

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL033-136 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____ | (X3) DATE SURVEY COMPLETED C 06/27/2025 |
| NAME OF PROVIDER OR SUPPLIER DOROTHY'S PLACE | | STREET ADDRESS, CITY, STATE, ZIP CODE 1700 ROSEWOOD AVENUE ROCKY MOUNT, NC 27801 | | |
| (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>A complaint survey was completed on 6/27/25. One complaint was substantiated (Intake #NC00231147) and two complaints were unsubstantiated (Intakes #NC00230382 & #NC00230346). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 4 and has a current census of 3. The survey sample consisted of audits of 3 current clients.</p> | V 000 | | |
| V 105 | <p>27G .0201 (A) (1-7) Governing Body Policies</p> <p>10A NCAC 27G .0201 GOVERNING BODY POLICIES</p> <p>(a) The governing body responsible for each facility or service shall develop and implement written policies for the following:</p> <p>(1) delegation of management authority for the operation of the facility and services;</p> <p>(2) criteria for admission;</p> <p>(3) criteria for discharge;</p> <p>(4) admission assessments, including:</p> <p>(A) who will perform the assessment; and</p> <p>(B) time frames for completing assessment.</p> <p>(5) client record management, including:</p> <p>(A) persons authorized to document;</p> <p>(B) transporting records;</p> <p>(C) safeguard of records against loss, tampering, defacement or use by unauthorized persons;</p> <p>(D) assurance of record accessibility to authorized users at all times; and</p> <p>(E) assurance of confidentiality of records.</p> <p>(6) screenings, which shall include:</p> <p>(A) an assessment of the individual's presenting problem or need;</p> | 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 (B) an assessment of whether or not the facility can provide services to address the individual's needs; and (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 observation, record review, and interview, the facility failed to implement their written policy regarding client's personal funds. The findings are:</p> <p>Review on 6/24/25 of the facility's policy for client's personal funds revealed:</p> <ul style="list-style-type: none"> - "It is the policy of Quality Care Solutions, Inc. (Licensee) to have internal controls and oversight regarding the recordkeeping of clients' personal funds at a 24-hour facility (Dorothy's Place)." - "Two (2) facility employees (Qualified Professional (QP) and House Manager (HM)) shall manage the clients' personal funds. However, the clients or their legally responsible person must give informed consent for the management and expenditure of funds. The QP and HM shall oversee the allowance for the client and maintain an accurate accounting of money received and disbursed." <p>Observation and record review on 6/20/25 at approximately 3:15pm at the Licensee's Day Program revealed:</p> <ul style="list-style-type: none"> - The Day Program's QP unlocked her desk drawer with her key - She pulled out two manila envelopes with Client #1 and #3's names on it - A white sheet of paper was attached to each of the manila envelopes - The white sheet of paper was a form titled "money sheet" in which the clients and staff signed for the amount of money deposited or | V 105 | | |

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| V 105 | <p>Continued From page 3</p> <p>withdrawn from the envelope</p> <ul style="list-style-type: none"> - A white envelope was inside that contained the clients' money - The amount of money as well as the withdrawals were written on the outside of the white envelope - Receipts from purchases made in June 2025 by client #1 & client #3 - The amount of money withdrawn ranged from five to twenty dollars <p>Interview on 6/20/25 the Licensee's Day Program's QP reported:</p> <ul style="list-style-type: none"> - The facility that Client #1 and #3 resided at had a vacant full time QP position - The HM had been out on sick leave since the end of May 2025 - "Upper management" approved for her to manage the clients' money until the HM returned - She had started managing Client #1 and Client #3's money in June of 2025 <p>Interview on 6/24/25 Client #3 reported:</p> <ul style="list-style-type: none"> - The Day Program's QP was helping him manage his money "for these last few weeks" (since June 2025) - When he wanted to buy something, he would "get my money at the day program, and return my money to the day program" - In the past, the HM would assist him with his money, "but she got sick and was not here (at Dorothy's Place)" <p>Interview on 6/26/25 Staff #2 reported:</p> <ul style="list-style-type: none"> - Had been working at the facility for a little over a month - Client #1 and Client #3's money was kept at the day program because the HM was out sick and the Clinical Director/Acting QP was not always at the facility | V 105 | | |

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| V 105 | <p>Continued From page 4</p> <p>Interview on 6/27/25 the HM reported:</p> <ul style="list-style-type: none"> - She and whomever is fulfilling the QP duties at the facility were responsible for managing the clients money - She was out of work from 5/26/25 to 6/13/25, and was not yet back at work full-time - The former QP resigned in April 2025 - The Day Program's QP had the money because the clients went to the day program five times a week and it was where they spent most of their money - She was not sure who made the decision that the day program would have oversight of the clients' personal funds <p>Interview on 6/27/25 the Clinical Director/Acting QP reported:</p> <ul style="list-style-type: none"> - The facility's QP and the HM were responsible for managing the clients' money at the facility - The full time QP position had been vacant since April 2025 - A new QP was hired and was scheduled to start within the "next few weeks" - The HM was out on sick leave from 5/26/25 to 6/13/25 - She helped with QP responsibilities, but was not able to be present in the facility often to assist with managing the clients' money - The Chief Executive Officer (CEO) of the company had taken Client #1 and #3's monthly stipend to the day program for the Day Program's QP to give to the clients - "I approved it in May (2025) for [Day Program's QP] to have (oversee) the guys (clients) money for June" since the HM was out of work | V 105 | | |