

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0921000</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R-C 07/23/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE GAYNES HOME-A CARING HANDS SITE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3100 LAKE BARKLEY WAY FUQUAY VARINA, NC 27526</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint and limited follow-up survey was completed on 7/23/24. The complaints were substantiated (Intake #NC00218113 and #NC00218109). This was a limited follow up survey, only 10A NCAC 27G .0604 Incident Reporting Requirements (V367) and G.S. 131 E-256 HCPR - Notification, Allegations, &amp; Protection (V132) were reviewed for compliance. The following was brought back into compliance: 10A NCAC 27G .0604 Incident Report Requirements (V367). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living.</p> <p>The facility is licensed for 2 and currently has a census of 0. The survey sample consisted of audits of 2 former clients.</p>	V 000		
V 105	<p>27G .0201 (A) (1-7) Governing Body Policies</p> <p>10A NCAC 27G .0201 GOVERNING BODY POLICIES</p> <p>(a) The governing body responsible for each facility or service shall develop and implement written policies for the following:</p> <p>(1) delegation of management authority for the operation of the facility and services;</p> <p>(2) criteria for admission;</p> <p>(3) criteria for discharge;</p> <p>(4) admission assessments, including:</p> <p>(A) who will perform the assessment; and</p> <p>(B) time frames for completing assessment.</p> <p>(5) client record management, including:</p> <p>(A) persons authorized to document;</p> <p>(B) transporting records;</p> <p>(C) safeguard of records against loss, tampering, defacement or use by unauthorized persons;</p>	V 105		

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

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V 105	<p>Continued From page 1</p> <p>(D) assurance of record accessibility to authorized users at all times; and (E) assurance of confidentiality of records. (6) screenings, which shall include: (A) an assessment of the individual's presenting problem or need; (B) an assessment of whether or not the facility can provide services to address the individual's needs; and (C) the disposition, including referrals and recommendations; (7) quality assurance and quality improvement activities, including: (A) composition and activities of a quality assurance and quality improvement committee; (B) written quality assurance and quality improvement plan; (C) methods for monitoring and evaluating the quality and appropriateness of client care, including delineation of client outcomes and utilization of services; (D) professional or clinical supervision, including a requirement that staff who are not qualified professionals and provide direct client services shall be supervised by a qualified professional in that area of service; (E) strategies for improving client care; (F) review of staff qualifications and a determination made to grant treatment/habilitation privileges; (G) review of all fatalities of active clients who were being served in area-operated or contracted residential programs at the time of death; (H) adoption of standards that assure operational and programmatic performance meeting applicable standards of practice. For this purpose, "applicable standards of practice" means a level of competence established with reference to the prevailing and accepted</p>	V 105		

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V 105	<p>Continued From page 2</p> <p>methods, and the degree of knowledge, skill and care exercised by other practitioners in the field;</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to adhere to its discharge policy affecting 2 of 2 former clients (FC #1 &amp; #2). The findings are:</p> <p>Review on 7/3/24 of FC #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted: 10/25/23</li> <li>- Age: 12 years old</li> <li>- Diagnoses: Mild Intellectual Developmental Disability, Post Traumatic Stress Disorder due to physical abuse or neglect, Attention Deficit Hyperactivity Disorder, Intermittent Explosive Disorder, Disruptive Mood Dysregulation Disorder and Diabetes</li> <li>- Discharged: 6/1/24</li> <li>- No documentation of a discharge summary</li> </ul> <p>Review on 7/2/24 of FC #2's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted: 12/23/23</li> <li>- Age: 15 years old</li> <li>- Diagnoses: Adjustment Disorder and Autism Spectrum Disorder</li> <li>- Discharged: 6/2/24</li> <li>- No documentation of a discharge summary</li> </ul> <p>Review on 7/23/24 of the facility's discharge policy revealed:</p> <ul style="list-style-type: none"> <li>- "...A discharge summary will be completed</li> </ul>	V 105		

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V 105	<p>Continued From page 3</p> <p>within 15 days following the discharge of a resident, whether planned or against medical advice..."</p> <p>Interview on 7/3/24 the Acting Chief Executive Officer (CEO) reported:</p> <ul style="list-style-type: none"> <li>- FC #1 was discharged from the agency</li> <li>- FC #2 was not discharged from the agency but was "removed" from this facility</li> <li>- She and the Director of Operations were responsible for completing discharge summaries</li> <li>- She didn't know that she needed to do a discharge summary when transferring a client to a sister facility</li> </ul> <p>Interview on 7/23/24 the Director of Operations reported:</p> <ul style="list-style-type: none"> <li>- She and the CEO were responsible for discharges</li> <li>- Discharges were not completed for FC #1 and FC #2</li> </ul>	V 105		
V 132	<p>G.S. 131E-256(G) HCPR-Notification, Allegations, &amp; Protection</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY</p> <p>(g) Health care facilities shall ensure that the Department is notified of all allegations against health care personnel, including injuries of unknown source, which appear to be related to any act listed in subdivision (a)(1) of this section. (which includes:</p> <ol style="list-style-type: none"> <li>a. Neglect or abuse of a resident in a healthcare facility or a person to whom home care services as defined by G.S. 131E-136 or hospice services as defined by G.S. 131E-201 are being provided.</li> <li>b. Misappropriation of the property of a resident in a health care facility, as defined in subsection</li> </ol>	V 132		

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V 132	<p>Continued From page 4</p> <p>(b) of this section including places where home care services as defined by G.S. 131E-136 or hospice services as defined by G.S. 131E-201 are being provided.</p> <p>c. Misappropriation of the property of a healthcare facility.</p> <p>d. Diversion of drugs belonging to a health care facility or to a patient or client.</p> <p>e. Fraud against a health care facility or against a patient or client for whom the employee is providing services).</p> <p>Facilities must have evidence that all alleged acts are investigated and must make every effort to protect residents from harm while the investigation is in progress. The results of all investigations must be reported to the Department within five working days of the initial notification to the Department.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to make every effort to protect 1 of 2 former clients (FC #2) from harm while an investigation of abuse was in progress. The findings are:</p> <p>Review on 7/2/24 of FC #2's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted: 12/23/23</li> <li>- Age: 15 years old</li> <li>- Diagnoses: Adjustment Disorder and Autism Spectrum Disorder</li> <li>- Discharged: 6/2/24</li> </ul> <p>Review on 7/2/24 of the Incident Response Improvement System (IRIS) dated 6/3/24 revealed:</p> <ul style="list-style-type: none"> <li>- Incident date: 6/1/24 in which staff #1 slapped FC #1</li> </ul> <p>Review on 7/1/24 of Staff #1's Arrest Report revealed:</p>	V 132		

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V 132	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>- Date/Time Arrested: 6/1/24 at 5:38pm</li> <li>- Charge: Misdemeanor Child Abuse</li> </ul> <p>Interview on 7/2/24 Staff #1 reported:</p> <ul style="list-style-type: none"> <li>- She went home after she was released from jail and continued caring for FC #2</li> <li>- She was not told that she couldn't care for FC #2</li> <li>- FC #2 was removed from her on 6/2/24</li> </ul> <p>Interview on 7/23/24 the Director of Operations reported:</p> <ul style="list-style-type: none"> <li>- She was informed of the allegation of staff #1 slapping FC #1 on 6/1/24 around 10:00pm while she was out of town</li> <li>- FC #1 was taken to the hospital that evening after the incident on 6/1/24</li> <li>- FC #2 remained in the facility with staff #2 until the next morning around 10:00am when the Director of Operations came back from out of town and moved her to a sister facility</li> <li>- Staff #1 kept telling her that no charges were pressed against her and that was why FC #2 stayed in the facility</li> <li>- To her knowledge, staff #1 was at the facility after she was released from jail and she didn't know who provided the direct care and services to FC #2 that night</li> <li>- There were no safeguards put in place for FC #2 until she was discharged from the facility the next morning</li> </ul>	V 132		
V 318	<p>130 .0102 HCPR - 24 Hour Reporting</p> <p>10A NCAC 130 .0102 INVESTIGATING AND REPORTING HEALTH CARE PERSONNEL The reporting by health care facilities to the Department of all allegations against health care personnel as defined in G.S. 131E-256 (a)(1),</p>	V 318		

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V 318	<p>Continued From page 6</p> <p>including injuries of unknown source, shall be done within 24 hours of the health care facility becoming aware of the allegation. The results of the health care facility's investigation shall be submitted to the Department in accordance with G.S. 131E-256(g).</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to report an allegation of abuse to the Health Care Personnel Registry (HCPR) within 24 hours of becoming aware of the allegation. The findings are:</p> <p>Review on 7/2/24 of Staff #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Hired: 6/27/2022</li> <li>- Title: Direct Care Staff</li> </ul> <p>Review on 7/3/24 of Former Client (FC) #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted: 10/25/23</li> <li>- Age: 12 years old</li> <li>- Diagnoses: Mild Intellectual Developmental Disability, Post Traumatic Stress Disorder due to physical abuse or neglect, Attention Deficit Hyperactivity Disorder, Intermittent Explosive Disorder, Disruptive Mood Dysregulation Disorder, and Diabetes</li> <li>- Discharged: 6/1/24</li> </ul> <p>Review on 7/2/24 of the Incident Response Improvement System dated 6/3/24 revealed:</p>	V 318		

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V 318	<p>Continued From page 7</p> <ul style="list-style-type: none"> <li>- Incident date: 6/1/24 in which staff #1 slapped FC #1</li> </ul> <p>Review on 7/23/24 of the 24-Hour Initial Report revealed:</p> <ul style="list-style-type: none"> <li>- Dated: 6/3/24 and signed by the Director of Operations</li> <li>- Incident date: 6/1/24</li> </ul> <p>Interview on 7/23/24 the Director of Operations reported:</p> <ul style="list-style-type: none"> <li>- She was told about the incident on 6/1/24 but was out of town</li> <li>- She completed the HCPR 24-Hour initial report but it was not done until 6/3/24 "due to a bit of miscommunication"</li> <li>- "It wasn't completed until Monday, 6/3/24, because I was not near a computer and I didn't receive all of the information needed to complete it until then"</li> <li>- while she was looking at completing the 72-hour report, the 24-hour report "slipped my mind" and when she realized it, she completed it</li> </ul>	V 318		
V 512	<p>27D .0304 Client Rights - Harm, Abuse, Neglect</p> <p>10A NCAC 27D .0304 PROTECTION FROM HARM, ABUSE, NEGLECT OR EXPLOITATION</p> <p>(a) Employees shall protect clients from harm, abuse, neglect and exploitation in accordance with G.S. 122C-66.</p> <p>(b) Employees shall not subject a client to any sort of abuse or neglect, as defined in 10A NCAC 27C .0102 of this Chapter.</p> <p>(c) Goods or services shall not be sold to or purchased from a client except through established governing body policy.</p> <p>(d) Employees shall use only that degree of force necessary to repel or secure a violent and</p>	V 512		



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V 512	<p>Continued From page 8</p> <p>aggressive client and which is permitted by governing body policy. The degree of force that is necessary depends upon the individual characteristics of the client (such as age, size and physical and mental health) and the degree of aggressiveness displayed by the client. Use of intervention procedures shall be compliance with Subchapter 10A NCAC 27E of this Chapter.</p> <p>(e) Any violation by an employee of Paragraphs (a) through (d) of this Rule shall be grounds for dismissal of the employee.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, 1 of 2 staff (#1) abused 1 of 2 former clients (FC #1). The findings are:</p> <p>Review on 7/2/24 of Staff #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Hired: 6/27/2022</li> <li>- Title: Direct Care Staff</li> </ul> <p>Review on 7/3/24 of FC #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted: 10/25/23</li> <li>- Age: 12 years old</li> <li>- Diagnoses: Mild Intellectual Developmental Disability (IDD), Posttraumatic Stress Disorder (PTSD) due to physical abuse or neglect, Attention Deficit Hyperactivity Disorder (ADHD), Intermittent Explosive Disorder, Disruptive Mood Dysregulation Disorder (DMDD), Diabetes</li> <li>- Discharged: 6/1/24</li> </ul> <p>Review on 7/1/24 of North Carolina Incident Response Improvement System revealed:</p> <ul style="list-style-type: none"> <li>- Level III incident of physical abuse submitted 6/3/24 for FC #1</li> <li>- Incident Description: "Incident took place at</li> </ul>	V 512		

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V 512	<p>Continued From page 9</p> <p>[local trampoline park] with Staff (staff #1). [Local trampoline park] Staff stated that the consumer (FC #1) was refusing to go with [staff #1] and stated to the [local trampoline park] Staff that she wanted to go to the hospital. The consumer was in the ball pit and refused to come out. [Local trampoline park] Staff and [staff #1] attempted to pull and get her out of the ball pit. It was reported by [local trampoline park] Staff witness [staff #1] pull on the consumers shirt to get her out of the pit and then slap her once she got out. [Local trampoline park] staff called the police and reported the incident."</p> <p>- Staff #1 Statement: "On 06/01/2024, we (staff and consumer) went to [local trampoline park] for my consumers and daughters birthday...So [FC #1] and the other client went to get out and [FC #1] could not get out. I went to the staff and asked could they help me get [FC #1] out and they agreed...I reached into the balls to try to pull her out. My hand did go towards her face and then the staff from [local trampoline park] stated they were not allowed to touch any clients that the (Police) officer should have got her out of the [local trampoline park] Balls. the officer was saying that I put my hands on her [FC #1] and I don't remember putting my hands on her."</p> <p>- FC #1 Statement: "On Saturday U was at [local trampoline park] and I couldn't get out of the pit. The staff tried to help me out and they had to call the police. And I couldn't get out cause I was too big. The [local trampoline park] people saw [Staff #1] hit me in the face. She hit me on purpose, not on accident. The police arrested her after she hit me. The police took me to [local psychiatric hospital] but I didn't want to go. My face was hurting a little bit, and that's everything that happened."</p> <p>Review on 7/1/24 of staff #1's Arrest Report dated</p>	V 512		

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V 512	<p>Continued From page 10</p> <p>6/1/24 revealed:</p> <ul style="list-style-type: none"> <li>- Date/Time Arrested: 6/1/24 at 5:38pm</li> <li>- Charge: Misdemeanor Child Abuse</li> </ul> <p>Interview on 7/2/24 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- She had a party at a local trampoline park on 6/1/24 for FC #1's birthday</li> <li>- FC #1 got into the foam pit and could not get out</li> <li>- She asked trampoline park floor staff to help get FC #1 out but they were still not able to lift her out of the foam pit</li> <li>- FC #1 started screaming and refused to leave the foam pit</li> <li>- She reached in to assist FC #1 and local trampoline park staff stated she hit FC #1</li> <li>- "I swear it wasn't intentional, I was just trying to get her out."</li> <li>- FC #1 "often gets upset and starts telling stories"</li> <li>- The manager at the local trampoline park was asking questions and FC #1 "was telling them stories about what happened so they said that they had to call the police"</li> <li>- She was arrested 6/1/24</li> <li>- FC #1 was removed from the facility on 6/1/24</li> </ul> <p>Interview on 7/3/24 FC #1's Department of Social Services (DSS) legal guardian reported:</p> <ul style="list-style-type: none"> <li>- FC #1 came into the custody of DSS on 6/2/17</li> <li>- She had been FC #1's guardian the majority of the time FC #1 had been in custody</li> <li>- Last visited FC #1 in the facility on 5/31/24 and felt she was doing well</li> <li>- FC #1 had a history of multiple placements but placement with staff #1 was her longest</li> <li>- She was notified on 6/1/24 of staff #1 slapping FC #1 at the trampoline park by the local</li> </ul>	V 512		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0921000</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R-C 07/23/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE GAYNES HOME-A CARING HANDS SITE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3100 LAKE BARKLEY WAY FUQUAY VARINA, NC 27526</b>
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V 512	<p>Continued From page 11</p> <p>police department</p> <ul style="list-style-type: none"> <li>- FC #1 was taken to a local psychiatric hospital and still remained hospitalized</li> <li>- FC #1 had no history of making false statements</li> <li>- "Might under report (incidents) if she (FC #1) has a bond or a relationship with them (provider)."</li> <li>- Staff #1 denied slapping FC #1 and FC #1 denied being slapped</li> <li>- Staff #1 also denied being arrested</li> <li>- It was difficult to manage FC #1's behaviors and understood how "someone could get frustrated"</li> <li>- She had not seen the video from the trampoline park regarding the alleged abuse</li> </ul> <p>Interview on 7/16/24 the local trampoline park Assistant General Manager (AGM) #1 reported:</p> <ul style="list-style-type: none"> <li>- Had surveillance video of the incident on 6/1/24 but was only able to share it with the local police department</li> <li>- On 6/1/24, staff #1 and FC #1 were at the trampoline park for a birthday party</li> <li>- FC #1 went into the foam pit and staff #1 was trying to get her out</li> <li>- 2 trampoline park floor staff went to assist staff #1</li> <li>- Staff #1 was "yelling" at FC #1 and the trampoline park floor staff saw her slap FC #1</li> <li>- The floor staff reported the incident to her and she talked to FC #1</li> <li>- FC #1 stated to her that staff #1 was "hitting her" and she observed FC #1 "start screaming" whenever staff #1 came near her</li> <li>- Asked FC #1 if she wanted to go with staff #1 and FC #1 asked that the police be called</li> <li>- FC #1 did not come out of the foam pit until the police arrived</li> <li>- Staff #1 left but FC #1 stayed at the trampoline park with the police</li> </ul>	V 512		

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V 512	<p>Continued From page 12</p> <p>Interview on 7/16/24 the local trampoline park AGM #2 reported:</p> <ul style="list-style-type: none"> <li>- FC #1 stated that staff #1 hit her "all of the time"</li> <li>- FC #1 remained at the trampoline park with the police and with the floor staff for about 2 hours</li> <li>- Had seen the video and thought the angle of the video obscured the incident some but it was "kind of clear" that FC #1 was "slapped" by staff #1</li> </ul> <p>Interview on 7/16/24 the local trampoline park floor staff #1 reported:</p> <ul style="list-style-type: none"> <li>- Staff #1 called him over to assist with pulling FC #1 out of the foam pit</li> <li>- He called over another floor staff to assist because FC #1 was near the bottom of the pit</li> <li>- Staff #1 was getting "more and more irritated and then she reached over and slapped her (FC #1), open hand"</li> <li>- When he saw the slap, he reported it to his managers</li> <li>- The slap was on FC #1's face, around the left eye/cheek area</li> <li>- FC #1 told AGM #1 that she would not get out of the foam pit until the police came</li> <li>- Staff #1 left and FC #1 stayed with the police</li> </ul> <p>Interview on 7/16/24 the local trampoline park floor staff #2 reported:</p> <ul style="list-style-type: none"> <li>- He was called over to assist another trampoline park floor staff with assisting FC #1 out of the foam pit</li> <li>- Staff #1 "was getting upset because [FC #1] did not want to get out" of the foam pit</li> <li>- He saw staff #1 slap FC #1 across the left side of her face</li> <li>- The police were called and FC #1 would not</li> </ul>	V 512		

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V 512	<p>Continued From page 13</p> <p>leave the foam pit until they arrived</p> <ul style="list-style-type: none"> <li>- FC #1 did not want to be near staff #1</li> </ul> <p>Interview on 7/16/24 the local Child Protective Services Social Worker reported:</p> <ul style="list-style-type: none"> <li>- Staff #1 denied slapping FC #1 on 6/1/24</li> <li>- She had tried to get the video from the local trampoline park but was told the video was with the police</li> <li>- Contacted the Assistant District Attorney who reported "the system" was down and she would not be able to get the video until it was active again</li> <li>- She wanted to view the video and speak with FC #1 to have more information and put things together</li> </ul> <p>Interview on 7/17/24 the local police department arresting officer reported:</p> <ul style="list-style-type: none"> <li>- Received a call on 6/1/24 about a disturbance at a local trampoline park</li> <li>- FC #1 was having a hard time getting out of the foam pit</li> <li>- When he arrived, the staff at the trampoline park reported that staff #1 had slapped FC #1</li> <li>- Staff #1 stated that FC #1 always said she was hurt and wanted to go to the hospital</li> <li>- He viewed the video of the incident provided by the trampoline park staff</li> <li>- "She (staff #1) admitted to striking her (FC #1). Well, she said she may have struck her. I let her know it was clear on the video that she struck her....Yes, on the video she open hand slapped her across the face."</li> <li>- "...I ultimately did arrest her because she did meet the elements of the crime."</li> <li>- Took staff #1 into custody from the trampoline park and FC #1 remained at the trampoline park in police custody</li> <li>- FC #1 was taken from the trampoline park to</li> </ul>	V 512		

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V 512	<p>Continued From page 14</p> <p>the psychiatric hospital</p> <p>Interview on 7/23/24 the Director of Operations (DOO) reported:</p> <ul style="list-style-type: none"> <li>- On 6/1/24, FC #1 was "stuck in the ball pit" at a local trampoline park and "couldn't get out"</li> <li>- The trampoline park staff and staff #1 were trying to help FC #1 out of the ball pit but FC #1 kept slipping</li> <li>- FC #1 stated to her "they (trampoline park staff) said she hit me"</li> <li>- Staff #1 stated she may have hit her but it was not intentional</li> <li>- Staff #1 reported that she viewed the video of the incident at the trampoline park and admitted that it did look like she slapped FC #1</li> <li>- She was notified of the incident at the local trampoline park around 10:00pm on 6/1/24</li> <li>- An on-call CPS worker for a neighboring county notified her</li> <li>- The CPS worker was notified by the arresting officer for the local police department</li> <li>- Staff #1 told the CPS worker that no charges were filed against her</li> <li>- The arresting officer for the local police department confirmed for CPS that charges were filed</li> <li>- FC #1 was taken to the hospital on 6/1/24</li> <li>- She texted with staff #1 the night of 6/1/24 and staff #1 told her that no charges had been filed against her</li> <li>- She met with staff #1 in the facility around 10:00am on 6/2/24</li> <li>- Staff #1 "barely talked to me but she did say she didn't hit [FC #1]."</li> <li>- Told staff #1 on 6/2/24 that she would not be able to have clients in her home until there was a completed investigation</li> <li>- Staff #1 met with the Acting Corporate Executive Officer (CEO) on 6/3/24 in the office</li> </ul>	V 512		

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V 512	<p>Continued From page 15</p> <p>and was given a verbal suspension</p> <ul style="list-style-type: none"> <li>- There was nothing in writing regarding the suspension</li> </ul> <p>Interview on 7/1/24 the Acting CEO reported:</p> <ul style="list-style-type: none"> <li>- Staff #1 was "temporarily suspended" while final decisions were made</li> <li>- FC #1 was hospitalized on 6/1/24</li> <li>- She did not think she would be able to connect with staff #1, "she's not answering our calls"</li> </ul> <p>Review on 7/23/24 of the Plan of Protection dated 7/23/24 signed by the DOO revealed:</p> <ul style="list-style-type: none"> <li>- "What immediate action will the facility take to ensure the safety of the consumers in your care?               <ul style="list-style-type: none"> <li>- Caring Hands S.E.E. LLC (Licensee) will make sure that all AFL homes are given extra resources on de-escalation skills during a crisis, all staff were retrained in E.B.P.I (Evidence Based Protective Interventions) and offered respite for any homes needing a break. We as the admin (administrative) staff will also make sure that we put in place a procedure to follow to make sure that no incident report is missed or not done in a timely manner, to make sure Caring hands S.E.E. LLC is always compliant with state guidelines. Caring hands also intends to make sure our emergency person and back up staff are in place in case a consumer needs to be removed from a home at any time.</li> <li>- Describe your plans to make sure the above happens.                   <ul style="list-style-type: none"> <li>- All employees will be retrained in EBPI and Skills system to make sure they are prepared and given the proper tools ad resources to handle a consumer in a crisis. Also, the QP's (Qualified Professional) will reach out to their Caseloads and make sure they are okay and go over each employees Job description and their Means to be</li> </ul> </li> </ul> </li> </ul>	V 512		



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V 512	<p>Continued From page 16</p> <p>successful. The admin staff will discuss the Incident Report procedure for Caring hands and how and when everything should be documented and the timeframes that the company must follow. Caring Hands will also create a policy for a Child being removed from the home in the event of an allegations and what steps need to be followed by the QP and Admin staff."</p> <p>FC #1's diagnoses were Mild IDD, PTSD due to physical abuse or neglect, ADHD, Intermittent Explosive Disorder, DMDD, and Diabetes. Staff #1 took FC #1 to a local trampoline park on 6/1/24. While at the trampoline park, FC #1 was not able to get out of the foam pit on her own, and staff #1 attempted to assist her. FC #1 refused to get out of the foam pit, and while still trying to pull her out, staff #1 slapped FC #1 across the face with an open hand. Two employees of the local trampoline park witnessed staff #1 slap FC #1, and the incident was on the trampoline park surveillance video. The trampoline park AGM #1 contacted the local police department. The responding officer arrested staff #1 from the trampoline park on 6/1/24. Staff #1 was charged with Misdemeanor Child Abuse. FC #1 remained in the care of the local police department following the arrest of staff #1. FC #1 was taken to a psychiatric hospital upon leaving the trampoline park. This deficiency constitutes a Type A1 rule violation for serious abuse and must be corrected within 23 days.</p>	V 512		