Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL034-413	A. BUILDING: _____ B. WING _____	10/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MONARCH DBA UMAR-WADDELL	1323 REYNOLDA ROAD WINSTON-SALEM, NC 27104

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V 000	INITIAL COMMENTS An annual survey was completed on October 23, 2024. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.	V 000		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (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. (d) The plan shall include: (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	All treatment plans will be completed by the Residential Team Lead and present in the record. Treatment plans will be done in advance of their expirations dates. Residential Team Lead will utilize a tracking sheet to monitor deadlines. Residential Director will monthly audit a sample. Target date: 11/22/2024 RECEIVED NOV 08 2024 DHSR-MH Licensure Sect	

Division of Health Service Regulation

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

MHoughton Maggi Houghton, BS, QP, Residential Director 11/6/2024

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V 112	Continued From page 1 This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to update the treatment/habilitation or service plan at least annually with the client or legally responsible person for 2 of 3 audited clients (#2 and #3). The findings are: Review on 10/22/24 of client #2's record revealed: -An admission date of 10/22/01 -Diagnosis of Down Syndrome and Rheumatoid Arthritis -Age 43 -An assessment dated 3/12/01 noted "is short in stature and walks slowly and cautiously due to arthritis, there are no noted behavioral issues, medical issues do appear to curtail or limit activities involving gross and fine motor skills such as tying shoes, running, jumping, poor judgement and understanding of those that may harm her indicate supervision at all times except when sleeping, encourage participating in the Arts, continue to encourage her desire to read, to look up meanings of works, and has a full IQ score of 62." -No documentation of a treatment/habilitation or service plan. Review on 10/22/24 of client #3's record revealed: -An admission date of 7/11/13 -Diagnoses of Chronic Anxiety, Pervasive	V 112	This page intentionally left blank	

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V 112	Continued From page 2 Developmental Disorder, Moderate Mental Retardation, Chronic Hepatitis B and Overactive Bladder -Age 31 -An assessment dated 7/11/13 noted "post institutionalized syndrome due to abuse and neglect in a Romanian orphanage until nearly 4 years old, her family is actively involved, attends the Enrichment Center and has a job coach, does not need assistance with personal care, is very social, a hard worker and always has a smile, loves to go to Starbucks, needs employment support, transportation, group support, socialization and long term plan as her parents are getting older, and only needs reminders with scheduling appointments, needs reminders with combing and brushing hair, needs help with wardrobe maintenance, needs to learn safety skills, doesn't comprehend spending limits, will repeat things and will sometimes fixate on a topic." -No documentation of a treatment/habilitation or service plan. Interview on 10/22/24 with client #2 revealed: -Her goal was to keep her room clean Interview on 10/22/24 with client #3 revealed: -Goals included "how to wash my hair and brush my teeth and I always forget to put on deodorant. Must keep my room clean. I worked on it last night. I am trying to learn how to do my laundry. I am good at sorting them right now." Interview on 10/23/24 with staff #1 revealed: -Worked on client #1, #2 and #3's treatment goals daily. Interview on 10/23/24 with the Residential Team Lead revealed:	V 112	This page intentionally left blank.	

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V 112	Continued From page 3 -The Vice President of Operations was unable to locate updated treatment plans for client #2 and client #3	V 112		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (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. (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. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (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 (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	V 290	All unsupervised time assessments are now up to date for the persons supported as of 11/1/2024. This was completed by Residential Director. Staff will receive in-service from Residential Director on use of unsupervised time and need for assessments to be current and present in the record. Residential Team Lead will keep all unsupervised time assessments up to date and utilize a tracking sheet to monitor deadlines. Residential Director will monthly review random sample to ensure completion.	11/22/2024

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V 290	Continued From page 4 determined by the governing body. (d) In facilities which serve clients whose primary diagnosis is substance abuse dependency: (1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of 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. This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure a minimum of one staff was present at all times when a client was on the premises, except when the client's treatment or habilitation plan documented that the client was capable of remaining in the home or community without supervision affecting 3 of 3 clients (#1, #2, and #3). Observation on 10/22/24 at 10:40am of the facility revealed: -No facility staff were present. -A client spoke through the closed door and stated for FCC to walk to the sister facility "because no staff is here." Further observation on 10/22/24 at 11:40am of the facility revealed: -Staff #1 arrived at the facility with groceries -Client #1 and client #2 were at the facility alone Further observation on 10/22/24 at 1:52pm of the	V 290	This page intentionally left blank	

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V 290	Continued From page 5 facility revealed: -Client #3 arrived at the facility after work 10/22/24 Staff #1 arrived at the facility at 11:40am with groceries. Stated she was sorry and that she was trying to do too many things since the facility is short staffed. Started making the clients sloppy joes for lunch. Staff was pleasant with the clients. Review on 10/22/24 of client #1's record revealed: -An admission date of 6/9/98 -Diagnoses of Mild Mental Retardation, Ventricular Septal Defect, Hearing Loss and Chromosome Abnormality -Age 52 -An assessment dated 9/19/00 noted "wears a leg brace on her left leg, is overweight, hard of hearing and has had breast reduction surgery, family is very supportive, has seasonal allergies, is her own guardian, needs assistance with nail care, is independent with personal care, enjoys reading, sports, exercising, church, the choir and group home activities, has a job coach through Life Span and works for one hour for minimum wage (Wednesdays from 3pm to 4pm)." -A treatment plan dated 10/14/24 noted "will demonstrate that she knows the appropriate steps to take during various emergency situations at least one time per a week with 1 or less verbal prompt 100% of the time for 12 consecutive months, will engage in at least 30 minutes of exercise with 1 or less verbal prompt 5 days a week 100% of the time for 12 consecutive months, will practice using appropriate social skills in the community at least 2 times per a week with less than 1 verbal prompt 100% of the time for 12 consecutive months, will refrain from buying extra snacks when in the community with less than 1 verbal prompts for 12 consecutive	V 290	This page intentionally left blank	

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V 290	Continued From page 6 months, will have a healthy snack at least one time per a day with 2 or less verbal prompts for 12 consecutive months." -Unsupervised Time in the Community Assessment dated 5/29/20 noted no documentation of the "recommendations/restrictions/stipulations for Unsupervised Time at Home". Follow up needed: "As needed" -No documentation of the client's ability to have unsupervised time in the home or community Review on 10/22/24 of client #2's record revealed: -An admission date of 10/22/01 -Diagnosis of Down Syndrome and Rheumatoid Arthritis -Age 43 -An assessment dated 3/12/01 noted "is short in stature and walks slowly and cautiously due to arthritis, there are no noted behavioral issues, medical issues do appear to curtail or limit activities involving gross and fine motor skills such as tying shoes, running, jumping, poor judgement and understanding of those that may harm her indicate supervision at all times except when sleeping, encourage participating in the Arts, continue to encourage her desire to read, to look up meanings of works, and has a full IQ score of 62." -No documentation of the client's ability to have unsupervised time in the home or community Review on 10/22/24 of client #3's record revealed: -An admission date of 7/11/13 -Diagnoses of Chronic Anxiety, Pervasive Developmental Disorder, Moderate Mental Retardation, Chronic Hepatitis B and Overactive Bladder	V 290	This page intentionally left blank	

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V 290	Continued From page 7 -Age 31 -An assessment dated 7/11/13 noted "post institutionalized syndrome due to abuse and neglect in a Romanian orphanage until nearly 4 years old, her family is actively involved, attends the Enrichment Center and has a job coach, does not need assistance with personal care, is very social, a hard worker and always has a smile, loves to go to Starbucks, needs employment support, transportation, group support, socialization and long term plan as her parents are getting older, and only needs reminders with scheduling appointments, needs reminders with combing and brushing hair, needs help with wardrobe maintenance, needs to learn safety skills, doesn't comprehend spending limits, will repeat things and will sometimes fixate on a topic." -An unsupervised assessment dated 7/30/20 noted "can be left alone for up to 8 hours but needs assistance with money, meals, cooking, anxiety and how to handle emergencies and should keep her phone with her and leave a contact she is able to reach." -No documentation of the client's ability to have unsupervised time in the home or community Interview on 10/22/24 with client #1 revealed: Stated she could stay at the home alone "for 8 hours. I watch tv in here (living room) or in my bedroom." Interview on 10/22/24 with client #2 revealed: -Had 2 hours of unsupervised time in the home Interview on 10/22/24 with client #3 revealed: -"I get 8 hours of unsupervised time here. Sometimes I just stay in my room and listen to music ...[client #1] and [client #2] can stay by themselves too."	V 290	This page intentionally left blank	

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V 290	Continued From page 8 Interview on 10/23/24 with staff #1 revealed: -Certain individuals in the facility had unsupervised time. -Client #1 had up to 8 hours of unsupervised time in the home. -Client #2 had 2 hours of unsupervised time in the home. -Client #3 had 8 hours of unsupervised time in the home and the community -"[Client #3] worked and her hours are usually from 9am to 1pm or 8am to 1:30pm." -There were no designated time frames for client #1, #2 and #3's unsupervised time in the home or community. Interview on 10/22/24 with the Vice President of Operations revealed: -The clients' unsupervised time assessments were to be updated annually	V 290	This page intentionally left blank	