STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL0601060	A. BUILDING: _____ B. WING _____	R 04/26/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ONE STEP FORWARD OUTREACH	10000 WOODY RIDGE ROAD CHARLOTTE, NC 28273

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V 000	INITIAL COMMENTS A follow up survey was completed on 4/26/24. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. The facility is licensed for 4 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.	V 000		
V 109	27G .0203 Privileging/Training Professionals 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS (a) There shall be no privileging requirements for qualified professionals or associate professionals. (b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served. (c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (d) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. (e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.	V 109		

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V 109	Continued From page 1 (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional. (g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter. This Rule is not met as evidenced by: Based on observations, record reviews and interviews, 1 of 1 Qualified Professional (Owner/QP) failed to demonstrate the knowledge, skills, and abilities required by the population served. The findings are: Cross-Reference: 10A NCAC 27G .0205 Assessment and Treatment/Habilitation or Service Plan (V112). Based on record review and interviews, the facility failed to develop and implement goals and strategies in the treatment/habilitation plan to address the client's needs affecting 1 of 3 clients (#1). Cross-Reference: 10A NCAC 27G .5602 Supervised Living for Adults with Mental Illness-Staff (V290). Based on record reviews, observations, and interviews, the facility failed to ensure a minimum of one staff was present at all times except when the client's treatment or habilitation plan documented that the client was capable of remaining in the community or the facility without supervision for a specified period of time affecting 3 of 3 clients (#1, #2, #3).	V 109		

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V 109	Continued From page 2 Review on 4/18/24 of the Owner/QP's personnel record revealed: -Hire date of 2004. -Position of Owner/QP. Interviews on 4/19/24 and 4/24/24 with the Owner/QP revealed: -Was responsible for developing and implementing treatment plans and maintaining staffing to meet the needs of the clients. -As part of her plan of protection from the survey completed 1/26/24, worked with a Consultant to ensure compliance. -Did not know if the Consultant met the requirements of a QP. -Did not ask the Consultant to provide credentials. -Did not receive recommendations related to treatment planning or unsupervised time from the Consultant. -Did not receive any additional training to improve her knowledge and skills as a QP. -Was not "linked" to Local Management Entities/Managed Care Organizations (LME/MCOs) since she did not provide contracted services, and therefore was not able to ask for technical assistance related to treatment planning and unsupervised time. Interview on 4/24/24 with the facility's Consultant revealed: -Was not asked by the Owner/QP to provide credentials to determine if she met the requirements of a QP. -Had a Bachelor of Science in Accounting. -Had been an Administrator of a licensed Family Care Home for 18 years. -Provided services to adults with mental illness. -Had training to be a Medication Technician and	V 109		

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V 109	Continued From page 3 Administrator. -Was not familiar with Division of Health Service Regulation rules related to treatment planning and unsupervised time in a facility licensed as 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. -Did not discuss treatment planning or unsupervised time with the Owner/QP. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 109		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (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. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (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.	V 112		

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V 112	Continued From page 4	V 112		

This Rule is not met as evidenced by:
Based on record review and interviews, the facility failed to develop and implement goals and strategies in the treatment/habilitation plan to address the client's needs affecting 1 of 3 clients (#1). The findings are:

Review on 4/18/24 of client #1's record revealed:
-Admission date of 10/11/19.
-Diagnoses of Mild Intellectual Developmental Disability, Schizophrenia, and Autism.
-Treatment Plan dated 1/21/24 signed by client #1.
-Long Range Outcome: "[Client #1] wants to learn how to budget her money, work on her weight loss, continuing to learn how to cook and learning more independent learning skills."
-No strategies or interventions to address budgeting, weight loss, cooking or independent learning skills.

Interview on 4/19/24 with client #1 revealed:
-Had a goal to work on independent living skills and budgeting.
-Did not know how staff was helping her with her goals.

Interview on 4/19/24 with Owner/Qualified Professional (QP) revealed:
-Had not revised client #1's goals to include strategies and interventions.

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V 112	Continued From page 5 -Did not receive recommendations or assistance from the Consultant related to treatment planning. -Was "working (with client #1) on weight loss and cooking." -Did not provide strategies or interventions for goals related to budgeting, weight loss, cooking or independent learning skills for client #1. Interview on 4/26/24 with the Owner/QP revealed: -Client #1's treatment plan was being updated to include goals and strategies for budgeting, weight loss, cooking and independent living skills. Interview on 4/24/24 with the facility's Consultant revealed: -Had not made any recommendations to the Owner/QP related to treatment planning. This deficiency is cross referenced into 10A NCAC 27G .0203 Competencies of Qualified Professionals and Associate Professionals (V109). This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 112		
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	V 290		

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V 290	Continued From page 6 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 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. (d) In facilities which serve clients whose primary diagnosis is substance abuse dependency: (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 (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client. This Rule is not met as evidenced by: Based on record reviews, observations, and	V 290		

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V 290	Continued From page 7 interviews, the facility failed to ensure a minimum of one staff was present at all times except when the client's treatment or habilitation plan documented that the client was capable of remaining in the community or the facility without supervision for a specified period of time affecting 3 of 3 clients (#1, #2, #3). The findings are: Review on 4/18/24 of client #1's record revealed: -Admission date of 10/11/19. -Diagnoses of Mild Intellectual Developmental Disability (IDD), Schizophrenia, and Autism. -Treatment Plan dated 1/21/24 signed by client #1: "[Client #1] is capable and have proven that she can be in the home any significant time day or night without supervision as she has proven herself over the years that she could. She knows and understands that she is not to open the door for any unannounced visitors unless it is approved by [the Owner/Qualified Professional (QP)] whom which will call her to let her know it is ok to open the door. [client #1] can dial 911 in case of emergencies and to call [the Owner/QP] if an emergency arrives." -The Treatment Plan did not specify the period of time client #1 may remain at the facility or in the community without staff present. -No assessment of the client #1's ability to remain at the facility or in the community without staff present. Review on 4/18/24 of client #2's record revealed: -Admission date of 10/18/12. -Diagnoses of Mild IDD, Attention Deficit Hyperactivity Disorder, Impulse Control Disorder. -Treatment Plan dated 1/24/24 and signed by client #2: "[Client #2] can ride transportation without supervision to and from her day program, medical appointments and with other clients and or riders. [Client #2] can use the phone to dial	V 290		

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numbers to let any staff member know that she is safe and or have arrived at her destinations. [Client #2] is capable of being in the home unsupervised any significant time during the day and at night, she has proven she can over the years. If there is any emergency, [Client #2] can dial 911 and call [the Owner/QP] if it deems necessary. [Client #2] knows and understands that she will not open the door for any unannounced people without calling [the Owner/QP] or a staff member to see if it is okay to do so."
-The Treatment Plan did not specify the period of time client #2 may remain at the facility or in the community without staff present.
-No assessment of the client #2's ability to remain at the facility or in the community without staff present.

Review on 4/18/24 of client #3's record revealed:
-Admission date of 6/1/09.
-Diagnoses of Mild IDD, and Schizophrenia, Paranoid Type.
-Treatment plan dated 1/26/24 signed by client #3: "[Client #3] can be left alone unsupervised for any significant time day or night at the group home; she has demonstrated that she can dial 911 in case of an emergency; she has shown that she can call any staff members or off duty staff members; and the Owner (Owner/QP) if she is given the number to call."
-The Treatment Plan did not specify the period of time client #3 may remain at the facility or in the community without staff present.
-No assessment of the client #3's ability to remain at the facility or in the community without staff present.

Observation at 3:41pm on 4/18/24 revealed:
-Clients #1, #2, and #3 arrived at the facility in a

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taxi, unlocked the front door and went into the facility.
-Client #1 answered the doorbell and stated that staff was not present and she could not let anyone inside, then closed the door.
-Client #1 was heard making a phone call. She came back to the door to say that the Owner/QP was on her way to the facility.
-The clients remained inside the facility alone until the Owner/QP arrived at 4:26pm.

Interview on 4/19/24 with Client #1 revealed:
-Was unsupervised when riding by taxi to and from the day program daily.
-"There are times when she (Owner/QP) will leave out for a couple of hours and she returns."
-Was left in the facility without staff 2-3 hours at a time.

Interview on 4/19/24 with Client #2 revealed:
-Was unsupervised when riding by taxi to and from the day program daily.
-"When we come back from the program, we let [Owner/QP] know we got home until 4:30 or 5 when [staff] or [Owner/QP] gets here."
-"On weekends [Owner/QP] leaves us for a couple of hours. I don't pay attention to the time."
-Was left without staff in the facility in the evenings, but didn't "pay attention to the time."

Interview on 4/19/24 with Client #3 revealed:
-Was unsupervised when riding by taxi to and from the day program daily.
-Did not know how often or how long she was left in the facility unsupervised.
-"Most of the time [Owner/QP] will be there."

Interviews on 4/19/24 and 4/24/24 with the Owner/QP revealed:
-The clients had "unsupervised time in the

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V 290	Continued From page 10 morning while waiting for their ride, about 45 minutes." -The clients were unsupervised when riding by taxi to and from the day program daily. -The clients were unsupervised from the time they arrived home around 3:45pm until "I get there around 5:30pm or 5:45pm. They always call me and say, 'We are in.'" -"Sometimes I have to leave and go to the next location (sister facility)." -Left the clients in the facility unsupervised up to 2 to 3 hours at a time. -Had revised treatment plans for all clients to include unsupervised time but did not specify the period of time the clients could remain unsupervised in the facility or community. -Did not complete an assessment of each client's ability to remain in the facility or community without staff supervision. -Did not discuss unsupervised time with the Consultant. Interview on 4/24/24 with the Consultant revealed: -"There shouldn't be any unsupervised time." -Did not discuss unsupervised time with the Owner/QP. This deficiency is cross referenced into 10A NCAC 27G .0203 Competencies of Qualified Professionals and Associate Professionals (V109). This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 290		