

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL080-223</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____		(X3) DATE SURVEY COMPLETED  <b>R-C 11/21/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>STEPPING STONE SERVICES</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>512 WEST HORAH STREET SALISBURY, NC 28144</b>		
(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	INITIAL COMMENTS  A complaint and follow up survey was completed on 11/21/24. The complaint was unsubstantiated (Intake #NC00224093). Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.  This facility is licensed for 4 and has a current census of 2. The survey sample consisted of audits of 2 current clients, 2 former clients.	V 000			
V 111	27G .0205 (A-B) Assessment/Treatment/Habilitation Plan  10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to: (1) the client's presenting problem; (2) the client's needs and strengths; (3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission; (4) a pertinent social, family, and medical history; and (5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs. (b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter	V 111	<i>All 24 hr assessments will be completed in a timely manner by the AP or QP.</i>		

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

*Jerome Robinson, QP*  
6899 0GTF11

*12/9/24*

If continuation sheet 1 of 6

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V 111	<p>Continued From page 1</p> <p>referred to as the "plan," strategies to address the client's presenting problem shall be documented.</p> <p>This Rule is not met as evidenced by: Based on record reviews, and interviews, the facility failed to complete an assessment prior to the delivery of services for three of four audited clients (#2, #3, #4). The findings are:</p> <p>Attempted review on 11/14/24 of (former) client #2's record revealed: -No completed documentation of admission assessment</p> <p>Attempted review on 11/14/24 of client #3's record revealed: -No completed documentation of admission assessment</p> <p>Attempted review on 11/14/24 of client #4's record revealed: -No completed documentation of admission assessment</p> <p>Interview on 11/19/24 with the Associate Professional revealed: -It was the responsibility of the Qualified Professional to complete the admission assessment for the client</p>	V 111			

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V 111	Continued From page 2  Interview on 11/19/24 with the Licensee/Director/Qualified Professional revealed: -The admission assessment were not completed due to "it was overlooked ...we dropped the ball" and the responsible person for completing the assessment is the house manager and Qualified Professional	V 111		
V 296	27G .1704 Residential Tx. Child/Adol - Min. Staffing  10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS (a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times. (b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows: (1) two direct care staff shall be present for one, two, three or four children or adolescents; (2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and (3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents. (c) The minimum number of direct care staff during child or adolescent sleep hours is as follows: (1) two direct care staff shall be present and one shall be awake for one through four children or adolescents; (2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and	V 296	<p>• Minimum number (2) staff will be on at all times each shift. QP will make sure and follow up.</p>	

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STATE FORM

E899

OGTF11

If continuation sheet 3 of 6

*Jeremy Sabu, QP 12/9/24*



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V 296	<p>Continued From page 3</p> <p>(3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents.</p> <p>(d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan.</p> <p>(e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and needs as specified in the treatment plan.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to have the minimum number of direct care staff required when children or adolescents are present and awake. The findings are: Review on 11/14/24 of (former) client #1's record revealed: -An admission date of 9/21/24, and discharge date of 11/1/24 -Diagnoses of Post Traumatic Stress Disorder, Conduct Disorder, Attention Deficit Hyperactivity Disorder, Borderline Intellectual Functioning -An assessment dated 9/4/24 noted "presenting problem: implosive, inappropriate with woman ...Department of Juvenile Justice involvement,</p>	V 296			

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V 296	<p>Continued From page 4</p> <p>came from a Psychiatric Residential Treatment Facility</p> <p>Review on 11/14/24 of client #2's (former) record revealed:</p> <ul style="list-style-type: none"> <li>-An admission date of 4/11/24, and discharge date of 11/1/24</li> <li>-Diagnoses of Reactive Attachment Disorder, Impulse Control and Conduct Disorder, Disruptive Behavior Disorder</li> <li>-No documentation of Admission Assessment</li> <li>-A treatment plan dated 10/7/24 "-over the next 60days ...will show ability to manage his anger evidenced by increasing days without cursing, disrespect, and physical aggression from 1 day a week to 3 days a week ..."" ...over the next 60 days ....will increase his ability to display compliance in the group home setting and community as evidence by increasing days he is able to avoid running away, police involvement, following rules/directives in the group home, and attends school from 1 day a week to 3 days a week ..."</li> </ul> <p>Review on 11/14/24 of client #3's record revealed:</p> <ul style="list-style-type: none"> <li>-An admission date of 12/6/23</li> <li>-Diagnoses of Post Traumatic Stress Disorder, Oppositional Defiant Disorder, Child Physical Abuse, Child Neglect</li> <li>-No documentation of Admission Assessment</li> <li>-A treatment plan dated 10/7/24 "...will learn to manage his thoughts, feelings and behaviors in way that reduces crises and disruptions ..." "...will learn to accept responsibility for his behavior (both positive and negative 80% of the time) reduce lying from frequently to three time per day ..."</li> </ul> <p>Review on 11/14/24 of the work schedule for the month of October 2024 revealed:</p>	V 296			

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V 296	<p>Continued From page 5</p> <p>-8am to 3pm: two staff names were on schedule to work, 2:30pm to 10:30pm: two staff names were on schedule to work, 11pm to 9am: one staff name was on schedule to work</p> <p>Interview on 11/18/24 with (former) client #1 revealed: -"normally, there is one staff when we get out of school and then 30min to 1 hour another staff comes in"</p> <p>Interview on 11/18/24 with (former) client #2 revealed: - "sometimes on 3rd there is two staff or one staff"</p> <p>Interview on 11/14/24 with client #3 revealed: -When asked about staffing when he goes to bed, reported "depends sometimes one sometimes two"</p> <p>Interview on 11/18/24 with (former) client #2's guardian revealed: -" usually there is one person, pick up for visitation"</p> <p>Interview on 11/14/24 with staff #1 revealed: -There were two staff working on each shift -There had never been a time when he worked alone -He had never worker overnights</p> <p>Interview on 11/19/24 with the Licensee/Director/Qualified Professional revealed: -There are two staff working each shift</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 296			