STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL0411110	A. BUILDING: _____ B. WING _____	07/11/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WATLINGTON'S FAMILY CARE HOMES #3	1401 SHERROD-WATLINGTON CIRCLE GREENSBORO, NC 27406

(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 and complaint survey was completed on 7/11/25, The complaints were unsubstantiated (intake #NC00230331 and intake # NC00231379). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living with Adults with a Developmental Disability. The facility is licensed for 6 and has a current census of 5. The survey sample consisted of audits of 2 current clients and 1 discharged client.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross,	V 108		

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V 108	Continued From page 1 the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure staff were currently trained in basic first aid and to provide cardiopulmonary resuscitation (CPR) for 3 of 3 audited staff (staff #1, staff #2 and the Licensee #1/Qualified Professional (L#1/QP). The findings are: Review on 7/9/25 of staff #1's record revealed: - A hire date of 9/12/16 - Her training in first aid had expired on 2/13/25 - Her training in CPR had expired on 6/26/25 Review on 7/9/25 of staff #2's record revealed: - A hire date of 8/20/18 - Her training in first aid had expired on 2/13/25 Review on 7/9/25 of the Licensee #1/QP's record revealed: - A hire date of 8/86 - Her training in first aid had expired on 6/6/25 - Had completed online training only in first aid on 6/20/25 - Her training in CPR had expired on 2/13/25 Interview on 7/9/25 with staff #1 revealed: - She worked alone with the clients during her	V 108		

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V 108	Continued From page 2 shift An attempt on 7/11/25 to interview staff #2 was unsuccessful as a request for a return phone call went unmet prior to the close of the survey on 7/11/25. Interview on 7/9/25 with the Licensee #1/QP revealed: - The individual she typically used to provide her staff training in first aid/CPR had been sick/hospitalized - Same individual had told her that she and her staff could take online training in first aid until she could locate someone to provide in person training - Did not realize online training in first aid was not sufficient - Would attempt to locate a new first aid/CPR instructor as soon as possible	V 108		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented.	V 536		

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V 536	Continued From page 3 (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered. (d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (e) Formal refresher training must be completed by each service provider periodically (minimum annually). (f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule. (g) Staff shall demonstrate competence in the following core areas: (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and	V 536		

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V 536	Continued From page 4 (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). (h) Service providers shall maintain documentation of initial and refresher training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where they attended; and (C) instructor's name; (2) The Division of MH/DD/SAS may review/request this documentation at any time. (i) Instructor Qualifications and Training Requirements: (1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions. (2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program. (3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule. (5) Acceptable instructor training programs shall include but are not limited to presentation of: (A) understanding the adult learner; (B) methods for teaching content of the course; (C) methods for evaluating trainee	V 536		

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V 536	Continued From page 5 performance; and (D) documentation procedures. (6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach. (7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually. (8) Trainers shall complete a refresher instructor training at least every two years. (j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where attended; and (C) instructor's name. (2) The Division of MH/DD/SAS may request and review this documentation any time. (k) Qualifications of Coaches: (1) Coaches shall meet all preparation requirements as a trainer. (2) Coaches shall teach at least three times the course which is being coached. (3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction. (l) Documentation shall be the same preparation as for trainers.	V 536		

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V 536	Continued From page 6 This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure 3 of 3 audited staff (staff #1, staff #2 and the Licensee#1/Qualified Professional) were trained annually in alternatives to restrictive interventions. The findings are: Review on 7/9/25 of staff #1's record revealed: - A hire date of 9/12/16 - Her training in alternatives to restrictive interventions had expired on 2/28/25 Review on 7/9/25 of staff #2's record revealed: - A hire date of 8/20/18 - Her training in alternatives to restrictive interventions had expired on 2/28/25 Review on 7/9/25 of the Licensee #1/QP's record revealed: - A hire date of 8/86 - Her training in alternatives to restrictive interventions had expired on 2/28/25 Interview on 7/9/25 with the Licensee #1/QP revealed: - The individual she typically used to provide her staff training in alternatives to restrictive interventions had been sick/hospitalized - Would attempt to locate a new instructor in alternatives in restrictive interventions as soon as possible	V 536		