

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411278	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/20/2024
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NAME OF PROVIDER OR SUPPLIER BEYOND HOPE LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 3904 GISBOURNE DRIVE JAMESTOWN, NC 27282
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on 12/20/24. The complaint was unsubstantiated (intake #NC225075). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Alternative to Family Living.</p> <p>This facility is licensed for 3 and has a current census of 1. The survey sample consisted of audits of 1 current client.</p>	V 000		
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <p>(a) There shall be no privileging requirements for paraprofessionals.</p> <p>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p> <p>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(e) 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. 	V 110		

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

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V 110	<p>Continued From page 1</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on records review and interview the facility failed to have paraprofessionals supervised by a Qualified Professional (QP). The findings are:</p> <p>Review on 12/17/24 of the QP record revealed: - There was no QP record.</p> <p>Interviews on 12/17/24 and 12/20/24 with the Licensee/Alternative Family Living Provider revealed: - He did not have a QP. - The last QP who worked for the facility quit in August 2024.</p>	V 110		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record reviews, observations and interviews, the facility was not maintained in a safe manner. The findings are:</p>	V 736		

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V 736	<p>Continued From page 2</p> <p>Review on 12/18/24 of the North Carolina Residential Building Code Section 310.2.1 revealed: -"Emergency Egress-Every sleeping room shall have at least one operable window or emergency door approved for emergency egress. The units must be operable without the use of key or tool to a full clear opening. If a window is provided, the sill height may not be more than 44" above the floor. These must provide a clear opening of 4 square feet. The minimum height shall be 22 inches and minimum width is 20 inches (1996 Building Code). (For buildings built under the previous Residential Building Code the requirements allowed for a sill height of 48" and an opening of 432 square inches in an area with a minim dimension of 16")."</p> <p>Review on 12/17/24 of client #1's record revealed: - Admission date: 12/18/23 - Diagnoses: Moderate Intellectual Disabilities and Schizophrenia - Client #1's treatment plan dated 1/24/24 revealed: "Member previously had a stroke and has limited mobility on his right side."</p> <p>Observation on 12/17/24 from 2:05 pm - 2:16 pm of the upstairs area of the facility revealed: - All the bedrooms were upstairs. - All the upstairs windows had a device installed that looked like a wedge shape window guard and allowed the upstairs windows to only open 4-5 inches.</p> <p>Interviews on 12/17/24 and 12/18/24 with the Licensee/Alternative Family Living (AFL) Provider revealed: - He referred to the door stop looking object in</p>	V 736		

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V 736	<p>Continued From page 3</p> <p>each upstairs window as a "window guard." - He installed the window guards on all the upstairs windows "a little over a year" ago. The windows upstairs all opened by sliding up and down. - He had been told by the Local Fire Inspector during an initial inspection (1/13/23) there had to be window guards on all the second story windows that only allowed the windows to open 4 inches. - "The window guards are like child locks." - The Local Building Inspector, inspected his home "around 1/9/23" and also told him he had to have "window guards" in place "for the safety of the clients to prevent them from jumping or falling out of the windows." - Division of Health Service Regulation (DHRS) construction came out on 2/14/24 and looked at the windows upstairs. - Client #1 "walks with a cane and has a leg brace on his right leg. He moves real slow and will hobble."</p> <p>Interview on 12/19/24 with the Local Fire Inspector revealed: - He had inspected the facility on 12/9/24. - He had not told the Licensee/AFL Provider to install "window guards" on all the upstairs windows to prevent clients from falling out or jumping. - When he inspected the facility on 12/9/24 he did not recall seeing any window guards on the upstairs windows. - "I try to open one window per room to make sure there is another egress." - "I definitely know if I had seen them (window guards) I would have told him to remove them."</p> <p>Interview on 12/19/24 with the Local Building Inspector revealed:</p>	V 736		

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V 736	<p>Continued From page 4</p> <ul style="list-style-type: none"> - He had talked to the Licensee/AFL Provider about "window latches" when he inspected the facility. - "They (window latches) screw on the window sash on at least one side and you push the device and it allows you to open the window." - "We probably discussed the latches but I don't think we required it from our notes. From my notes the existing windows in the home were ok without the latches." - "It sounds like he needs to take off all the devices and reinstall the correct ones. He's not compliant with us per our inspection if we had seen that (current window guards) it would have never passed. I don't think he understood us about what we were talking about." <p>Interview on 12/19/24 with the DHSR Architectural/Engineering Technician revealed:</p> <ul style="list-style-type: none"> - The "window guards" that allowed the upstairs windows to open 4-5 inches "could have not been there when I did my inspection." - "If they (window guards) were there during my inspection he would have had to remove them immediately." - The "window guards" are "not allowed in a bedroom egress window." <p>Interview on 12/19/24 with staff #1 revealed:</p> <ul style="list-style-type: none"> - Prior to the initial inspection by the local city fire and building inspectors the staff were given a list of things to be completed and "we had to put up the window guards for the safety of the clients." - She was aware that the "window guards" were on all the windows upstairs. - She had tried to open her bedroom window and it opened "I think 4 inches with the guards on there and without the guards on there (the windows) it opens all the way." 	V 736		

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V 736	<p>Continued From page 5</p> <p>Interview on 12/19/24 with Former Staff #2 revealed:</p> <ul style="list-style-type: none"> - He was hired to work in the facility when it first opened. - He was present for the initial inspection by the Local Building Inspector. - The Local Building Inspector had told the Licensee/AFL Provider to "install some type of locks on the window to prevent them (clients) from escaping or committing suicide." - "[The Local Building Inspector] said in case of a fire you were supposed to push in the safety latches. He said show the clients how to push in the safety latches and the window drops down in order for them to escape a fire in the house." <p>Review on 12/20/24 of the Plan of Protection dated 12/20/24 written by the Licensee/AFL Provider revealed:</p> <p>"What will you immediately do to correct the above violations in order to protect clients from further risk or additional harm?</p> <p>The window guards have been removed immediately. Contact persons from the [local city] were contacted. Zoning and fire marshall explained to the AFL Provider, the window guards had to be installed, and windows can not exceed past 4 inches. AFL provider followed instructions that were given. The state explained this is a citation and a fire hazard. AFL provider removed window guards immediately. Contact information both zoning and the fire marshall were provided upon investigation.</p> <p>Describe your plans to make sure the above happens.</p> <p>The [local city] as well as the state will be contacted if conflicting information is received."</p> <p>This facility served a client with diagnoses of Moderate Intellectual Disabilities, Schizophrenia</p>	V 736		

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V 736	<p>Continued From page 6</p> <p>and walked with a gait abnormality due to a previous stroke. All the upstairs windows had window guards that only allowed the windows to open 4-5 inches. This prevented egress from the clients' bedroom windows in case of a fire.</p> <p>This deficiency constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days.</p>	V 736		