

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL029-006	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 11/22/2024
NAME OF PROVIDER OR SUPPLIER PATH OF HOPE		STREET ADDRESS, CITY, STATE, ZIP CODE 1675 EAST CENTER STREET EXTENSION LEXINGTON, NC 27292			
(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 survey was completed on November 22, 2024. Deficiencies were cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .3400 Residential Treatment/Rehabilitation for Individuals with Substance Abuse Disorders, 10A NCAC 27G .3700 Day Treatment Facilities for Individuals with Substance Abuse Disorders, 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program, and 10A NCAC 27G .4500 Substance Abuse Comprehensive Outpatient Treatment Program.</p> <p>This facility is licensed for 12 and has a current census of 12. The 10A NCAC 27G .3400 Residential Treatment/Rehabilitation for Individuals with Substance Abuse Disorders has a current census of 12, the 10A NCAC 27G .3700 Day Treatment Facilities for Individuals with Substance Abuse Disorders has a current census of 0, the 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program (SAIOP) has a current census of 0, and the 10A NCAC 27G .4500 Substance Abuse Comprehensive Outpatient Treatment Program (SACOT) has a current census of 0.</p> <p>The survey sample consisted of audits of 4 current clients and 1 former client in the 10A NCAC 27G .3400 Residential Treatment/Rehabilitation for Individuals with Substance Abuse Disorders.</p>	V 000			
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p>	V 110			

Division of Health Service Regulation

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

SO Barth

TITLE

Executive D. C. A.

(X6) DATE

12-11-24

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PATH OF HOPE

**1675 EAST CENTER STREET EXTENSION
LEXINGTON, NC 27292**

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V 110	<p>Continued From page 4</p> <p>client, [FC #5], 'You ain't s**t.' [Staff #4] said, 'I am somebody. It don't matter who you are, you ain't s**t to me.'"</p> <p>-"There were 12 of us guys (clients) standing there on the sidewalk and [Staff #4] said this to [FC #5] loud enough for all of us to hear. [FC #5] didn't react. This just literally occurred a couple of days ago."</p> <p>Interview on 11/22/24 with FC #5 revealed:</p> <ul style="list-style-type: none"> -He denied Staff #4 disrespected him at any time during his admission. -He denied Staff #4 used profanity toward him. -He had no concerns about his treatment at the program. <p>Interview on 11/22/24 with Staff #4 revealed:</p> <ul style="list-style-type: none"> -He denied he used profanity toward FC #5 and other clients. -He stated, "I have said a curse word in clients' presence, but it was not directed toward any client." -He denied having made any inappropriate gestures (verbal or non-verbal) toward any client. --"[FC #5] and I were joking around in conversation outside the meeting (NA meeting) and he [FC #5] was talking about beating people up. [FC #5]'s ego is right up there sometimes and I said 'You always talking about beating people up, you ain't it.' I didn't say s-h-t." -Clients have "taken me wrong since I have worked at the program and they (clients) have gone to their clinician saying [Staff #4] cursed them." His former house supervisor then discussed "whatever was said" and he has been "working on what he says (to clients)." -He had referred to clients as "children" in the context of "You're like a child at the start of recovery trying to learn everything you can," and he did not say this to "demean" clients. 	V 110		

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V 110	Continued From page 5 Interview on 11/22/24 with the Director of Operations revealed: -Client #2's written grievance had been received this week. -Staff #3 who assumed the House Supervisor position this week had began gathering information about each issue in Client #2's grievance. -There would be an internal investigation into Client #2's grievances.	V 110	Plan of correction for staff member, 12-2-24		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have a first aid kit accessible for use.	V 114			

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V 114	<p>Continued From page 6</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 documented for each shift per quarter. The findings are:</p> <p>Review on 11/22/24 of the facility's fire and disaster drill log between 12/15/23 and 10/14/24 revealed:</p> <ul style="list-style-type: none"> -No documentation of a 3rd shift fire drill and a 1st shift disaster drill for January-March 2024 (1st quarter). -No documentation of 3rd shift fire drill and a 1st shift disaster drill for April-June 2024 (2nd quarter). -No documentation of a 2nd shift fire drill and a 3rd shift disaster drill for July-September 2024 (3rd quarter). -No documentation of a 3rd shift fire drill and a 1st shift disaster drill for October 2024-December 2023 (4th quarter). <p>Interview on 11/21/24 with Client #1 revealed:</p> <ul style="list-style-type: none"> -He thought he had participated in at least 1 fire drill and 1 disaster drill since his admission in October 2024. <p>Interview on 11/22/24 with Staff #1 revealed:</p> <ul style="list-style-type: none"> -There were 3 staff shifts with 1st shift from Sunday at 2 pm to Tuesday at 5 pm, 2nd shift from Tuesday at 5 pm to Friday at 7 am, and 3rd shift from Friday 6 am to Sunday at 2 pm. -There was a written schedule for when fire and disaster drills were to be conducted. -Fire and disaster drills were done monthly. <p>Interview on 11/21/24 with Staff #2 revealed:</p> <ul style="list-style-type: none"> -Fire and Disaster drills were conducted monthly. -He started on 11/18/24 as the Men's House 	V 114		

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V 114	Continued From page 7 Supervisor and understood one of his duties would be to ensure fire and disaster drills were practiced and documented. Interview on 11/22/24 with the Director of Operations revealed: -No documentation on the missing fire and disaster drills. -She believed the fire and disaster drills were conducted. -She would follow up with staff to ensure the fire and disaster drills were documented.	V 114	Copies of drills were furnished new staff cleaned office. Current plans good - put in place one more check point	12-3-24
V 736	27G .0303(c) Facility and Grounds Maintenance 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. This Rule is not met as evidenced by: Based on observation and interview, the facility was not maintained in a safe and attractive manner. The findings are: Observation on 11/22/24 beginning at 11 am of the facility revealed: -In the 2nd living room with the plaid fabric sofa, the ceiling board which surrounded an overhead light fixture had at least 5 linear ceiling cracks of varying lengths and at least 6 horizontal ceiling cracks of varying lengths. -In the kitchen, the front to a refrigerator middle drawer marked "Fresh Produce" with blue-colored semi-circles was missing. The frame at the top of this same drawer was cracked. The inside bottom of the refrigerator had multiple red, yellow, and	V 736		

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V 736	<p>Continued From page 8</p> <p>brown spots. There was a soiled red and gray colored striped towel laying on the floor in front of the refrigerator.</p> <p>-In the enclosed back porch where the washer, dryer and deep freezers were located, the exterior dryer top had multiple scratches which were brown-colored. A white plate with blue decorative trim had a white and yellow substance on the plate and was laying on top of the dryer.</p> <p>-In bedroom #1 which was located on the bottom floor:</p> <p>-On the left side of the room between the head of the bed and a lamp, there were at least 4-5 linear cracks which ranged from 2-3 inches to 1 foot, and which exposed white-colored drywall board. A surface-level linear crack of approximately 3-4 feet in length was observed from the top of the lamp on the wall.</p> <p>-The right corner ceiling behind the bedroom door had approximately 9 black-colored spots with a crack in the ceiling paint of approximately 2-3 feet long. The ceiling paint was loose on both sides of the crack.</p> <p>-The wood of the bedroom door frame at the top right side was unpainted and had a thin loose board at the top right side.</p> <p>-In the upstairs bathroom:</p> <p>-The sink on the left had a white sheet of paper marked with "Do Not Use" taped across the sink basin.</p> <p>-Next to the bathroom window, the inside toilet lid had multiple spots of unpeeled paint which exposed the brown color underneath.</p> <p>-The bathroom window was missing a cover to ensure client privacy during personal hygiene.</p> <p>-In bedroom #2 which was located on the 2nd floor:</p> <p>-A double paned bottom window on the left side had approximately 4-5 glass shards on the left side and 5-6 glass shards on the top side near</p>	V 736		

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V 736	<p>Continued From page 9</p> <p>the window locks. The screen in this same window was bent at the bottom in a "v" shape and faced toward the exterior of the facility.</p> <p>-A closet with a set of blinds laying in disarray on the closet floor with 3 sides of the closet and the closet door with multiple streaks of unpeeled paint.</p> <p>-In bedroom #4, the attic door attached to the ceiling was missing 1 piece of frame located on the side near the latch and lock.</p> <p>-In bedroom #6, there were at least 20 white-colored spots on the left wall and next to the head where Client #4 slept.</p> <p>Interview on 11/21/24 with Client #1 revealed: -He did not know of any repairs needed to the facility.</p> <p>Interview on 11/22/24 with Client #2 revealed: -The cracks on the wall near his bed had been there since his admission. He did not know what caused the wall cracks. -He did not know what caused the black spots on the corner ceiling of his room.</p> <p>Interview on 11/22/24 with Client #4 revealed: -He stated, "I don't want to touch it," when asked about the white spots on the wall beside his bed. -He assumed the white spots may have been from sticker residue.</p> <p>Interview on 11/22/24 with Staff #1 revealed: -The 2nd living room with the ceiling cracks around the overhead light fixture had been "like that" since he started work at the facility over a year ago. This living room was a room where the clients spent time watching TV and socializing. -He did not know what happened to the missing front of a refrigerator middle drawer or what caused the drawer frame to crack. The red,</p>	V 736		

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V 736	<p>Continued From page 10</p> <p>yellow and brown spots at the bottom of the refrigerator were food debris.</p> <p>-The brown scratches on top of the dryer were rust and the plate on the dryer was likely left by a client (unknown) after the client finished eating. He removed the plate immediately from the dryer.</p> <p>-No explanation for the cause or a timeframe of the wall cracks, the ceiling crack or the black-colored spots on the ceiling in the downstairs bedroom. He had not noticed the top of this room's bedroom door was unpainted.</p> <p>-The sign "Do Not Use" taped to one of the sinks in the upstairs bathroom was not there last week (week of 11/11/24). He stated, "I don't know what's wrong with it."</p> <p>-A set of blinds which covered the bathroom window was removed 6-8 months ago because the blinds were broken.</p> <p>-He was not aware of the broken windowpane and bent window screen in bedroom #2 until he slid the dresser over to one side.</p> <p>-The closet in bedroom #2 was used for storage.</p> <p>-He believed a client (unknown) must have tried at some time to open the attic door because one of the frames was missing and the lock placed on this door remained locked.</p> <p>-No explanation for the white spots on Client #4's bedroom wall.</p> <p>Interview on 11/22/24 with the Director of Operations revealed:</p> <p>-Staff #4 had poured a household cleaner down the upstairs bathroom sink to unclog the drain.</p> <p>-The Facility Director had ordered a replacement windowpane for bedroom #2.</p> <p>Interview on 11/22/24 with the Executive Director revealed:</p> <p>-She ordered a window replacement for bedroom #2.</p>	V 736		

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V 736	Continued From page 11 -Each client had a responsibility to clean their bedroom, and each client had cleaning tasks they were responsible for. -Clients could report any facility repairs they saw. -She would follow up on identified items that needed repair after she received a list.	V 736	Repairs are being made - new manger going over all deficiencies - chore checklist revised and discussed. Glass ordered for bedroom.	12-9-24