin (used to treat sleep-wake cycles) 10 mgs, 1 po qd (daily), and Vitamin D3 (used to build and keep bones strong), 60 mgs, 1 po qd</p> <p>Observation on 2/14/24 at 10:58am of client #3's medication storage container revealed: -Client #3's internal and external medications were stored together</p> <p>Interview on 2/14/24 with staff #1 revealed:</p>	V 120	<p>The facility will now assure that the medication box for each consumer is of a large enough variety that a separate zip lock bag can be place within it to hold any external medication for the consumer. Internal medication will be kept in the box outside the zip lock bag. This will ensure internal and external medications for each consumer together, but separate from each other. This will correct this deficient area of practice.</p> <p>Staff will indicate in writing on the zip lock bag for the external medication: What medication are present in the zip lock bag (ie. creams, ointments, etc). This will be put in place to prevent this problem from occurring again.</p> <p>The program manager who is trained in medication administration; and who assures the refilling of prescribed medications for each consumer will monitor this situation to ensure it will not occur again.</p> <p>The program manager will monitor medication boxes at least weekly as she verifies medication counts for each consumer.</p>	02/19/2024

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V 120	<p>Continued From page 11</p> <p>-"...The ointments are supposed to be stored by themselves. We don't have the creams in the plastic bags, but we can do that ..."</p> <p>Interview on 2/14/24 with the Associate Professional revealed: -"She (client #3) still used the pads and the topical solution (for acne)..." -"Most of the time, we separate the creams from the pills..." -"We have a plastic bag we try to keep them (the creams) in. I will make sure staff do that (use the plastic bag to store the creams)..."</p> <p>Interview on 2/14/24 with the Qualified Professional (QP) revealed: -"The ointments and the other medications supposed to be in separate areas..."</p>	V 120		
V 503	<p>27D .0103 Client Rights - Search And Seizure Policy</p> <p>10A NCAC 27D .0103 SEARCH AND SEIZURE POLICY</p> <p>(a) Each client shall be free from unwarranted invasion of privacy.</p> <p>(b) The governing body shall develop and implement policy that specifies the conditions under which searches of the client or his living area may occur, and if permitted, the procedures for seizure of the client's belongings, or property in the possession of the client.</p> <p>(c) Every search or seizure shall be documented. Documentation shall include:</p> <p>(1) scope of search;</p> <p>(2) reason for search;</p> <p>(3) procedures followed in the search;</p> <p>(4) a description of any property seized;</p> <p>and</p>	V 503		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411039	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/14/2024
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NAME OF PROVIDER OR SUPPLIER BLESSED NEW BEGINNINGS	STREET ADDRESS, CITY, STATE, ZIP CODE 1002 WAKEFIELD DRIVE GREENSBORO, NC 27410
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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 503	<p>Continued From page 12</p> <p>(5) an account of the disposition of seized property.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility staff failed to document every search or seizure for 3 of 3 clients (#1, #2 and #3). The findings are:</p> <p>Observations on 2/13/24 from 5:27pm to 5:38 of the facility's clients revealed: -Client #1 returned to the facility at 5:28pm -Client #2 and #3 returned to the facility at 5:34pm -A staff member had clients #1, #2 and #3 go into the kitchen area where each client's body was scanned with a metal detector paddle -No contraband was found -No documentation was completed</p> <p>Review on 2/13/24 of client #1's record revealed: -An admission date of 9/4/23 -Diagnoses of Oppositional Defiant Disorder (ODD), Attention Deficit Hyperactivity Disorder (ADHD), Combined and Reactive Attachment Disorder (RAD) -Age 14</p> <p>Review on 2/13/24 of client #2's record revealed: -An admission date of 7/17/23 -Diagnoses of Disruptive Mood Dysregulation Disorder, ADHD, Combined Type and Post-Traumatic Stress Disorder (PTSD) -Age 14</p> <p>Review on 2/13/24 of client #3's record revealed: -An admission date of 6/23/23 -Diagnoses of General Anxiety Disorder (GAD) and Vitamin D Deficiency</p>	V 503	<p>Blessed New Beginnings will create a form to document daily scanning with metal detector and Book Bag searches of consumers returning to the facility from school.</p> <p>A book will be developed for the documentation form used by staff to prevent this problem from occurring again</p> <p>The Program Director will monitor search and seizure book documenting this situation to ensure it will not occur again.</p> <p>The search and seizure book documenting this particular search will be monitored monthly.</p>	02/19/2024

Division of Health Service Regulation

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V 503	<p>Continued From page 13</p> <p>-Age 17</p> <p>Review on 2/14/24 of the facility's policy and procedure manual revealed: -"Page 90, Search and Seizure: Each consumer will be free from unwarranted invasion of privacy. Consumers will have access to private living/storage areas for their personal belongings. If staff has reason to believe that a consumer has in his or her possession a weapon or illegal item, they will first ask the consumer to voluntarily relinquish the item(s). If the consumer refuses, the legal guardian will be contacted for consent to search the consumer's space. If the legal guardian cannot be reached, the owner/operator may authorize the search. The legally responsible person must be notified as soon as possible. Illegal items including weapons will be turned over to the proper law enforcement agency and a report will be made to the legally responsible person." -"Every search or seizure will be documented. Documentation will include the following: scope of search, reason of search, procedures followed in the search, a description of any property seized and an account of the disposition of seized property." -"Search Process: 1) a reasonable search shall be unannounced if at all possible, 2) the area to be searched shall be cleared of any consumer(s), 3) the parent or legal guardian shall be contacted prior to and offered an opportunity to participate in the search, 4) there shall be at least 2 staff people involved in the searches, 5) If the body of a consumer is to be searched, a parent/guardian, and a qualified professional shall be present, 6) Items seized shall be documented as well as who the items are turned over to."</p> <p>Review on 2/14/24 of the facility's Room Search</p>	V 503		
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V 503	<p>Continued From page 14</p> <p>Authorization revealed: -"I hereby authorize the staff of Blessed New Beginnings to perform a room search of [client's name]'s bedroom and belongings where there is just cause, as determined by the Program Manager, for suspicion of dangerous and/or illegal substances/weapons, and/or contraband in accordance with the Blessed New Beginning's policies and procedures"</p> <p>Interview on 2/13/24 with client #1 revealed: -Gets 'wanded' (searched with a metal detector paddle) every day. -"Staff does that to make sure we don't have contraband, anything metal and like vapes and cell phones."</p> <p>Interview on 2/13/24 with client #2 revealed: -"Facility staff does the metal detector. They do the 'wand' thing to see if we contraband, like a vape or a cell phone. They do it every day. They have never found anything on anyone ..."</p> <p>Interview on 2/13/24 with client #3 revealed: -"We get 'wanded' because they (facility staff) think we (the clients) carry vapes and we don't. They have found stuff before, like vapes and cigarettes, but that was a long time ago. It was not any of us that are in here now..."</p> <p>Interview on 2/14/24 with the Associate Professional revealed: -During the admission process, "[the Legal Guardians (LG)s for the clients sign a consent form for searches to be performed." -"Searches are done when the clients come in. We 'wand' them down when they come home from school. Sometimes we go through their bookbags. We are not looking for personal items. We don't allow them to bring in contraband. We</p>	V 503		

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V 503	<p>Continued From page 15</p> <p>used to do searches mornings and nights, but this crew we only do searches after school. We are looking mostly for weapons. We have one that vapes a lot. The new girl. I have no idea what they do at school ...we just look for safety reasons. Staff is not documenting each time. They only document if there is something found. There has been nothing that has been found..."</p> <p>Interview on 2/14/24 with the Licensed Professional (LP) revealed: -"The 'wanding' or the searches are done while I am downstairs. I do not participate in that. They may search their book bags, but I am not sure..."</p> <p>Interview on 2/14/24 with the Qualified Professional revealed: -Regarding searches: "The 'wanding' was put in place because we had incidents of clients bringing in vapes. We had girls bring weapons in like razors and sharp objects and we felt we needed to protect the clients at all times. It (wanding) is female on female. It is not done by me or [LP]..." -"There is a consent form signed by their LG and it is in our policy and procedure manual. We do not search rooms without the guardians' and the care coordinators' permission. We have in the policy that we must consult with them first." -"To be honest with you, the 'wanding' is just done to see if something is found. Then it is discussed in their child and family team meetings. 99.9% of time we don't find anything. I will create a form to document it on..."</p>	V 503		

Blessed New Beginnings, LLC. Service Notes

Consumer Name:		Medicaid ID:	
Record Number:		Type of Service: Residential Level III	
DATE:	DURATION OF SERVICE: 2nd Shift 3pm-11pm		
Purpose of Contact:	Staff will monitor every 15 to 30 minutes throughout the night to ensure safety, security and to prevent any runaway behaviors.		
Time(s) Monitoring Consumer every 15 minutes of the shift.			
1. <u>8:30p.m.</u>	20. <u>1:15</u>	39. <u>6:00</u>	
2. <u>8:45</u>	21. <u>1:30</u>	40. <u>6:15</u>	
3. <u>9:00</u>	22. <u>1:45</u>	41. <u>6:30</u>	
4. <u>9:15</u>	23. <u>2:00</u>	42. <u>6:45</u>	
5. <u>9:30</u>	24. <u>2:15</u>	43. <u>7:00</u>	
6. <u>9:45</u>	25. <u>2:30</u>	44. _____	
7. <u>10:00</u>	26. <u>2:45</u>	45. _____	
8. <u>10:15</u>	27. <u>3:00</u>	46. _____	
9. <u>10:30</u>	28. <u>3:15</u>	47. _____	
10. <u>10:45</u>	29. <u>3:30</u>	48. _____	
11. <u>11:00</u>	30. <u>3:45</u>	49. _____	
12. <u>11:15</u>	31. <u>4:00</u>	50. _____	
13. <u>11:30</u>	32. <u>4:15</u>	51. _____	
14. <u>11:45</u>	33. <u>4:30</u>	52. _____	
15. <u>12:00 a.m.</u>	34. <u>4:45</u>	53. _____	
16. <u>12:15</u>	35. <u>5:00</u>	54. _____	
17. <u>12:30</u>	36. <u>5:15</u>	55. _____	
18. <u>12:45</u>	37. <u>5:30</u>	56. _____	
19. <u>1:00</u>	38. <u>5:45</u>	57. _____	
Signature/Position:			
QP: _____	AP: _____		
# of Consumers on Shift _____	2 nd Shift		

DISASTER DRILL SCHEDULE

03/02/2024: 1ST SHIFT

03/09/2024: 2ND SHIFT

03/16/2024: 3RD SHIFT

06/01/2024: 3RD SHIFT

06/15/2024: 1ST SHIFT

06/29/2024: 2ND SHIFT

09/07/2024: 2ND SHIFT

09/14-2024: 1ST SHIFT

06/28/2024: 3RD SHIFT

12/07/2024: 1ST SHIFT

12/21/2024: 3RD SHIFT

12/28/2024: 2ND SHIFT

All disaster drills are to be documented on the appropriate form and logged in the Fire/disaster drill book

SEARCH AND SEIZURE

Each consumer will be free from unwarranted invasion of privacy. Consumers will have access to private living/storage areas for their personal belongings. If staff has reason to believe that a consumer has in his or her possession a weapon or illegal item, they will first ask the consumer to voluntarily relinquish the item(s). If the consumer refuses, the legal guardian will be contacted for consent to search the consumer's space. If the legal guardian cannot be reached, the owner/operator may authorize search. The legally responsible person must be notified as soon as possible. Illegal items including weapons will be turned over to the proper law enforcement agency and a report made to the legally responsible person.

Every search or seizure will be documented. Documentation will include the following:

- Scope of search
- Reason of search
- Procedures followed in the search.
- A description of any property seized and
- An account of the disposition of seized property.

Search Process:

- 1) **Scanning with metal detector and Book Bag search upon returning from school:**
- 2) **To prevent the bringing of Vapes, cigarettes, drugs, or Weapons of any kind into the facility.**
- 3) **Each consumer is scanned with the metal detector and each consumer's book bag is searched upon return from school each day.**
- 4) **Description of items found and /or seized:**

No items found: _____

Mon___ Tue___ Wed___ Thur___ Fri___

Mon___ Tue___ Wed___ Thur___ Fri___

Mon___ Tue___ Wed___ Thur___ Fri___

Mon___ Tue___ Wed___ Thur___ Fri___

Mon___ Tue___ Wed___ Thur___ Fri___

- 5) **Disposition of items seized:**