

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: mhl067-049	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/22/2024
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NAME OF PROVIDER OR SUPPLIER CAPE COD	STREET ADDRESS, CITY, STATE, ZIP CODE 202 EAST DORIS AVENUE JACKSONVILLE, NC 28540
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on August 22, 20024. The complaints were substantiated NC00220422 and NC0022313. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G.5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for 3 and has a current census of 3. The survey sample consisted of audits of 2 current clients.</p>	V 000		
V 109	<p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based</p>	V 109	<p>V 109 27G .0203</p> <p>Based on the conclusion of the survey, it was cited for a deficiency on Privileging and Training Professionals. CRS has discussed this issue with QP and the Program Manager. Each staff I the home did receive a disciplinary action for not following the notification of a complaint at the onset of the incident.</p> <p>The QP has been directed to complete training on:</p> <ul style="list-style-type: none"> • Corporate Compliance • Critical Incident Reporting • Customer Service • Rights and Responsibilities • Unique Needs of the Person <p>It was also determined that when in doubt ask for assistance from other QP to assist with allegations and conclusions if necessary. Training has begun and ALL Trainings will be completed by 9/12/2024. Certificates will be placed in Clinical Folder for review. QP will also take a refresher annually</p>	

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SEP 16 2024

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE
Carol R. Wilson
President 9/5/2024

TITLE _____ (X6) DATE

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: mh1067-049	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/22/2024
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V 109	<p>Continued From page 1</p> <p>employment system in the State Plan for MH/DD/SAS.</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.</p> <p>(g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, 1 of 1 Qualified Professional (QP) failed to demonstrate the knowledge, skills and abilities required by the population served. The findings are:</p> <p>Review on 8/14/24 of the QP's personnel file revealed: -Hire date of 11/26/07. -Job title of QP.</p> <p>Review on 8/14/24 of a North Carolina Incident Response Improvement System (IRIS) report for client #2 revealed: -Date of incident 7/27/24. -Physical Abuse: "7/30/2024 DA expressed that staff hit him on the face." -Supervisor Actions: "Describe the cause of this incident: At this time, there is no plausible cause for the alleged incident." -Incident Prevention: "7/30/2024 The staff the allegation made against is no longer employed with the agency at his own volition. Current</p>	V 109		
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V 109	<p>Continued From page 2</p> <p>employees will receive in-service training on incident reporting times. Staff will continue to receive supervision from QP and will complete refresher crisis prevention training within 1 week." -"Did this incident result in injury/harm: No." -Perpetrator Former Staff (FS) #5. -Person who conducted investigation QP. -"Allegation substantiated: No."</p> <p>Review on 8/14/24 of a "Bruise Chart" for client #2 dated 7/27/24 revealed: -"After giving [Client #2] a shower on Saturday evening staff (#1) noticed [client #2] had fresh scratches on his back. Located on his neck (lower) and left shoulder (back)." -Signed by staff #1.</p> <p>Review on 8/14/24 of a facility "Internal Report and Investigation Note" revealed: -"Identified Persons: [QP]-Administrative QP [Program Manager]-Cape Cod Program Manager [Client #2]-Consumer Client 2 (Client #3)- Other member residing within the home Staff 1(FS #5)- Staff allegations is made against Staff 2- Staff allegation was reported to</p> <p>Incident: On July 29, 2024, I, [QP] received a phone call at 8am from [Program Manager]. [Program Manager] informed me that client 1 (#3) approached her and requested that he speak to her in private. [Program Manager] entered into Client 1 (#3)'s room, where he expressed to her that he witnessed Staff 1 (FS #5) strike on the face. After conferring with Client 1 (#3), [Program Manager] deduced that he incident most likely occurred on Saturday, July 27, 2024. Upon learning of the incident, QP visited the</p>	V 109		
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V 109	<p>Continued From page 3</p> <p>home at 9:30am. QP first spoke with [Client #2]. QP asked him to explain what happened this weekend. He explained that Staff 1 (FS #5) "hurt his neck". When asked to clarify, he stated that Staff 1 (FS #5) placed his hands on his neck and verbalized that he hit him. QP asked if he remembered when it happened. He could not specify a day, but affirmed that I happened when he was eating breakfast at the table. Following my conversation with [Client #2], I examined his facial region for observable injuries. Examination yielded no indications of injury/harm. Following initial contact with [Client #2], QP spoke with Client 2 (Client #3). QP instructed Client 2 (Client #3) to discuss with her the events that happened. Client 2 (Client #3) stated that Staff 1 (FS #5) struck [Client #2] on the face. He stated the incident took place over the weekend during breakfast. When asked to identify precipitating events that led to the incident, Client 2 (Client #3) could not provide details, but continued to state he observed DA being struck by Staff 1 (FS #5). He informed QP that he had reported this to Staff 2 when she relieved Staff 1 (FS #5) that morning. After speaking with both members, I took the time to question the staff member. I requested that he provided me with details of any incidents that occurred over the weekend when he worked. He did not confirm any incident, I expressed to him that an allegation of abuse was made against him. He stated that he did not strike. Per the staff 's recounting of the event that happened that morning, he stated that [Client #2] was at the kitchen table eating breakfast. He observed [Client #2] dropping food on the floor from not being seated closely to the table. He explained that he went to reposition [Client #2] closer to the table to prevent him dropping food on the floor while eating. He stated that [Client #2] began to display behaviors and that at the point, he</p>	V 109		
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V 109	<p>Continued From page 4</p> <p>refrained from engaging with him. After speaking with [Client 2] (Client #3), I spoke with Staff 2 via phone call. I inquired if [Client 2] (Client #3) reported an incident to her. She affirmed that he had. She indicated that he stated he witnessed Staff 1 (FS #5) strike [Client #2] on the face. Before Leaving the home, I informed Staff 1 (FS #5) that I would be placing him on a three day suspension pending the results of my completed investigation. Upon making my intentions clear to him, he resigned. Results: At this time, I cannot affirm or substantiate allegations made against the staff. There are no observable signs injury or harm to [Client # 2]'s facial region nor could I positively identify any signs of mental duress. Protocol have been followed to the best of my ability at this time. Proper authorities have been notified of this incident, to include: Legal Guardians, Care Manager, and Local DSS (Department of Social Services) and will provide full cooperation henceforth. Respectfully Submitted, [QP]."</p> <p>Interview on 8/22/24 Client #2 stated: -He had lived at the facility for many years. -He had recently been hit by staff that was no longer at the facility.</p> <p>Interview on 8/22/24 Client #3 stated: -He lived at the facility for a long time. -He saw a staff hit Client #2 three times.</p> <p>Interview on 8/14/24 Staff #1 stated: -He worked at the facility for 13 years. -He typically worked the 11:00am to 7:00pm Shift. -Client #3 stated FS #5 hit Client #2 three times. -He documented injuries on an internal chart for Client #3 dated 7/27/24.</p> <p>Interview on 8/14/24 FS #5 stated:</p>	V 109		
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V 109	Continued From page 5 -He had worked at the facility for 4 years. -He no longer works at the facility. -He never hit client #2. Interview on 8/14/24 Program Manager stated: -She had worked at the facility for 16 years. -Client #3 told her FS #5 hit Client #2 three times. -She notified the QP of the allegation against FS #5. Interview on 8/14/24 the QP stated: -She had worked at the facility since 2018. -She was notified by the Program Manager in July about an allegation against FS #5. -She investigated the allegation against FS #5. -Client #2 said FS #5 grabbed him by the neck. -Client #3 said FS #5 hit Client #2 three times. -FS #5 denied hitting Client #2. -She never checked Client #2's neck or back for any injuries. -Client #2 had a history of making false allegations. -She said she should have checked Client #2's neck. -FS #5 never came back to work. -She completed incident report training and a refresher in alternatives to restrictive intervention training with staff.	V 109		