

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL064-091	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 01/31/2025
NAME OF PROVIDER OR SUPPLIER SIMBELYN		STREET ADDRESS, CITY, STATE, ZIP CODE 211 SIMBELYN DRIVE NASHVILLE, NC 27856		
(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 An annual survey was completed on 1/31/25. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 6 and has a current census of 6. The survey sample consisted of 3 current clients.	V 000		
V 105	27G .0201 (A) (1-7) Governing Body Policies 10A NCAC 27G .0201 GOVERNING BODY POLICIES (a) The governing body responsible for each facility or service shall develop and implement written policies for the following: (1) delegation of management authority for the operation of the facility and services; (2) criteria for admission; (3) criteria for discharge; (4) admission assessments, including: (A) who will perform the assessment; and (B) time frames for completing assessment. (5) client record management, including: (A) persons authorized to document; (B) transporting records; (C) safeguard of records against loss, tampering, defacement or use by unauthorized persons; (D) assurance of record accessibility to authorized users at all times; and (E) assurance of confidentiality of records. (6) screenings, which shall include: (A) an assessment of the individual's presenting problem or need; (B) an assessment of whether or not the facility can provide services to address the individual's needs; and	V 105		

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

TITLE

(X6) DATE

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V 105	Continued From page 1 (C) the disposition, including referrals and recommendations; (7) quality assurance and quality improvement activities, including: (A) composition and activities of a quality assurance and quality improvement committee; (B) written quality assurance and quality improvement plan; (C) methods for monitoring and evaluating the quality and appropriateness of client care, including delineation of client outcomes and utilization of services; (D) professional or clinical supervision, including a requirement that staff who are not qualified professionals and provide direct client services shall be supervised by a qualified professional in that area of service; (E) strategies for improving client care; (F) review of staff qualifications and a determination made to grant treatment/habilitation privileges; (G) review of all fatalities of active clients who were being served in area-operated or contracted residential programs at the time of death; (H) adoption of standards that assure operational and programmatic performance meeting applicable standards of practice. For this purpose, "applicable standards of practice" means a level of competence established with reference to the prevailing and accepted methods, and the degree of knowledge, skill and care exercised by other practitioners in the field;	V 105		

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V 105	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to adhere to its admission policy affecting 2 of 3 audited clients (#2, #5). The findings are:</p> <p>Review on 1/31/25 of the facility's admission assessment policy revealed:</p> <ul style="list-style-type: none"> - "...Admission decisions for residential vacancies and continued stays will be based on the admission assessment. The assessment provides guidance in determining if the individual has the need for a service(s)/support(s) being requested. In addition, the assessment will provide information to help the agency determine if it can provide for the individual's needs and if the agency has the ability to respond to the individual needs in a manner which is likely to benefit the individual..." - "...in order to be admitted to [agency] for any service an individual will receive and assessment that meets our standards related to the screening and assessing of individuals according to service definition..." <p>Review on 1/28/25 client #2's record revealed:</p> <ul style="list-style-type: none"> - Admission: 5/23/24 - Diagnosis: Moderate Intellectual Disability - no admission assessment completed prior to admission to determine if the agency could provide for the individual's needs <p>Review on 1/28/25 client #5's record revealed:</p> <ul style="list-style-type: none"> - Admission: 8/21/20 - Diagnosis: Mild Intellectual Disability - admission assessment that did not have a date on it and couldn't be verified if it was completed prior to admission 	V 105		

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V 105	Continued From page 3 Interview on 1/31/25 the Qualified Professional reported: <ul style="list-style-type: none"> - he hadn't been working at the facility that long - he was responsible for completing admission assessments - he usually did the admission assessments the clients first day at the facility - he would make sure they were completed upon admission 	V 105		