

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-960	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/08/2024
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE CARE HUMAN SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 3905 IVERSON STREET RALEIGH, NC 27604
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 11/8/24. 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 currently has a census of 5. The survey sample consisted of audits of 3 current clients and 1 former client.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes.</p> <p>(b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate the facility's response to fire emergencies.</p> <p>(d) Each facility shall have a first aid kit accessible for use.</p>	V 114		

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

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V 114	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure fire and disaster drills were done quarterly on each shift. The findings are:</p> <p>Review on 8/20/24 of the facility's fire and disaster drill book revealed:</p> <ul style="list-style-type: none"> - Reviewed the drill log from August 2023 - August 2024 - During the second quarter (April 2024 - June 2024) no disaster drills documented <p>During interview 8/20/24 client #1 reported:</p> <ul style="list-style-type: none"> - been at the facility for about 6 months - he doesn't do fire or disaster drills - he "guesses" he would go out of the house in the event of a fire <p>During interview on 8/20/24 client #3 reported:</p> <ul style="list-style-type: none"> - has been at the facility since June 2024 - hasn't done a fire or disaster drill - he would go to the front if there was a fire <p>During interview on 8/20/24 staff #1 reported:</p> <ul style="list-style-type: none"> - has been working at the facility since May of 2024 - fire drills are completed every two weeks - disaster drills are completed every two weeks 	V 114		
V 289	<p>27G .5601 Supervised Living - Scope</p> <p>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</p>	V 289		

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V 289	<p>Continued From page 2</p> <p>supervision when in the residence.</p> <p>(b) A supervised living facility shall be licensed if the facility serves either:</p> <p>(1) one or more minor clients; or</p> <p>(2) two or more adult clients.</p> <p>Minor and adult clients shall not reside in the same facility.</p> <p>(c) Each supervised living facility shall be licensed to serve a specific population as designated below:</p> <p>(1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses;</p> <p>(2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses;</p> <p>(3) "C" designation means a facility which 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</p>	V 289		

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V 289	<p>Continued From page 3</p> <p>.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 interview the facility failed to provide services for 3 of 5 current clients (#1, #3, #5), and 1 of 1 former client (FC#6) for the purpose of care, habilitation or rehabilitation of individuals who have a primary diagnosis of Mental Illness and Substance Abuse. The findings are:</p> <p>Review on 8/20/24 of client #1's record revealed:</p> <ul style="list-style-type: none"> - admitted 1/31/24 - diagnosis of Depression, Altered Mental State, Seizures, Hypertension, Cognitive Deficit due to old intracerebral hemorrhage <p>Review on 8/20/24 of client #3's record revealed:</p> <ul style="list-style-type: none"> - admitted 5/24/24 - diagnosis of Adjustment Disorder - hospital progress note dated 5/12/24 - "patient reported living in a bus shelter and is depressed about his living situation and had suicidal ideation with a plan to walk in front of car" 	V 289		

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V 289	<p>Continued From page 4</p> <ul style="list-style-type: none"> - hospital progress note dated 5/13/24 - "consent for participation with Absolute Care Assisted Living, to provide short-term respite care services" <p>Review on 8/20/24 of client #5's record revealed:</p> <ul style="list-style-type: none"> - admitted 8/20/24 - diagnosis of Depressive Disorder, Anxiety, Mood Disorder, Suicidal Ideation, Hypertension - hospital note dated 8/9/24 - "[local hospital] has partnered with Absolute Care to provide Behavioral Health Respite of high-risk patients in need of temporary environment to to help stabilize from and episode of acute mental illness" <p>Review on 8/20/24 of FC #6's record revealed:</p> <ul style="list-style-type: none"> - admitted 6/12/24 - discharged - hospital note dated 7/1/24 - "[local hospital] has partnered with Absolute Care to provide Behavioral Health Respite of high-risk patients in need of temporary environment to to help stabilize from and episode of acute mental illness" <p>During the interview on 8/20/24 the Licensee reported:</p> <ul style="list-style-type: none"> - she doesn't do respite, but will transition people as needed - she is private pay - she has had a couple of transitional clients since last survey - she tried to get a respite license, but was told that she can't have both licenses, started transitioning to permanent clients at the beginning of 2024 	V 289		
V 290	27G .5602 Supervised Living - Staff	V 290		

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V 290	<p>Continued From page 5</p> <p>10A NCAC 27G .5602 STAFF</p> <p>(a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs.</p> <p>(b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time.</p> <p>(c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present:</p> <p>(1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or</p> <p>(2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body.</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:</p> <p>(1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of</p>	V 290		

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V 290	<p>Continued From page 6</p> <p>secondary complications to alcohol and other drug addiction; and (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.</p> <p>This Rule is not met as evidenced by: Based on on record review and interview the facility failed to ensure a minimum of one staff was preseten at all times except when the client's treatment plan documented they were capable of remaining in the community without supervision for 1 of 4 clients (#1). The findings are:</p> <p>Review on 8/20/24 of client #1's record revealed:</p> <ul style="list-style-type: none"> - admitted 1/31/24 - diagnosis of Depression, Altered Mental State, Seizures, Hypertension, Cognitive Deficit due to old intracerebral hemorrhage - "he is not approved for unsupervised time in the community." <p>During interview 8/20/24 client #1 reported:</p> <ul style="list-style-type: none"> - he uses a transportation company to go to doctor's appointments - staff call the transportation company to arrange his pick up - there are no staff with him when he attends his doctor's appoinments - he doesn't go to the stores by himself, just doctor's appointments <p>During interview 11/8/24 the Licensee reported:</p>	V 290		

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V 290	Continued From page 7 - client #1 will no longer take transportation services to doctor's appointments - staff will accompany client #1 to doctor's appointments	V 290		