

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601576</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>04/02/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>DREAMS AND VISION, LLC DBC NEW VISIONS HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3430 DALECREST DRIVE</b> <b>CHARLOTTE, NC 28269</b>
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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 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint survey was completed on 4-2-24. The complaint was substantiated (#NC00213364). 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 3 and currently has a census of 2. The survey sample consisted of audits of 1 current client.</p> <p>V 112</p> <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> <ol style="list-style-type: none"> <li>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</li> <li>(2) strategies;</li> <li>(3) staff responsible;</li> <li>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</li> <li>(5) basis for evaluation or assessment of outcome achievement; and</li> <li>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could</li> </ol>	V 000	<p>V112:</p> <p>Changes will be made to ensure strategies are implemented based on the needs of each client. To prevent the problem from occurring again: The crisis plan will be updated each time a crisis or behavior occurs. Team members will provide input on ways to reduce crises. The Executive Director and QP will monitor the situation to ensure it will not occur again. The monitoring will take place monthly or as behaviors occur, whichever is first.</p> <p>-referrals will be examined more closely to determine if the client being referred is appropriate for the current population. The Executive Director with assistance from the Qualified Professional will monitor the situation to ensure strategies are implemented to de-escalate behaviors that may lead to AWOLs. Staff will be trained on ways to deescalate and be advised of appropriate contacts to reach out to for clients at risk for this behavior.</p> <p>The Executive Director along with the Child &amp; Family Team will keep track of AWOLs weekly and monthly to determine if higher level of care is appropriate.</p> <p style="text-align: center;"><b>RECEIVED</b> <b>MAY 03 2024</b> <b>DHSR-MH Licensure Sect</b></p>	

	not be obtained.		
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Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE STATE FORM 6899 ITI011 If continuation sheet 1 of 12

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NAME OF PROVIDER OR SUPPLIER  <b>DREAMS AND VISION, LLC DBC NEW VISIONS HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3430 DALECREST DRIVE</b> <b>CHARLOTTE, NC 28269</b>		
(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 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to develop and implement strategies and goals in the client's treatment plan to address the needs of the client affecting 1 of 1 audited client (client #1). The findings are:</p> <p>Review on 3-8-24 of client #1's record revealed: -Date of admission: 1-16-24. -Age: 12. -Diagnoses: Post-Traumatic Stress Disorder, Oppositional Defiant Disorder, Gender Dysphoria, Personal History of Sexual Abuse in Childhood, Adjustment Disorder. -Initial Clinical Mental Health Assessment dated 8-17-23 documented the following: "[Client #1] has a history of conduct disturbances (communicating threats, lying, engaging in risky behaviors, stealing, defiance, non-compliance and elopement)..." -Local provider reassessment dated 12-13-23 documented the following: Client #1 was at a Facility Based Crisis Center (FBC) from 8-31-23 to 10-31-23. "She (client #1) returned to the DSS (department of social services) office on 10-31-23 and ran away after asking to be excused to put lotion on. [Client #1] was located on 11-7-23 and was placed in a respite home in [City] (approximately 130 miles away)...Unfortunately, she ran away from the respite home last night</p>	V 112		
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STREET ADDRESS, CITY, STATE, ZIP CODE

**DREAMS AND VISION, LLC DBC NEW VISIONS HOME**

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**CHARLOTTE, NC 28269**

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V 112	<p>Continued From page 2</p> <p>(unknown date)...When client eloped from her foster parent's home, she stole their vehicle and drove on the highway. She has a history of stealing cars and driving when she does not get her way."</p> <p>-Person Centered Plan dated 1-12-24 revealed no documentation of strategies or goals that addressed client #1's history of conduct disturbances (communicating threats, lying, engaging in risky behaviors, stealing, defiance, non-compliance and elopement)."</p> <p>Review on 3 -8-24 of the North Carolina Incident Response Improvement System (IRIS) revealed: -IRIS report submitted on 2-6-24 documented the following:</p> <p>-Date of incident: 2-2-24.</p> <p>-"Consumer (client #1) was suspended from school on February 1st (2024) due to a physical altercation with another student. Consumer (client #1) was given a 3 day room restriction and indicated that she wanted to leave our facility. Staff processed with her as she communicates not wanting to stay in her room. Staff 1 (Team Lead/TL) and staff 2 (Qualified Professional/QP) facility a group with [client #1] about accepting responsibility and use appropriate communication of her feelings and concerns. Staff 1 was prepping meds (medications) and supporting [Client #1] as she prepared for hygiene routine. Staff 2 communicated with staff 1 regarding taking a break to go and get her meal from the store about three minutes away in driving distance. Both staff acknowledge the consumer going into the bathroom to shower and prepare for evening chores. Staff 2 left out the door. Five minutes later staff (QP)received a call from staff 1 that [client #1] took her (TL) car. Staff 2 immediately left from the store and came back to the facility. Staff 1 communicated that [client #1]</p>	V 112		

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V 112	<p>Continued From page 3</p> <p>was in the shower and she really had to use the restroom and could not wait until staff 2 came back. Staff 1 used the restroom and wasn't in their no longer than 4 minutes. Staff 1 stated that [Client #1] took her keys that was hidden in the bottom of her bag wrapped in a blanket. Staff 2 processed with staff (QP) after she called 911. Staff 1 communicated to the officer of what took place and they (police) provided staff 1 with a car theft police report and a missing person's report. Staff 2 provided all support to law enforcement regarding whereabouts and possibly the direction [Client #1] was going. On February 4th (2024) [Client #1] was found on the campus of [a local university approximately 90 miles away] and detained by law enforcement. [Client #1] provided that she left staff 1 car at a location that was later picked up. [Client #1] provided that she met a person who was willing to take her to [City, State] (approximately 200 miles away) to be with her family. However, [Client #1] took the person vehicle that brought her to [City] (approximately 90 miles away). She (client #1) indicated that the person tried to molest her and is the reason she took the vehicle and phone. Staff 2 confiscated the phone and reported the allegation to law enforcement and to Child Protective Services. Consumer (client #1) refused to be seen by a healthcare provider."</p> <p>Interview on 3-8-24 with Client #1 revealed: -Did not want to discuss the 2-2-24 elopement. "I don't want to talk about that." -"The reason I left the second time (2-6-24) was because she (TL) kept giving me side eye and making smart remarks at me under her breath. I apologized to her (TL) about her car and she</p>	V 112		

	<p>said she forgave me so I feel like if you say you forgive me then it's over. You shouldn't be saying little smart things under your breath where I can hear</p>			
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V 112	<p>Continued From page 4</p> <p>them or looking at me funny and things like that. I wasn't running away I just needed to get away from her. I was coming back. -I went to the park (approximately 3 to 4 blocks from the facility) and walked around. Not long, I wasn't gone long."</p> <p>Interview on 3-12-24 with the TL revealed: -I was not there for the second AWOL (absent without leave), I was not working when that happened."</p> <p>Interview on 3-8-24 with the QP revealed: -2-6-24, staff was sitting in the hallway monitoring client #1 when she heard client #1's window and looked in her room and she was going out the window. -"She (Client #1) was on restriction from the first incident (elopement) 2-2-24. Staff tried to process with her but she left. She went to some apartments down the street where one of her friends live. One of her friends from school live there and the friends mother called and told us she was there." -"She was gone about 30 minutes."</p>	V 112		
V 296	<p>27G .1704 Residential Tx. Child/Adol - Min. Staffing</p> <p>10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS (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. (b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows: (1) two direct care staff shall be present for</p>	V 296		

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V 296	<p>Continued From page 5</p> <p>one, two, three or four children or adolescents; (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 needs as specified in the treatment plan.</p>	V 296	<p>V296:</p> <p>The Dreams and Visions Management team ensured the safety of all consumers by having additional staff to come in and support staff during meal breaks and any time away from the facility.</p> <p>Dreams and Visions hired additional staff to cover all breaks and assist with community outings. Additional signs have been placed in designated areas for staff as reminders to ensure all personal items are kept locked at all times. During down and rest time, staff continuously provide a line of sight for all consumers.</p> <p>Staff are placed in the hall and complete safety checks every 30-45 minutes. All staff were provided with safety/de-escalation training on how to process consumers who show dysregulation and needed additional support.</p> <p>Dreams and Visions management implemented a new policy for all staff to ensure personal items, keys, etc. were kept in a lockbox housed in the medication closet. Staff were also given the option to keep all personal items in their vehicle</p> <p>Dreams and Visions staff will complete weekly staffing with QP/AP to ensure all direct care staff are keeping "line of sight" for all consumers. During rest time, staff keeps a sleep log check to ensure consumers are in their rooms.</p> <p>QP will continue to provide ongoing coaching for all staff on how to support the consumers when they are feeling dysregulated and to deter possible AWOL.</p> <p>There will be two staff on all shifts at any given time. Staff will be supported by additional staff during meal breaks and time away from the facility</p>	

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V 296	<p>Continued From page 6</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure the minimum staffing ratio of two staff for up to four adolescents. The findings are:</p> <p>Review on 3-8-24 of client #1's record revealed: -Date of admission: 1-16-24. -Age: 12. -Diagnoses: Post-Traumatic Stress Disorder, Oppositional Defiant Disorder, Gender Dysphoria, Personal History of Sexual Abuse in Childhood, Adjustment Disorder. -Initial Clinical Mental Health Assessment and Treatment Plan dated 8-17-23 documented the following: "[Client #1] has a history of conduct disturbances (communicating threats, lying, engaging in risky behaviors, stealing, defiance, non-compliance and elopement)..." -Local provider reassessment dated 12-13-23 documented the following: Client #1 was at a Facility Based Crisis Center (FBC) from 8-31-23 to 10-31-23. "She (client #1) returned to the DSS (department of social services) office on 10-31-23 and ran away after asking to be excused to put lotion on. [Client #1] was located on 11-7-23 and was placed in a respite home in [City] (approximately 130 miles away)...Unfortunately, she ran away from the Respite home last night (unknown date)...When client eloped from her foster parent's home, she stole their vehicle and drove on the highway. She has a history of stealing cars and driving when she does not get her way."</p> <p>Review on 3-10-24 of the Team Lead's (TL) record revealed: -Date of hire: 7-7-23. -Job description: Direct Care staff signed and</p>	V 296		

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V 296	<p>Continued From page 7 dated 7-96-23.</p> <p>Review on 3-10-24 of the Qualified Professionals (QP) record revealed: -Date of hire: 6-29-23. -Job description: Program Director/QP signed and dated on 6-29-23.</p> <p>Review on 3-8-24 of the North Carolina Incident Response Improvement System (IRIS) revealed: -IRIS report submitted on 2-6-24 documented the following: -Date of incident: 2-2-24. -"Consumer (client #1) was suspended from school on February 1st (2024) due to a physical altercation with another student. Consumer (client #1) was given a 3 day room restriction and indicated that she wanted to leave our facility. Staff processed with her as she communicates not wanting to stay in her room. Staff 1 (TL) and staff 2 (QP) facility a group with [client #1] about accepting responsibility and use appropriate communication of her feelings and concerns. Staff 1 was prepping meds (medications) and supporting [Client #1] as she prepared for hygiene routine. Staff 2 communicated with staff 1 regarding taking a break to go and get her meal from the store about 3 minutes away in driving distance. Both staff acknowledge the consumer going into the bathroom to shower and prepare for evening chores. Staff 2 left out the door. Five minutes later staff (QP) received a call from staff 1 that [client #1] took her (Team Lead) car. Staff 2 immediately left from the store and came back to the facility. Staff 1 communicated that [client #1] was in the shower and she really had to use the restroom and could not wait until staff 2 came back. Staff 1 used the restroom and wasn't in their no longer than 4 minutes. Staff 1 stated that</p>	V 296		

[Client #1] took her keys that was hidden in the			
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<p>V 296</p>	<p>Continued From page 8</p> <p>bottom of her bag wrapped in a blanket. Staff 2 processed with staff after she called 911. Staff 1 communicated to the officer of what took place and they (police) provided staff 1 with a car theft police report and a missing person's report. Staff 2 provided all support to law enforcement regarding whereabouts and possibly the direction [Client #1] was going. On February 4th (2024) [Client #1] was found on the campus of [a local university approximately 90 miles away] and detained by law enforcement. [Client #1] provided that she left staff 1 car at a location that was later picked up. [Client #1] provided that she met a person who was willing to take her to [City, State] (approximately 200 miles away) to be with her family. However, [Client #1] took the person vehicle that brought her to [City] (approximately 90 miles away). She (client #1) indicated that the person tried to molest her and is the reason she took the vehicle and phone. Staff 2 confiscated the phone and reported the allegation to law enforcement and to Child Protective Services. Consumer (client #1) refused to be seen by a healthcare provider."</p> <p>Interview on 3-8-24 with client #1 revealed: -I don't want to talk about that (elopement on 2-2-24)."</p> <p>Interview on 3-12-24 with the Team Lead revealed: - 2-2-24, "I had just came from grabbing something to eat. I went a few minutes up the street to [local fast food restaurant]. When I came back I had to really use the bathroom. I told [Client #1] to get in the shower. [QP] told me she was going to get her food and she left. Five minutes after she (client #1) got in the shower I went to the bathroom. I was in there maybe 3 minutes, when I came out I saw the bathroom</p>	<p>V 296</p>		
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V 296	<p>Continued From page 9</p> <p>door open (bathroom where client #1 had been in) and the water was on. I went to the door and said 'you don't have to leave the door open, you have rights.' She (client #1) didn't respond so I knocked on the door and opened it at the same time and she was gone. Her shower clothes was still folded up on the counter. I checked her room then noticed the front door was open. I looked outside and my car was gone. I called 911 and then [QP]. I mean it happened that quick. She (QP) barely made it out of the neighborhood. She was only gone for just a few seconds, literally going up the street."</p> <p>"There is suppose to be 2 staff present at all times. We are entitled to our breaks. I'm not going to say it was allowed (staff to leave and get food) but we are entitled to get a break. I know it was suppose to be 2 staff but she (QP) didn't even get to take her break."</p> <p>Interview on 3-8-24 with the QP revealed:            -"We normally have staff sitting in the hall, line of sight at all times."            -"The protocol is for there to be two staff per shift. We (QP and TL) had been here all day with nothing to eat. I just ran right up the street, less than five minutes up the street. No, that's not policy, not really a protocol (staff leaving the facility to get food) just something we have done occasionally. We were just coming back from [sister facility]. She (client #1) had had a good day. She was not dysregulated (having negative behaviors) in any way. She and [TL] had gotten something to eat and she was preparing for her shower. I told [TL] I was going to grab my food. I may not have been gone two minutes when I got the call from [TL]."</p> <p>Review on 4-1-24 of Plan of Protection dated 4-1-24 and signed by the Executive Director</p>	V 296		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601576</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>04/02/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>DREAMS AND VISION, LLC DBC NEW VISIONS HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3430 DALECREST DRIVE</b> <b>CHARLOTTE, NC 28269</b>
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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 296	<p>Continued From page 10</p> <p>revealed:</p> <p>"What immediate action will the facility take to ensure the safety of the consumers in your care? The Dreams and Visions Management team ensured the safety of all consumers by having additional staff to come in and support staff during meal breaks and any time away from the facility. Dreams and Visions hired additional staff to cover all breaks and assist with community outings. Additional signs have been placed in designated areas for staff as reminders to ensure all personal items are kept locked at all times. During down and rest time, staff continuously provide a line of sight for all consumers. Staff are placed in the hall and complete safety checks every 30-45 minutes. All staff were provided with safety/de-escalation training on how to process consumers who show dysregulation and needed additional support.</p> <p>Describe your plans to make sure the above happens.</p> <p>Dreams and Visions management implemented a new policy for all staff to ensure personal items, keys, etc. were kept in a lockbox housed in the medication closet. Staff were also given the option to keep all personal items in their vehicle. Dreams and Visions staff will complete weekly staffing with QP/AP (Associate Professional) to ensure all direct care staff are keeping "line of sight" for all consumers. During rest time, staff keeps a sleep log check to ensure are consumers are in their rooms.</p> <p>QP will continue to provide ongoing coaching for all staff on how to support the consumers when they are feeling dysregulated and to deter possible AWOL (Absent Without Leave). There will be two staff on all shifts at any given time. Staff will be supported by additional staff during meal breaks and time away from the facility."</p>	V 296		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601576</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____		(X3) DATE SURVEY COMPLETED  C <b>04/02/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>DREAMS AND VISION, LLC DBC NEW VISIONS HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3430 DALECREST DRIVE CHARLOTTE, NC 28269</b>		
(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 296	<p>Continued From page 11</p> <p>Client #1 was 12 years with diagnoses including Post-Traumatic Stress Disorder, Oppositional Defiant Disorder, Gender Dysphoria, Personal History of Sexual Abuse in Childhood, and Adjustment Disorder. Client #1 had a history of elopement and stealing cars. On 2-2-24, client #1 eloped from the facility by stealing a staff member's car. One staff (TL) was in the bathroom and the second staff (QP) had left the facility to go up the street to pick up food. While AWOL, client #1 met an unidentified male and stole his car and cell phone. Client #1 drove to a local university approximately 90 miles away before being found by law enforcement.</p> <p>This deficiency constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days.</p>	V 296		
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