

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHH0976 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 07/12/2024 |
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| NAME OF PROVIDER OR SUPPLIER CAROLINA DUNES BEHAVIORAL HEALTH | STREET ADDRESS, CITY, STATE, ZIP CODE 2050 MERCANTILE DRIVE LELAND, NC 28451 |
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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 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on July 12, 2024. One complaint was substantiated (intake #NC00218006) and one complaint was unsubstantiated (intake #NC00218000). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents.</p> <p>This facility is licensed for 54 and currently has a census of 31. The survey sample consisted of audits of 1 current client and 2 former clients.</p> | V 000 | | |
| V 315 | <p>27G .1902 Psych. Res. Tx. Facility - Staff</p> <p>10A NCAC 27G .1902 STAFF</p> <p>(a) Each facility shall be under the direction a physician board-eligible or certified in child psychiatry or a general psychiatrist with experience in the treatment of children and adolescents with mental illness.</p> <p>(b) At all times, at least two direct care staff members shall be present with every six children or adolescents in each residential unit.</p> <p>(c) If the PRTF is hospital based, staff shall be specifically assigned to this facility, with responsibilities separate from those performed on an acute medical unit or other residential units.</p> <p>(d) A psychiatrist shall provide weekly consultation to review medications with each child or adolescent admitted to the facility.</p> <p>(e) The PRTF shall provide 24 hour on-site coverage by a registered nurse.</p> | V 315 | | |

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

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| V 315 | <p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure at least 2 direct care staff were present with every 6 children or adolescents at all times. The findings are:</p> <p>Review on 07/11/24 and 07/12/24 of a sample of "Facility Daily Staffing Sheets" for non-compliance of staff ratio from 04/22/24 thru 07/10/24 revealed:</p> <ul style="list-style-type: none"> - 200 Hall census ranged from 11-16 - 1 Mental Health Technician (MHT) working on 05/11/24 first shift. - 2 MHTs working on 04/27/24, 04/28/24, 05/01/24, 05/03/24, 05/10/24, 05/12/24, 05/16/24, 05/20/24, 05/25/24, 05/26/4, 05/31/24, 06/01/24 06/08/24, 06/10/24 and 06/15/24 first shift. - 3 MHTs working on 04/22/24 thru 04/26/24, 04/29/24, 05/02/24, 05/04/24 thru 05/06/24, 05/08/24, 05/13/24 thru 05/15/24, 05/18/24, 05/19/24, 05/21/24 thru 05/24/24, 06/02/24, 06/05/24, 06/07/24, 06/09/24, 06/11/24, 06/16/24, 06/17/24, 06/21/24 thru 06/23/24, 06/28/24 thru 06/30/24, 07/01/24, 07/08/24 and 07/09/24 first shift. - 200 Hall census ranged from 13-16 and 6 MHTs required. - 4 MHTs working on 05/09/24, 05/27/24, 05/28/24, 05/30/24, 06/03/24, 06/04/24, 06/12/24, 06/13/24, 06/18/24 thru 06/20/24, 06/26/24, 06/27/24, 07/02/24 thru 07/04/24 and 07/09/24 first shift. - 5 MHTs working on 05/29/24, 07/05/24 and 07/10/24 first shift. - 2 MHTs working on 04/27/24, 05/03/24, 05/12/24, 05/13/24, 05/18/24, 05/19/24, 05/25/24, 05/31/24, 06/01/24, 06/08/24 thru 06/10/24, | V 315 | | |

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| V 315 | <p>Continued From page 2</p> <p>06/14/24 thru 06/16/24, 07/03/24, 07/04/24 thru 07/07/24 second shift.</p> <p>- 3 MHTs working on 04/22/24 thru 04/26/24, 04/28/24 thru 04/30/24, 05/01/24, 05/05/24, 05/09/24, 05/10/24, 05/14/24 thru 05/17/24, 05/20/24, 05/22/24, 05/24/24, 05/26/24 thru 05/30/24, 06/02/24 thru 06/04/24, 06/06/24, 06/07/24, 06/11/24, 06/13/24, 06/17/24 thru 06/21/24, 06/23/24 thru 06/25/24, 06/27/24 thru 06/30/24, 07/01/24, 07/02/24 and 07/08/24 thru 07/10/24 second shift.</p> <p>- 200 Hall census ranged from 13-16 and 6 MHTs required.</p> <p>- 4 MHTs working on 05/02/24, 05/06/24 thru 05/08/24, 05/21/24, 06/05/24, 06/12/24 and 06/26/24 second shift.</p> <p>- 2 MHTs working on 05/11/24, 05/31/24, 06/01/24, 06/06/24, 06/13/24, 06/15/24, 07/03/24 and 07/05/24 third shift.</p> <p>3 MHTs working on 04/24/24, 04/26/24, 04/29/24, 04/30/24, 05/04/24, 05/06/24, 05/08/24, 05/14/24, 05/14/24, 05/18/24, 05/21/24, 05/22/24, 05/24/24, 05/27/24 thru 05/30/24, 06/02/24 thru 06/05/24, 06/11/24, 06/12/24, 06/16/24, 06/19/24, 06/21/24 thru 06/23/24, 06/30/24, 07/02/24, 07/04/24, 07/06/24 and 07/08/24 thru 07/10/24 third shift.</p> <p>- 200 Hall census ranged from 13-16 and 6 MHTs required.</p> <p>- 4 MHTs working on 04/22/24, 04/23/24, 04/25/24, 04/27/24, 04/28/24, 05/01/24 thru 05/03/24, 05/05/24, 05/07/24, 05/09/24, 05/10/24, 05/13/24, 05/15/24, 05/17/24, 05/19/24, 05/20/24, 05/23/24, 05/25/24, 06/08/24 thru 06/10/24, 06/14/24, 06/17/24, 06/18/24, 06/20/24, 06/24/24 thru 06/29/24, 07/01/24 and 07/07/24 third shift.</p> <p>- 5 MHTs working on 05/26/24 third shift.</p> <p>- 300 Hall census ranged from 13 - 19 clients. Minimal of 6 MHTs required per shift.</p> | V 315 | | |

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| V 315 | <p>Continued From page 3</p> <ul style="list-style-type: none"> - 1 MHT working on 05/11/24 first shift. - 2 MHTs working on 04/26/24 thru 04/28/24, 05/04/24, 05/08/24, 05/10/24, 05/12/24, 05/15/24, 05/17/24, 05/18/24, 05/25/24, 06/01/24 and 06/08/24 first shift. - 3 MHTs working on 04/22/24 thru 04/24/24, 04/29/24, 05/01/24 thru 05/03/24, 05/05/24 thru 05/07/24, 05/09/24, 05/13/24, 05/14/24, 05/16/24, 05/19/24, 05/20/24, 05/21/24, 06/07/24, 06/14/24 thru 06/17/24, 06/21/24 thru 06/23/24, 06/28/24, 06/29/24 and 07/07/24 first shift. - 4 MHTs working on 04/25/24, 05/21/24, 05/24/24, 05/27/24 thru 05/29/24, 06/02/24 thru 06/06/24, 06/11/24, 06/18/24, 06/20/24, 06/24/24, 06/26/24, 06/30/24, 07/01/24 thru 07/04/24, 07/06/24 and 07/08/24 thru 07/10/24 first shift. - 5 MHTs working on 06/12/24, 06/13/24, 06/16/24, 06/25/24, 06/27/24 and 07/05/24 first shift. - 2 MHTs working on 04/27/24, 05/03/24, 05/04/24, 05/10/24, 05/12/24, 05/13/24, 05/18/24, 05/19/24, 05/25/24, 05/31/24, 06/01/24, 06/24/24, 07/01/24 and 07/06/24 second shift. - 3 MHTs working on 04/22/24 thru 04/26/24, 04/28/24 thru 04/30/24, 05/01/24, 05/02/24, 05/05/24, 05/07/24 thru 05/09/24, 05/14/24 thru 05/17/24, 05/20/24, 05/22/24 thru 05/24/24, 05/28/24, 06/03/24, 06/04/24, 06/07/24, 06/09/24, 06/11/24, 06/14/24 thru 06/18/24, 06/21/24, 06/23/24, 06/27/24, 06/30/24, 07/02/24 thru 07/05/24 and 07/07/24 thru 07/09/24 second shift. - 4 MHTs working on 05/06/24, 05/21/24, 05/27/24, 05/29/24, 05/30/24, 06/02/24, 06/05/24, 06/06/24, 06/08/24, 06/12/24, 06/13/24, 06/19/24, 06/30/24, 06/22/24, 06/25/24, 06/26/24, 06/28/24, 06/29/24 and 07/10/24 second shift. - 2 MHTs working on 05/07/24 and 07/05/24 third shift. - 3 MHTs working on 04/28/24 thru 04/30/24, 05/01/24, 05/02/24, 05/04/24, 05/05/24, 05/11/24, | V 315 | | |

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| V 315 | <p>Continued From page 4</p> <p>05/13/24, 05/16/24, 05/18/24 thru 05/21/24, 05/24/24, 05/25/24, 05/28/24, 05/29/24, 06/01/24, 06/11/24, 06/14/24, 06/15/24, 06/18/24, 06/19/24, 06/19/24, 06/21/24, 07/09/24 and 07/10/24 on third shift.</p> <ul style="list-style-type: none"> - 4 MHTs working on 04/22/24 thru 04/27/24, 05/03/24, 05/06/24, 05/08/24 thru 05/10/24, 05/14/24, 05/14/24, 05/17/24, 05/22/24, 05/23/24, 05/26/24, 05/27/24, 05/30/24, 06/02/24 thru 06/05/24, 06/07/24, 06/09/24, 06/13/24, 06/16/24 thru 06/18/24, 06/20/24, 06/23/24 thru 06/30/24, 07/01/24 thru 07/04/24 and 07/07/24 on third shift. - 5 MHTs working on 06/10/24, 06/12/24, 06/22/24 and 07/08/24 third shift. - 400 Hall census ranged from 5 - 10 clients. - 1 MHT working on 05/10/24, 05/31/24 and 06/10/24 first shift. - 2 MHTs working on 04/22/24, 04/24/24 thru 04/29/24, 05/01/24, 05/02/24, 05/08/24, 05/09/24, 05/11/24, 05/12/24, 05/14/24, 05/15/24, 05/17/24 thru 05/19/24 and 05/21/24 thru 05/26/24 first shift. - 400 Hall census ranged from 7 - 10 clients and 4 minimum MHTs required. - 3 MHTs working on 04/23/24, 05/03/24, 05/06/24, 05/07/24, 05/16/24, 05/20/24 and 05/27/24 thru 05/30/24 first shift. - 1 MHTs working on 05/19/24 second shift. - 2 MHTs working 04/26/24, 04/27/24, 05/01/24, 05/03/24 thru 05/05/24, 05/12/24, 05/13/24, 05/17/24, 05/18/24, 05/22/24, 05/24/24 thru 05/26/24 and 05/31/24 second shift. - 400 Hall census ranged from 7 - 10 clients and 4 minimum MHTs required. - 3 MHTs working on 04/22/24 thru 04/25/24, 04/28/24 thru 04/30/24, 05/02/24, 05/06/24 thru 05/10/24, 05/14/24 thru 05/16/24, 05/20/24, 05/21/24, 05/23/24, 05/27/24, 05/29/24 and | V 315 | | |

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| V 315 | <p>Continued From page 5</p> <p>05/30/24 on second shift.</p> <p>- 2 MHTs working on 04/26/24, 04/30/24, 05/04/24, 05/21/24, 05/24/24, 05/25/24 and 05/31/24 third shift.</p> <p>- 400 Hall census ranged from 7 - 10 clients and 4 minimum MHTs required.</p> <p>- 3 MHTs working on 04/22/24 thru 04/25/24, 04/27/24 thru 04/29/24, 05/01/24 thru 05/03/24, 05/05/24 thru 05/11/24, 05/13/24 thru 05/17/24, 05/19/24, 05/22/24, 05/23/24 and 05/28/24 thru 05/30/24 third shift.</p> <p>Review on 07/12/24 of a facility census of admissions to the facility from 01/01/24 thru 07/11/24 revealed 44 admissions to the facility,</p> <p>Review on 07/12/24 of a plan of correction provided by the facility in response to the complaint and follow up survey dated 03/22/24 revealed:</p> <p>- "Carolina Dunes Behavioral Health takes these findings seriously and has implemented what we feel is an effective plan of action to address the identified deficiencies and monitor for compliance with actions taken. Pursuant to your request, the response is structured as follows: 1) the measures put in place to correct the deficient practice, 2) the measures put in place to prevent the problem from occurring again, 3) the person who will monitor the situation to ensure it will not occur again, and 4) how often the monitoring will take place. To meet the 2:6 mandatory staffing ratio, facility leadership has temporarily paused PRTF (Psychiatric Residential Treatment Facility) admissions until the census reaches 12 on one of the female PRTF units and 6 on the male PRFT unit. This will reduce the number of BHA (Behavioral Health Associate) employees needed to meet the 2:6 ratio until enough BHAs can be recruited to support a higher census. To improve</p> | V 315 | | |

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| V 315 | Continued From page 6 recruitment and retention of direct care staff, the base salary for the position has been increased and the shift differential has been increased to incentivize working evenings and nights, especially on weekends. To ensure that a 2:6 direct care staff to patient ratio is maintained at all times, the Chief Nursing Officer will report daily to the CEO (Chief Executive Officer) in the Safety Committee meeting the number of Behavioral Health Associates scheduled for that day and the following day. The Milieu Managers have been empowered to offer critical shift incentive pat to help cover vacant BHA shifts. A central call-out phone is being provided which is answered by Milieu Manager to ensure that coverage for the vacant shift is obtained in a timely manner. In the event of an unforeseen staff vacancy, the Chief Nursing Officer or designee will notify the designate BHA(s) that they must stay until the appropriate relief can be obtained. The Milieu Manager is responsible for obtaining this relief coverage. To help fill the vacant positions, the facility is also offering a recruitment bonus for any employee who refers a BHA who is hired. The facility is advertising BHA position on multiple platforms, to include the facility website, [jobsite 1], [jobsite 2], [jobsite 3], [jobsite 4], and [jobsite 5]. The facility has also filmed an online commercial promoting employment at the facility in direct care roles raise the awareness and promote recruitment. The facility is offering a sign-on-bonus for BHA's and is offering monthly employee engagement incentive for all employees. Additional scheduling options including different shift rotations and 12-hour shift options are being offered to attract candidates with varying work schedule needs. The facility Recruiter provide daily updates to the CEO on the status and number of BHA applications, interviews, and hires. The facility Recruiter | V 315 | | |

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| V 315 | <p>Continued From page 7</p> <p>provides daily updates to the CEO on the status and number of BHA applications, interviews, and hires. The facility has also joined the [Local] County Chamber of Commerce to increase networking opportunities. The Chief of Nursing Officer and/or Program Manager will monitor staffing ration compliance and report to the CEO twice daily with an update the following day. The Chief Nursing Officer or Program Manager will report to the CEO on staffing ratio compliance both at the daily morning leadership meeting and each afternoon Staffing meeting. The Facility recruiter will also provide a daily update to the CEO on the status and number of BHA applications, interviews, and hires. The Human Resources Director and leadership team will hold bi-weekly new hire orientation classes instead of monthly classes to expedite the onboarding of prospective employees in order to increase hiring ahead of turnover. These bi-weekly new hire orientations will continue until staffing levels are adequate to maintain proper ratios at all times on all shifts. In addition to the base salary increased being offered to the BHAs, the shift differentials have been increased to promote coverage of the historically more difficult to cover shifts on evenings and weekends. To help promoted employee retention and minimize turnover and vacant positions, the New Employee Orientation schedule has been revised to promote employee engagement. Facility Managers also meet with new employees at regular intervals to discuss engagement and satisfaction, training needs, etc. Nursing and Program leadership are developing a Preceptor/Mentor Program that will include training of BHA-2 employees as Preceptors for newly hired BHA's and a retention- based financial incentive for Preceptors whose trainees exceed employment milestones. The Chief Nursing Officer is responsible for maintain the</p> | V 315 | | |

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| V 315 | <p>Continued From page 8</p> <p>appropriate 2:6 direct care staff to patient ration. The Chief Nursing Officer will monitor this process daily and report any discrepancies and corrective actions in the CEO in the Safety meeting."</p> <p>Interview on 07/12/24 the Registered Nurse stated:</p> <ul style="list-style-type: none"> - She had worked at the facility for 6 years. - She usually worked first shift. - She worked on different hallways in the PRTF section of the facility. - She also worked in the acute section of the hospital. - There had been ongoing staffing issues at the facility. - There was a nurse on every hallway for the PRTF. - She did not know why the PRTF had specific staffing ratios and the more acute clients had less staff. - She had brought staffing concerns up in the past. <p>Interview on 07/11/24 and 07/12/24 the Director of Quality, Compliance and Risk Management stated:</p> <ul style="list-style-type: none"> - The facility was out of compliance with the staff ratio of 2 staff to 6 clients. - The staff assignment sheets document the staff to client ratios. - The administrative staff could run reports to determine compliance and identify any trends in supervision. - The facility had made a plan to not admit any other male clients on the 400 hallway. - Once the male clients on 400 hallway were discharged that hallway would be closed. - The staff would be utilized on the 100 and 200 hallways to meet ratio. | V 315 | | |

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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 315 | <p>Continued From page 9</p> <ul style="list-style-type: none"> - The 100 and 200 hallways would then be "capped" at 12 clients. - The facility had admitted clients to the facility in 2024. - "We only take the amount of clients that we can safely manage." - There had been no breaches of the facility. - There had been no issues or concerns regarding current staffing ratios. - The facility had instituted various job retention and recruitment efforts. <p>Review on 07/12/24 of the facility plan of protection dated 07/12/24 and signed by the Director of Quality, Compliance and Risk Management revealed:</p> <ul style="list-style-type: none"> - "What immediate action will the facility take to ensure the safety of the consumers in your care? Carolina Dunes (Behavioral Health) froze admission to the 400 unit immediately following the previous survey (03/22/24) and intends to allow this unit to become vacant after all patients discharge. Carolina Dunes is immediately pausing admissions to the other PRTF units and will not resume admissions until a census of 24 is reached (two units of 12 patients each). Carolina Dunes will be able to meet the 2:6 ratio requirement at this census level, which should be reached by August 31, 2024. Thereafter, patients will only be admitted to replace discharges (to the maximum census of 24) until compliant staffing exists to re-open the 400 unit in ratio. To ensure the safety of our current patients until the intended census levels are reached, the CEO will require Nursing leadership to report staffing levels and census twice daily for the current shift and the following day. Where shortages exist, the CEO will require Nursing leadership to report on efforts to fill the vacant shifts, to include the use of incentive payments, which is authorized by the | V 315 | | |

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHH0976 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 07/12/2024 |
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|--------------------|--|---------------|---|--------------------|
| V 315 | <p>Continued From page 10</p> <p>CEO up to the staffing level required for the 2:6 ratio. Carolina Dunes will incorporate a full time Scheduler to assist the Nursing leadership in identifying and covering vacant shifts. The Administrator on Call will be notified of call-outs or other vacancies by Nursing leadership and will work with Nursing leadership to procure safe staffing coverage.</p> <p>- Describe your plans to make sure the above happens . The CEO has already communicated to Intake Director to pause admissions to PRTF per the above. The CEO has also communicated with Nursing leadership regarding staffing expectations and authorized the use of incentive pay per above. Staffing and census level analysis and intervention will be added as standing agenda items in the daily Morning Meeting, Safety Committee Meeting, and afternoon FTE (unknown) meeting."</p> <p>This deficiency has been cited 12 times since 05/10/21.</p> <p>A PRTF provides non-acute inpatient facility care for patients under age 21 with a mental illness or substance abuse/dependency, and who need 24-hour supervision and specialized interventions. Client diagnoses to include Post Traumatic Stress Disorder, Cannabis Abuse-uncomplicated, Major Depressive Disorder, Oppositional Defiant Disorder, Panic Disorder, Disruptive Mood Dysregulation Disorder and Attention Deficit Hyperactivity Disorder. The facility had submitted a plan of correction regarding the failure to maintain staff ratios based on complaint and follow up survey dated 03/22/24. The facility continued to operate without the required staffing ratios of 2 staff to 6 clients and admitted a total of 44 clients in 2024. The fact this facility continued to admit clients</p> | V 315 | | |

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHH0976 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 07/12/2024 |
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|--------------------|--|---------------|---|--------------------|
| V 315 | Continued From page 11 constitutes a Type B rule violation which is detrimental to the health, safety and welfare of the clients. | V 315 | | |