

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601519	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 08/01/2024
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NAME OF PROVIDER OR SUPPLIER KENAN COTTAGE THOMPSON CHILD & FAMILY FOC	STREET ADDRESS, CITY, STATE, ZIP CODE 6736 SAINT PETER'S LANE MATTHEWS, NC 28105
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	<p>INITIAL COMMENTS</p> <p>An annual, complaint and follow up survey was completed on 8-1-24. The complaint was substantiated (#NC00217477). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1800 Intensive Residential Treatment for Children or Adolescents.</p> <p>This facility is licensed for 9 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 000	<p style="text-align: center;">RECEIVED AUG 22 2024 DHSR-MH Licensure Sect</p>	
V 108	<p>27G .0202 (F-I) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <p>(1) general organizational orientation;</p> <p>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</p> <p>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</p> <p>(4) training in infectious diseases and bloodborne pathogens.</p> <p>(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</p>	V 108	<p>Correction:</p> <ol style="list-style-type: none"> 1. Program Supervisor to be responsible for staff training compliance throughout CSP program. 2. Program Supervisor has run reports in Relias and has reached out to all staff that need to be in compliance with required trainings. 3. Staff identified in the survey have been taken off the schedules until they completed required trainings. <p>Prevention:</p> <ol style="list-style-type: none"> 1. Program Supervisor will be responsible for running a weekly training compliance roster which shows outstanding staff trainings. 2. Supervisor/coaches will follow-up with staff weekly informing them of upcoming trainings as well as trainings that are out of compliance. 3. They will have one week to complete their trainings before the training roster is run again. 4. Staff will show completion evidence to Program Supervisor to ensure they can be on schedule. <p>Monitoring:</p> <ol style="list-style-type: none"> 1. Program Supervisor will inform Coaches to follow-up with those staff that are on the weekly roster to remind them of their training compliance status. 	<p>9/1/24</p> <p>Ongoing</p> <p>Ongoing</p>

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Denise Mitchell *Quality Improvement Specialist* *8/15/24*

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V 108	<p>Continued From page 1</p> <p>techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.</p> <p>(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 interviews the facility failed to ensure that all staff were trained to meet the needs of the clients, effecting one of four audited staff (Staff#1). The findings are:</p> <p>Review on 7-16-24 of Client #1's record revealed: -Admitted 5-3-24. -11 years old. -Diagnoses include: Autism Spectrum Disorder (ASD), Attention Deficit/Hyperactivity Disorder, and Conduct Disorder.</p> <p>Review on 7-16-24 of Client #2's record revealed: -Admitted 4-30-24. -11 years old. -Diagnoses include: Mild Intellectual Developmental Disorder (IDD), Oppositional Defiant Disorder Attention-Deficit /Hyperactivity Disorder, combined type, other reactions to severe stress.</p> <p>Review on 7-22-24 of Staff #1's personnel record revealed: -Hire date of 4-9-24. -No training in IDD or ASD.</p>	V 108		

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V 736	<p>Continued From page 3</p> <ul style="list-style-type: none"> -Room #4: marks on the walls and the bathroom dirty. -Room #5: toilet top did not fit, writing on the walls and bathroom door jam. <p>Interview on 7-22-24 with Staff #1 revealed: -They assist the clients with the cleaning.</p> <p>Interview on 7-22-24 with Staff #2 revealed: -It was the responsibility of both staff and clients to keep the facility clean.</p> <p>Interview on 8-1-24 with the Program Supervisor revealed: -They would make sure the staff knew to check behind the clients to make sure the facility is clean.</p> <p>This deficiency constitutes a recited deficiency and must be corrected with 30 days.</p>	V 736		