

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on 8/7/24. The complaints were substantiated intake (#NC00218300) & (NC00220334). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 107	<p>27G .0202 (A-E) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(a) All facilities shall have a written job description for the director and each staff position which:</p> <ul style="list-style-type: none"> (1) specifies the minimum level of education, competency, work experience and other qualifications for the position; (2) specifies the duties and responsibilities of the position; (3) is signed by the staff member and the supervisor; and (4) is retained in the staff member's file. <p>(b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility:</p> <ul style="list-style-type: none"> (1) is at least 18 years of age; (2) is able to read, write, understand and follow directions; (3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and (4) has no substantiated findings of abuse or 	V 107		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Division of Health Service Regulation

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V 107	<p>Continued From page 1</p> <p>neglect listed on the North Carolina Health Care Personnel Registry.</p> <p>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to have a completed personnel record for 1 of 2 staff (#2). The findings are:</p> <p>Review on 7/30/24 of staff #2's record revealed:</p> <ul style="list-style-type: none"> - hire date 6/1/24 - no documentation of minimum level of education, competency, work experience, skills and other qualifications <p>During interview on 7/25/24 staff #2 reported:</p> <ul style="list-style-type: none"> - began employment almost 2 months ago - worked weekends from Friday - Monday 	V 107		

Division of Health Service Regulation

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V 107	Continued From page 2 - Licensee/Registered Nurse (RN) hired him by telephone - did not ask him to sign any paperwork During interview on 8/1/24 the Licensee/RN reported: - met with staff #2 a few weeks ago at the facility - he completed paperwork at that time This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 107		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross,	V 108		

Division of Health Service Regulation

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V 108	<p>Continued From page 3</p> <p>the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 1 of 2 staff (#2) had the minimum employee trainings. The findings are:</p> <p>Review on 7/30/24 of staff #2's record revealed:</p> <ul style="list-style-type: none"> - hire date 6/1/24 - no documentation of the following: - general organizational orientation; - training on client rights and confidentiality - training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan - training in infectious diseases and bloodborne pathogens. - trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation <p>During interview on 7/25/24 staff #2 reported:</p> <ul style="list-style-type: none"> - began employment almost 2 months ago - worked weekends from Friday - Monday - worked alone - Licensee/Registered Nurse (RN) hired him by telephone - had not provided any trainings 	V 108		

Division of Health Service Regulation

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V 108	Continued From page 4 During interview on 8/1/24 the Licensee/RN reported: - met with staff #2 a few weeks ago at the facility - he completed paperwork & some trainings at that time - first aid/CPR had to be scheduled - she removed staff #2 from the schedule until all trainings completed This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 108		
V 110	27G .0204 Training/Supervision Paraprofessionals 10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter. (c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served. (d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (e) 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	V 110		

Division of Health Service Regulation

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V 110	<p>Continued From page 5</p> <p>(7) clinical skills. (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 2 of 2 staff (#1 & #2) demonstrated knowledge, skills and abilities required by the population served. The findings are:</p> <p>Review on 7/30/24 of staff #1's record revealed: - hire date 2/16/24</p> <p>Review on 7/30/24 of staff #2's record revealed: - hire date 6/1/24</p> <p>During interview on 7/17/24 client #1 reported: - staff #1 does not cook at the facility - the clients rotated preparing meals</p> <p>During interview on 7/25/24 client #3 reported: - he and client #1 prepared meals at facility - client #1 only knew how to cook spaghetti and roman noodles - staff #1 & staff #2 do not cook at facility - he will cook pork chops and steak - he did not "mind" cooking sometimes</p> <p>During interview on 7/17/24 client #4 reported: - client #3 cooked at the facility - he cooked "good food"</p>	V 110		

Division of Health Service Regulation

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V 110	<p>Continued From page 6</p> <p>During interview on 7/25/24 staff #1 reported:</p> <ul style="list-style-type: none"> - he does not know how to cook American food - the clients do not like the way he cooked - they will throw his food in the trash when he cooked - the Qualified Professional (QP) requested he Google recipes <p>During interview on 7/25/24 staff #2 reported:</p> <ul style="list-style-type: none"> - client #3 prepared meals for "everyone" at facility - "he loved to cook" <p>During interview on 7/30/24 the QP reported:</p> <ul style="list-style-type: none"> - she had other staff come to facility and demonstrate how to cook for staff #1 - she told him to Google recipes - given him simple recipes to cook - showed him how to use a crockpot - would discuss further with Licensee/Registered Nurse (RN) <p>During interview on 8/1/24 the Licensee/RN reported:</p> <ul style="list-style-type: none"> - she had demonstrated to staff #1 how to cook American food - will have someone come to the facility to monitor staff cook 	V 110		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs.</p>	V 118		

Division of Health Service Regulation

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V 118	<p>Continued From page 7</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure medications were administered on the written order of a physician for 1 of 3 audited clients (#4). The findings are:</p> <p>Review on 7/25/24 of client #4's record revealed: - admitted 11/27/22 - diagnoses: Hypertension, bilateral hearing loss, Paranoid Schizophrenia, Obesity,</p>	V 118		

Division of Health Service Regulation

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V 118	<p>Continued From page 8</p> <p>Hyperglycemia, Type 2 diabetes with stage 3 chronic kidney disease with long term use of insulin</p> <ul style="list-style-type: none"> - a physician's order dated 10/8/23: Humalog sliding scale (Diabetes) - a physician's order dated 1/19/24: check blood sugars (TID) <p>Review on 8/1/24 of the facility's May 2024 Humalog Sliding scale and Blood sugar log for client #4 revealed:</p> <ul style="list-style-type: none"> - no documentation of Humalog sliding scale blood sugars or blood sugars recorded TID <p>During interview on 8/1/24 the Qualified Professional reported:</p> <ul style="list-style-type: none"> - client #4 was transported to the hospital in June 2024 by emergency services (EMS) - staff gave May 2024 Humalog sliding scale blood sugars and blood sugars recorded TID to EMS - informed staff to give EMS a copy in the future <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		
V 133	<p>G.S. 122C-80 Criminal History Record Check</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</p> <p>(a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter.</p> <p>(b) Requirement. - An offer of employment by a</p>	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 9</p> <p>provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared</p>	V 133		
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V 133	<p>Continued From page 10</p> <p>with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p> <ol style="list-style-type: none"> (1) The level and seriousness of the crime. (2) The date of the crime. (3) The age of the person at the time of the conviction. (4) The circumstances surrounding the commission of the crime, if known. (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled. (6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed. 	V 133		

Division of Health Service Regulation

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V 133	<p>Continued From page 11</p> <p>(7) The subsequent commission by the person of a relevant offense. The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:</p> <p>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual. (2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.</p> <p>(e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious</p>	V 133		

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V 133	<p>Continued From page 12</p> <p>Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p> <p>(1) The provider shall not employ an applicant</p>	V 133		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 133	<p>Continued From page 13</p> <p>prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10. (2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 2 of 2 staff (#1 & #2) had criminal record checks completed. The findings are:</p> <p>Review on 7/30/24 of staff #1's record revealed:</p> <ul style="list-style-type: none"> - hire date 2/16/24 - no documentation of a criminal record check <p>Review on 7/30/24 of staff #2's record revealed:</p> <ul style="list-style-type: none"> - hire date 6/1/24 - no documentation of a criminal record check <p>During interview on 8/1/24 the Licensee/Registered Nurse reported:</p> <ul style="list-style-type: none"> - she thought a criminal record check was completed for staff #1 after the last survey - would complete criminal record checks for both staff <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 133		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 291	Continued From page 14	V 291		
V 291	<p>27G .5603 Supervised Living - Operations</p> <p>10A NCAC 27G .5603 OPERATIONS</p> <p>(a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity.</p> <p>(b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management.</p> <p>(c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals.</p> <p>(d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed coordinate with other qualified professionals who are responsible for</p>	V 291		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 291	<p>Continued From page 15</p> <p>treatment/habilitation or case management for 1 of 3 audited clients (#5). The findings are:</p> <p>Review on 7/25/24 of client #5's record revealed:</p> <ul style="list-style-type: none"> - admitted 5/25/24 - diagnoses: Schizoaffective Disorder and Cannabis - no physician's order for Abilify 400mg inject monthly - no documentation the Abilify was administered - no documentation client #5's physician was aware of missed medications <p>During interview on 8/1/24 the Licensee/Registered Nurse reported:</p> <ul style="list-style-type: none"> - he missed the Abilify shots - he refused to go to the appointments but she tried to encourage him to attend the physician appointments <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 291		
V 536	<p>27E .0107 Client Rights - Training on Alt to Rest. Int.</p> <p>10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS</p> <p>(a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions.</p> <p>(b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in</p>	V 536		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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V 536	<p>Continued From page 16</p> <p>which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; 	V 536		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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V 536	<p>Continued From page 17</p> <p>(8) communication strategies for defusing and de-escalating potentially dangerous behavior; and</p> <p>(9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name;</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p>	V 536		

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 536	<p>Continued From page 18</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p>	V 536		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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V 536	<p>Continued From page 19</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure 1 of 2 staff (#2) was trained in alternatives to restrictive intervention. The findings are:</p> <p>Review on 7/30/24 of staff #2's record revealed:</p> <ul style="list-style-type: none"> - hire date 6/1/24 - no documentation of restrictive intervention <p>During interview on 7/25/24 staff #2 reported:</p> <ul style="list-style-type: none"> - began employment almost 2 months ago - worked weekends from Friday - Monday - worked alone - Licensee/Registered Nurse (RN) hired him by telephone - had not provided any trainings <p>During interview on 8/1/24 the Licensee/Registered Nurse reported:</p> <ul style="list-style-type: none"> - staff #1 was given the trainer's contact information - she needed to follow up to see if the trainer was contacted <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 536		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(c) Each facility and its grounds shall be</p>	V 736		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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V 736	<p>Continued From page 20</p> <p>maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility was not maintained in a safe, clean, attractive, orderly manner & free from offensive odor. The findings are:</p> <p>Observation on 7/30/24 between 3:18pm - 3:26pm of the facility revealed the following:</p> <ul style="list-style-type: none"> - Entrance to the doorway had no screen door - The front door had dried up brown substance that ran down the door - Cigarette butts and empty cigarette packs on the front porch and ground in front of the porch - 1st bathroom: <ul style="list-style-type: none"> - Floor stained with black and brown substance - Odor of urine - The sink cabinet door was missing - Bedroom of client #3 & client #4: <ul style="list-style-type: none"> - Several piles of clothes lined the bedroom wall - Some of the clothes were in clothes basket & some not - client #3 & client #4's bathroom: <ul style="list-style-type: none"> - Missing toilet lid - Smelled of urine - Their bathroom closet full of miscellaneous items along with clothes piled on the floor - Client #5's bedroom: <ul style="list-style-type: none"> - Clothes throughout bedroom floor - Bed unmade with brown stains on the white sheets - Clothes piled on a couch - Missing slates in blinds some broken in half <p>During interview on 7/30/24 client #3 reported:</p> <ul style="list-style-type: none"> - the pile of clothes were his winter clothes and 	V 736		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 736	<p>Continued From page 21</p> <p>needed to be hung up</p> <p>During interview on 7/30/24 client #4 reported:</p> <ul style="list-style-type: none"> - he recently went to the hospital and when he returned, the room was "destroyed" <p>During interview on 7/30/24 staff #1 reported:</p> <ul style="list-style-type: none"> - he encouraged the clients to keep their room & bathroom clean - made the Qualified Professional (QP) & Licensee/Registered Nurse (L/RN) aware of repairs and cleanliness of bedrooms - They both spoke with the clients regarding the cleanliness of the facility - "The clients cleaned at their own time" <p>During interview on 7/30/24 the QP reported:</p> <ul style="list-style-type: none"> - Discussed the condition of the facility with staff & clients - the L/RN will sometimes come and assist clients with the cleanliness of the facility <p>During interview on 8/1/24 the L/RN reported:</p> <ul style="list-style-type: none"> - couple of months ago she & staff #1 cleaned the facility - continuously encouraged staff and clients to keep the facility clean 	V 736		
V 738	<p>27G .0303(d) Pest Control</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(d) Buildings shall be kept free from insects and rodents.</p>	V 738		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-836	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 08/07/2024
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME AND COMMUNITY SERVICE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 NORMANDY STREET CARY, NC 27511
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V 738	<p>Continued From page 22</p> <p>This Rule is not met as evidenced by: Based on interview the facility failed to keep the facility free of insects. The findings are:</p> <p>During interview on 7/19/24 client #1 reported:</p> <ul style="list-style-type: none"> - the bedbugs came and went - "must be in the walls" <p>During interview on 7/19/24 client #3 reported:</p> <ul style="list-style-type: none"> - had bedbugs in his bed - had a few bites on right arm and legs - the exterminator had not been to the facility - the QP and the Licensee/Registered Nurse (RN) were aware <p>During interview on 8/1/24 Terminix representative reported:</p> <ul style="list-style-type: none"> - visited the facility on 7/25/24 - active bedbugs in 1 bedroom in the back of the facility - he found 8 bedbugs & treated the bedroom - bedbugs could live in the walls but he treated the walls - he spoke with the Licensee/RN - when clients visited other homes or hospital facilities they could bring bedbugs to the facility - cleanliness was not a result of bedbugs - bedbugs were transported on people's bodies <p>During interview on 7/19/24 & 8/7/24 the Qualified Professional (QP) reported:</p> <ul style="list-style-type: none"> - the facility had bedbugs - the bedbugs appeared to be in client #3 and client #4's bedroom - the couch & mattress in client #3 & client #4's bedroom needed to be disposed of - all clothes needed to be washed and dried away from the facility - planned to speak with the Licensee/RN 	V 738		