

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-956	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 08/14/2024
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NAME OF PROVIDER OR SUPPLIER HARLEE MAC GROUP HOME III	STREET ADDRESS, CITY, STATE, ZIP CODE 2226 MEMORY STREET FAYETTEVILLE, NC 28304
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on August 14, 2024. 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 4. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <ol style="list-style-type: none"> (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained. 	V 112		

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

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to develop and implement goals and strategies in the treatment/habilitation plan to address the client's needs for 2 of 3 audited clients. The findings are:</p> <p>Finding #1 Review on 8/13/24 of client #1's record revealed: -37 year old female. -Admitted on 10/7/22. -Diagnoses of Schizoaffective Disorder-Bipolar Type, Vitamin B12 Deficiency, Hypothyroidism and Slow Transition Constipation.</p> <p>Review on 8/13/24 of client #1's treatment plan dated 6/20/24 revealed no facility goals, strategies or staff responsibilities.</p> <p>Finding #2 Review on 8/13/24 of client #3's record revealed: -31 year old male. -Admitted on 4/3/17. -Diagnoses of Paranoid Schizophrenia, Schizophrenia and Hypertension.</p> <p>Review on 8/13/24 of client #3's treatment plan dated 10/4/23 revealed no facility goals, strategies or staff responsibilities.</p> <p>Interview on 8/13/24 client #3 stated: -He did not know what his goals were while at the</p>	V 112		

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V 112	Continued From page 2 facility. Interview on 8/14/24 the Qualified Professional stated: -The Psychosocial Rehabilitation (PSR) developed the treatment plan for client #1 and client #3. -She spoke with the PSR to update the treatment plan to include the facility goals and strategies.	V 112		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which	V 289		

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V 289	<p>Continued From page 3</p> <p>serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses;</p> <p>(4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses;</p> <p>(5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or</p> <p>(6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e) (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL).</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the</p>	V 289		
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V 289	<p>Continued From page 4</p> <p>facility failed to operate within the scope of licensure and served as the private residence of 1 of 1 direct care staff (Staff #1). The findings are:</p> <p>Review on 8/13/24 of staff #1's record revealed: -Hire Date:1/29/18 -Title: Residential Staff</p> <p>Interview on 8/13/24 staff #1 stated: -She was the only staff. -She lived at the facility full time. -She did not have another residence.</p> <p>Interview on 8/14/24 the Qualified Professional stated: -Staff #1 must have "misunderstood" and did not reside at the facility. -Staff #1 had another residence. -Staff #1 did not take much time off and had not taken time off in over a year.</p>	V 289		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be 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 interviews, the facility was not maintained in a safe, clean and attractive manner. The findings are:</p> <p>Observation on 8/13/24 at approximately 12:00pm during a tour of the facility revealed: - An approximately 3 inch (in) x 5 in white plastered area on a beige wall by the dining table.</p>	V 736		

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V 736	<p>Continued From page 5</p> <ul style="list-style-type: none"> - The stove burners on the stove and oven did not work. - The dishwasher identified by staff #1 was covered and taped in a black covering. - The upstairs hall bathroom had a shower/tub combination that had dark stained caulking; a painted surface outside of the tub was discolored. - Client #2's carpet was heavily stained and dark in several areas; the 3 drawer tv stand was missing a handle on the 2 drawer and the dresser's 4th drawer was off track and the top drawer missing a handle. - The shower in the downstairs bathroom had caulking and sheetrock chipping away at the top and dark stain in the bottom of the shower. - The downstairs living room had a couch that with the right side pillow ripped; a roll of linoleum on the floor behind the couch; the frame around the door had an approximately 6 inch crack on the let side; the were 2 chairs outside of the slide door- 1 with a broken and cracked seat and 1 with a broken leg on the edge. <p>Interview on 8/13/24 staff #1 stated:</p> <ul style="list-style-type: none"> - The dishwasher was like that when she started. - The clients sometimes used the outside chairs to sit in when they smoked. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		