

NTR

PRINTED: 01/07/2025  
FORM APPROVED

## Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0411249</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>01/07/2025</b>
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

**VANGUARD HOME****1601 QUINCY STREET  
GREENSBORO, NC 27401**

(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	<b>INITIAL COMMENTS</b>  A complaint survey was completed on January 7, 2025. The complaint was substantiated (intake #NC00225213). A deficiency was cited.  This facility is licensed for the following service category: 10A NCAC 27G .5600B Supervised Living for Minor with Developmental Disabilities.  This facility is licensed for 3 and has a current census of 2. The survey sample consisted of audits of 1 current client.	V 000	<i>See page 2</i>	
V 291	<b>27G .5603 Supervised Living - Operations</b>  10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices,	V 291	<b>RECEIVED</b> <b>JAN 24 2025</b> <b>DHSR-MH Licensure Sect</b>	

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

TITLE

(X6) DATE

STATE FORM

UTMH11

If continuation sheet 1 of 5

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V 291	<p>Continued From page 1</p> <p>needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the Qualified Professional (QP) failed to coordinate care for 1 of 1 audited clients (#1). The findings are:</p> <p>Review on 1/6/25 of client #1's record revealed: -An admission date of 10/17/23 -Diagnoses of Severe Intellectual Disability, Autism, Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder and Violent Behavior -Age 17 -An assessment dated 10/17/23 noted "has a history of being hospitalized due to aggressive behavior, needs support due to aggressive and destructive behaviors, will refuse rules and directions, can be disruptive, has issues with anger control and can be defiant, will use his weight and size (6'5", 350 pounds) to intimidate (may not understand how much damage he can do), will throw objects and people and will spit at you, maternal grandmother is guardian, mother is present in his life but can be a huge trigger, has many natural supports throughout his family, needs residential placement, reengagement into the community, to attend school and receive therapy and was previously at a Psychiatric Residential Treatment Facility and needs two to one staff during some awake hours and awake staff at night."</p>	V 291	<p>QP and other identified staff will be re-trained in Incident Reporting.</p> <p>Per N+PS incident reporting protocol, direct care staff are to contact the QP.</p> <p>The QP is responsible for contacting the team of the individual identified.</p> <p>-QP will also be responsible to update the Clinical Director on all matters of the incident. Clinical Director can and will assist due to the severity of the incident</p>	2/1/25

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V 291	<p>Continued From page 2</p> <p>-An updated treatment plan dated 4/9/24 noted "will utilize coping and anger management skills when upset by not destroying property or becoming physically aggressive with others with no more than 2 verbal prompts (vps), will exhibit safe behaviors in the home and community by not talking to strangers, not opening doors for strangers and looking both ways before crossing the street after initial prompt, will increase his age appropriate social skills by interacting with others appropriately (respecting personal boundaries, not interrupting others, no speaking excessively) while participating in a variety of social activities in the community and at home with 4 vps, will appropriately learn how to communicate his want and needs in an effective manner with no more than 2 vps, will exhibit compliance by getting ready for scheduled events/activities in a timely manner with no more than 3 vps, with no more than 3 vps, will complete a chore at least 3 times a week and on a daily basis, will complete his hygiene routine with no more than 3 vps from staff."</p> <p>Further review on 1/6/25 of client #1's record revealed: -A juvenile court order dated 10/14/22 noted " ...that legal custody of [client #1] is granted to [grandmother's name], that [mother's name] shall continue to have unsupervised visitation for a minimum of four hours a week to include overnight visitation every other weekend ..."</p> <p>Interview on 1/7/25 with client #1 revealed: -Was at his mother's home. -Was safe. -Was taking his medications as prescribed.</p> <p>Review on 1/7/25 of the overnight receipt for client #1's medications revealed:</p>	V 291		

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V 291	<p>Continued From page 3</p> <p>-Was dated 12/16/24</p> <p>-The medications were sent to the mother's address and not the LG's address.</p> <p>Interview on 1/7/25 with client #1's care coordinator revealed:</p> <p>-Was a difficult situation as the facility was dealing with 2 different people, the mother and the grandmother who was the legal guardian.</p> <p>-"The biggest issue was the legal guardian requested client #1's medications be sent to her address and instead they were sent to the mother's address."</p> <p>Interview on 1/7/25 with the Legal Guardian (LG) revealed:</p> <p>-Client #1 was to spend the holidays (11/27/24 to 12/1/24) with his mother.</p> <p>-The mother failed to return client #1 to the facility on 12/1/24</p> <p>-On 12/2/24, learned client #1 was still with his mother.</p> <p>-No one contacted her on 12/1/24 to state client #1 had not returned to the facility</p> <p>-Had requested client #1's medications be overnighted to her address.</p> <p>-"Instead, the medications were sent to my daughter's house. She is not the Legal Guardian, I am. The medications should have been sent to my address like I requested."</p> <p>Interview on 1/6/25 with the Qualified Professional #1 (QP #1) revealed:</p> <p>-Was the QP for the facility</p> <p>-Was not aware of what had transpired until after the fact.</p> <p>Interview on 1/6/25 with the Director revealed:</p> <p>-The LG gave permission for the mother to pick client #1 up on 11/27/24.</p>	V 291		

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V 291	Continued From page 4  -The mother was to return client #1 on 12/1/24. -The mother failed to return client #1 to the facility. -Had contacted the LG on 12/2/24 to state client #1 was still with his mother and had not returned to the facility. -The LG had requested medications be overnighted to her address. -The medications were overnighted to the mother's address. -"I sent the medications to the mother's address because that was where [client #1] was." -QP #1 was responsible for the oversight of the facility. -"The communication with the LG and her daughter was between me, staff #1 and staff #2." -Would ensure, in the future, the QP was involved in coordination of care for the individuals.	V 291		