

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL009-040	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 09/16/2025
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NAME OF PROVIDER OR SUPPLIER BLADEN COUNTY #1 MILLBRANCH	STREET ADDRESS, CITY, STATE, ZIP CODE 715 EAST BLADEN STREET BLADENBORO, NC 28320
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on September 16, 2025. Deficiencies were 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 6 and has a current census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 108	<p>27G .0202 (F-I) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <ol style="list-style-type: none"> (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. <p>(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, the American Heart Association or their equivalence for relieving airway obstruction.</p>	V 108		

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

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V 108	<p>Continued From page 1</p> <p>(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.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure 5 of 5 current paraprofessionals audited staff (#1, #3, #5, #7, #8) and 1 of 1 Former Staff (FS #10) received training to meet the MH/DD/SA needs of the clients. The findings are:</p> <p>Review on 9/11/25 of staff #1's personnel record revealed: -Hire Date: 4/25/25. -Job: Direct Support Professional. -No documentation of client specific MH/DD/SA needs training for client #4.</p> <p>Interview on 9/4/25 and 9/12/25 staff #1 stated: -She worked at the facility since April 2025. -She worked as client #4's one on one staff for the last month. -She had not reviewed client #4's treatment plan/BSP prior to working with him. -She was aware of some of client #4's behaviors from what staff told her but "not aware of the degree of behaviors." -She worked as a fill in one on one for client #4 on 5/23/25. -She was "straightening" the living room as everyone was leaving. -Client #3 came to the door and said client #4</p>	V 108		

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V 108	<p>Continued From page 2</p> <p>was on top of FS #10.</p> <p>-When she went outside and saw client #4 and FS #10 were on the ground.</p> <p>-"I was trying to pull him off and he got up himself."</p> <p>-When client #4 got up he picked the cup up off the ground and threw it and the cup hit FS #10 in the head. He attempted to pick it up again but she kicked it away.</p> <p>-Client #4 started "stomping" FS #10's head.</p> <p>-She attempted to use a therapeutic hold but client #4 elbowed her and then started walking off.</p> <p>-She followed client #4.</p> <p>Review on 9/11/25 of staff #3's personnel record revealed:</p> <p>-Hire Date: 7/1/11.</p> <p>-Job: Direct Support Professional.</p> <p>-No documentation of client specific MH/DD/SA needs training for client #4.</p> <p>Interview on 9/5/25 staff #3 stated:</p> <p>-She had worked at the facility since 2009.</p> <p>-She had "not gone over it" client #4's treatment plan/BSP but "I think there is one in place" for client #4.</p> <p>-She had not received any training on client #4's treatment plan/BSP.</p> <p>-She was getting a razor on 5/23/25 for client #5 when client #3 came to the door and said client #4 "was on top of her [FS #10]".</p> <p>-"I called his name and he looked but he was stomping her [FS #10's] head."</p> <p>-"I called the police."</p> <p>-Client #1 and staff #7 were already outside with client #4.</p> <p>-"He (client #4) is 20 years old, like a beast when fighting."</p>	V 108		

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V 108	<p>Continued From page 3</p> <p>Review on 9/11/25 of staff #7's personnel record revealed: -Hire Date: 7/1/11. -Job: Direct Support Professional. -No documentation of client specific MH/DD/SA needs training for client #4.</p> <p>Interview on 9/11/25 staff #7 stated: -She worked at the facility since 2018 or 2019. -She did not provide one on one services. -There was an incident in May 2025 with client #4. -She told the clients to "load up on the van." -She was looking for something when client #4 "jumped on the van and he was standing up." -Client #4 asked her if he could sit in front and she told him yes. -FS #10 did not hear her tell client #4 he could sit in the front. -FS #10 told client #4 "no" and client #4 does not like the word "no." -FS #10 was new and did not know that word "triggered" him. -She did not know client #4 had jumped off the van. -She heard screaming and saw client #4 was on the ground and he had FS #10 on top of him. -Client #4 had his legs wrapped around FS #10 and his fingers in her eyes. -Client #3 went into the house crying. -She was unsure when staff #1 came outside. -She and staff #1 tried to get client #4 up but he kept holding FS #10. -When they got client #4 up, he took FS #10's cup and hit her in the back of the head with it, he was "kicking her and everything else." -She was not trained in client #4's treatment/BSP. -The facility was "supposed to do something about his treatment plan. I have not seen anything since it was updated."</p>	V 108		

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V 108	<p>Continued From page 4</p> <p>-"I cannot tell you when I last read it because it has been so long." -She had not been involved in any internal investigations. -The Regional Administrator met with her about the incident and told her to do ProAct. -She completed ProAct as part of her annual training.</p> <p>Review on 9/11/25 of FS #10's personnel record revealed: -Hire Date: 5/5/25. -Separation Date: -Job: Direct Support Professional. -No documentation of client specific MH/DD/SA needs training for client #4.</p> <p>Interview on 9/5/25 FS #10 stated: -She began work at the facility on May 5, 2025. -She provided one on one services to client #2. -"I was attacked and scared for my life." -On 5/23/25, the clients and staff prepared to leave the facility to go to the day program. -Client #4 was told he could sit in the front seat but the staff did not tell her. -She told client #4 he could not sit in the front seat. -"Next thing I knew, I was on the ground." -"He [client #4] bit my cheek, threw my glasses, he took his fingers and tried to gouge my eyes out." -"I had a 40 ounce [double walled - stainless steel] cup, he (client #4) hit me in the back of the head with it." -Client #4 "took his foot and stepped on the back of my head then my hands and my arms." -Staff #7 did "nothing but watch." -Staff #7 did not attempt to "restrain him." -Staff #1 got client #4 "off of me" and told client #4 "that was enough" and he walked to the police</p>	V 108		

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V 108	<p>Continued From page 5</p> <p>station.</p> <p>-I had blood coming out of my eyes. I cannot see like I could before. He, [Client #4] scratched my cornea."</p> <p>-I have a permanent scar on my cheek" from the bite.</p> <p>-She was told client #4 was "unpredictable."</p> <p>-I was not told what he did or how he attacked."</p> <p>-She had never seen client #4's treatment plan/BSP.</p> <p>-She pressed charges in June against client #4 for "assault on a female" and "assault with a deadly weapon."</p> <p>-Client #4 was indicted and the case was prepared for superior court on 10/13/25.</p> <p>Review on 9/11/25 of staff #5's personnel record revealed:</p> <p>-Hire Date: 7/5/18.</p> <p>-Job: Direct Support Professional.</p> <p>-No documentation of client specific MH/DD/SA needs training for client #4.</p> <p>Interview on 9/4/25 and 9/11/25 staff #5 stated:</p> <p>-She provided one on one for client #4 but was not his permanent one on one staff.</p> <p>-She had worked with client #4 about a year.</p> <p>-She worked 2nd shift and there were no other 2nd shift staff.</p> <p>-There were other fill in staff that normally worked on 2nd shift with her.</p> <p>-On 8/12/25 she worked one on one with client #4.</p> <p>-She prepared a shower for client #1 when client #4 stood outside another client's bedroom.</p> <p>-Client #4 said something to her and she asked what he said.</p> <p>-Client #4 did not respond.</p> <p>-"Due to his behaviors, I had my guard up."</p> <p>-Client #4 attempted to hit her and she was able</p>	V 108		

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V 108	<p>Continued From page 6</p> <p>to block the hit.</p> <ul style="list-style-type: none"> -Client #4 was "pushing" her into another client's bedroom as she continued to block hits, she fell to the floor then client #4 bit her pinky finger. -She implemented a bite release on client #4, he released the bite and ran out the door. -She followed client #4 to the police station. -Client #4 told the police he wanted to go to jail or the hospital. -Client #4 left the police station and walked to a local restaurant. -Client #4 was taken to the hospital by ambulance. -Client #4 was "supposed" to have a treatment plan/BSP but, "I haven't seen it" -The Licensee sent her to a local Urgent Care due to her hip was swollen from the fall. -She was told her hip was fractured. -She pressed charges for assault against client #4 on 8/14/25. -She had not been trained on client #4's specific needs. -The facility had a meeting about client #4's treatment plan/BSP when she was on medical leave. <p>Review on 9/11/25 of staff #8's personnel record revealed:</p> <ul style="list-style-type: none"> -Hire Date: 10/6/22. -Job: Direct Support Professional. -No documentation of client specific MH/DD/SA needs training for client #4. <p>Interview on 9/5/25 staff #8 stated:</p> <ul style="list-style-type: none"> -She worked as "fill in" staff. -She worked at the facility "a lot" at least weekly. -She had not received any training on client #4's behaviors. -She knew not to tell client #4 "no" and "do not get smart" with client #4. 	V 108		

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V 108	<p>Continued From page 7</p> <ul style="list-style-type: none"> -She worked as client #4's one on one staff on 8/12/25. -She and staff #5 helped client #1 get ready for his shower on 8/12/25 -Client #4 stood in front of staff #5 and told her about "somebody in a wheelchair." -Staff #5 asked client #4 to speak slower so she could understand. -Staff #5 left the bathroom and asked for client #1's bath robe. -Client #4 told staff #5 the bath robe was in the dryer. -When staff #5 went to get the bath robe out of the dryer she asked client #4 to "hold on." -Client #4 started to "swing I thought he was about to hug her (staff #5)." -Staff #5 was able to block client #4's hit and grabbed his wrist. -Client #4 pushed staff #5 against the wall then into client #3's bedroom and staff #5 "tripped over" a chair. -"I was hollering." -"I could not get into the small space" to help staff #5. -She had not tried to remove client #4 off of staff #5 "because he would come after me, you cannot touch [client #4]." -Client #4 was on top of staff #5 and was hitting her. -Client #4 bit staff #5 and she pinched his nose for him to release. -Client #4 ran out the door and staff #5 followed him. <p>Review on 9/4/25 and 9/5/25 of client #4's record revealed:</p> <ul style="list-style-type: none"> -Admitted 5/2/23. -Diagnoses of Mild Intellectual Disability, Attention Deficit Hyperactivity Disorder, Major Depressive Disorder, Intermittent Explosive Disorder, 	V 108		

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V 108	<p>Continued From page 8</p> <p>Disruptive Mood Dysregulation Disorder, Other Conduct Disorder, Mixed Receptive Expressive Language Disorder and Schizophrenia.</p> <p>-Individual Support Plan dated: 2/1/25..."What are my preferences?...prefers to do activities with his 1:1 staff member...Behavioral Health Supports: When [client #4] is upset, his eyes will get big and he will begin to talk loudly becoming verbally aggressive when he gets upset when he does not what he wants and does not how to express himself. [Client #4] requires extra supports in the home to direct him on ways to interact more effectively with his peers and family. [Client #4] will break and throw objects at staff and peers. [Client #4] will become physically aggressive and attack others by hitting and biting. [Client #4] will elope from the day program, group home or when out in the community...What You Can Do to Help Me Avoid a Crisis:...Provide [Client #4] with 1:1 attention..."</p> <p>-Behavior Support Plan (BSP) dated: 6/17/25..."...Prevention and Opportunities for Reinforcement:... 2)...tends to match energy level of his environment and his interaction...Be aware that [client #4] is more likely to become agitated when his environment is loud and chaotic. If his environment becomes disruptive, encourage him to go to a quieter area...7) Staff are advised that [client #4] appears to respond better to male staff, and that he responds better when staff are consistently firm and direct with him...Aggression or Property Destruction: Any physically assaultive behavior (for example, hitting, kicking, biting, spitting, scratching, hair-pulling) or intentionally destroying his property, property belonging to others, or property belonging to [Licensee] 2. If [client #4] does not immediately release from a hair-pull or a bite, implement the approved Proact therapeutic techniques and then continue with the intervention..."</p>	V 108		

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V 108	<p>Continued From page 9</p> <p>Review on 9/4/25 of the facility's incident reports for client #4 revealed: -"Event Date 05/23/2025...Summary Residents (clients) of Bladen #1 (facility) were directed by staff to get onto the van so they may depart for the morning...Staff proceeded to go to the van and [client #4] asked staff 1 [staff #7] if he may sit in the front seat...Staff 1 [staff #7] responded to [client #4] that he may do so. Upon arriving at the van staff [FS #10] stated to [client #4] that he may not sit in the front seat as she was attempting to explain to him why it would be safer if he sat in the back, [client #4] became angry and at that time attacked staff 2 [FS #10]...[client #4] took his fingers and placed his nails into [FS #10] eyes and gouge at them...bite [FS #10] on her left side in the face too. [FS #10] was on the ground with [client #4] on her back while holding onto her with his legs... Staff 3 [staff #1] intervened with attempting to take hold of [client #4] arm in a way that she could remove him from staff [FS #10]. [Client #4] proceed to kick dsp (Direct Support Paraprofessional) (FS #10)...At that time [client #4] grabbed the Stanly Cup belonging to [FS #10] and threw it hitting [FS #10] in the head...[client #4] went to grab the cup again and the cup was kicked away from the area by staff. [Client #4] proceeded to kick and stomp [FS #10]. [Client #4] came to a stop and gathered his lunch bag off the van and stated he was going to the police station..."</p> <p>-"Event Date 08/12/2025...Summary Staff (staff #5) was checking on clothes in the dryer while discussing with other staff (staff #8) about getting a towel to cover up..When turning dryer back on [client #4] said something to staff (staff #5). Staff asked 'what you say [client #4]' [client #4] didn't respond to staff. Staff (staff #5) gave time for [client #4] to respond again. Staff (staff #5)</p>	V 108		

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V 108	<p>Continued From page 10</p> <p>proceeded to walk to the full bathroom where individual was waiting to be bathe. When taking about 2 steps [client #4] quickly lunged out at staff. Staff (staff #5) blocked his hit. [Client #4] continued to hit as staff (staff #5) continued to block all hits he was throwing. [Client #4] was pushing staff (staff #5) backward with force... [Client #4] began to bite staff (staff #5) on right pinky finger. Staff (staff #5) immediately began to use the bite release...[Client #4] got up and slung items that was on dresser. Staff (staff #5) got up and followed him keeping eyesight distance..."</p> <p>Review on 9/11/25 of a facility's "Investigation Summary" dated 5/24/25 revealed: -"Investigation Start Date: May 23, 2025 Investigation Completion Date: May 24, 2025 Allegation Summary/Purpose of Investigation: The purpose of this internal investigation is to determine how to prevent additional incidents Describe the plan of protection put in place: [client #4] was picked up by the police. The plan put in place is to ensure [client #4] always has a one on one....Investigation Outcome:...Investigation Outcome Summary: The internal investigation has been completed, with statements gathered from staff at home (facility). As a result, a plan has been implemented to ensure that [client #4] receives dedicated one-on-one support. Also, all workers have read [client #4] BSP..."</p> <p>Interview on 9/4/25 client #4 stated: -He "don't know" how long he had been at the facility. -He worked one on one for first shift with "a lady." -He never had a male one on one. -He was arrested and went to jail, it's a "long story." -He was arrested for assault on staff.</p>	V 108		
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V 108	<p>Continued From page 11</p> <ul style="list-style-type: none"> -He went to jail twice. -He spent the night in jail. -He was unsure how long he stayed in jail. -His mother/co-guardian picked him up from jail. -He was unsure what his goals were. <p>Interview on 9/5/25 client #4's mother/co-guardian stated:</p> <ul style="list-style-type: none"> -Client #4 received one on one services but she was unsure how often. -In May, client #4 was told he could sit in the front seat. -FS #10 told client #4 he could not sit in the front seat. -Client #4 was given one direction from one staff and another direction from another staff. -It turned into a "fight" and client #4 went to jail. -The staff (FS #10) pressed charges against client #4 and he was in jail for almost 2 weeks. -She was told the facility would not get client #4 out of jail. -She obtained a lawyer for client #4 and bonded him out of jail. -There was a second incident with another staff #5. -The staff did not press charges right away. -Client #4 was involuntarily committed. -She was concerned with client #4 "getting a record." -Staff has to "have patience and know how to handle" client #4. -Client #4 was arrested a second time and jailed from Thursday to Monday. -Client #4 had to do an evaluation to see if he was competent to stand trial. -She was "concerned" with client #4 getting a criminal record. -The evaluation concluded he was able to stand trial. 	V 108		

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V 108	<p>Continued From page 12</p> <p>Interview on 9/9/25 a local Chief of Police stated: -"The people that they hire does not know what to do." -When client #4 "leaves" the facility, "he comes straight to the police department." -The local police department received a call in May from the facility. -Client #4 had already left the facility and walked down the road. -He met client #4 about 1/4 mile away from the facility. -Client #4 had "grabbed her (FS #10) around her throat, gouged her eyes, she could not open her eyes and when she did it was tears and blood coming out." -"He [client #4] had stomped her arms and hand leaving the soles of his shoe prints" -"He had kicked her in the head, side and stomach." -"We pressed felony charges for assault inflicting serious bodily injury."</p> <p>Interview on 9/11/25 the ProAct trainer stated: -Client #4 "overpowered" FS #10. -She was unsure if she had retrained any staff as a result client #4's physical aggression. -"The biggest part is knowing the people you support by reading the PCP (Person Centered Plan) and BSP."</p> <p>Interview on 9/4/25, 9/10/25 and 9/11/25 the Qualified Professional (QP) stated: -He worked as the QP since April 2025. -He trained all staff on the client needs to include client #4 in April 2025 when he became the QP. -All staff were trained during a staff meeting on client #4's BSP in August 2025. -Staff #5 was not present during the staff meeting because she was on medical leave. -He could not locate the previous BSP training.</p>	V 108		

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V 108	<p>Continued From page 13</p> <ul style="list-style-type: none"> -He made sure the BSP was on the computer and a copy at the facility due to being short staff the fill in staff needed something to reference. -After the incident with client #4's attack on FS #10 there was a "mini team" meeting with the QP and Administrator to "see how we can best support" client #4. -There was "open conversation" with staff asked if they were "comfortable" working with client #4. -Some staff transitioned to other facilities. -FS #10 later pressed criminal charges against client #4 and he was arrested around 7/4/25 or 7/5/25. -After the August incident with staff #5, staff #5 pressed charges against client #4 and he was arrested on 8/15/25 and released the following Monday. -Client #4 has a history of physical aggression. -There were 2 incidents of client #4 had bitten the teacher at the day program and he had bitten another QP before (dates unknown). <p>Interview on 9/5/25 and 9/11/25 the Regional Administrator stated:</p> <ul style="list-style-type: none"> -The QP was responsible for client specific trainings but she also did a lot of the staff training. -"No new staff should be working with [client #4]." -Client #4 was "different" and his reactions are "volatile" as he does not always show a sign before he has a behavior. -It was "hard" to train on client #4's BSP because he is not going to give you a sign. -The facility had previously only trained client #4's one on one on his BSP, now all staff are trained. -She completed an internal investigation on 5/24/25. -The internal investigation revealed staff #7 offered "no help for [FS #10]" -Staff #7 had to complete ProAct Inservice. -She was not aware staff (FS #10 and staff #5) 	V 108		

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V 108	<p>Continued From page 14</p> <p>pressed criminal charges against client #4 until he was arrested.</p> <p>-Client #4 was in jail 19 days for the incident with FS #10 and 4 days for the incident with staff #5.</p> <p>Review on 9/16/25 of a Plan of Protection completed by the Regional Administrator dated 9/16/25 revealed:</p> <p>"What immediate action will the facility take to ensure the safety of the consumers in your care? We will review the Person-Centered Plan and Behavior Support Plan and ensure all staff are documenting appropriately the goals in each plan. Additionally, interactional assessments to increase to weekly for the next month. The training will address how staff should reach out should they have any questions about how to best support [client #4].</p> <p>Describe your plans to make sure the above happens. The Administrator will receive and review the in-services weekly on the new and current staff with Bladen 1 (facility) on all training's specifics on the Personal Supported active plans."</p> <p>This facility served clients with diagnoses to include Intellectual Disability, Attention Deficit Hyperactivity Disorder, Major Depressive Disorder, Intermittent Explosive Disorder, Disruptive Mood Dysregulation Disorder, Other Conduct Disorder, Mixed Receptive Expressive Language Disorder and Schizophrenia. Client #4 had a significant history of physical aggression towards staff and clients and the need for a treatment plan/behavior support plan which included one on one services. The facility had not trained new staff #1 and FS #5 or current staff, #3, #5, #7, #8 on client #4's behavioral needs identified in his treatment plan/behavior support plan to ensure staff were aware of client #4's</p>	V 108		

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V 108	Continued From page 15 behaviors and strategies needed to address his behaviors. On 5/23/25, FS #10 was physically attacked by client #4. FS #10 was not aware of client #4's behaviors and strategies on how to respond to client #4. The facility had not trained all staff on client #4's treatment plan/behavioral support plan or how it should be implemented. FS #10 pressed charges against client #4 and he was arrested on or about 7/4/25 and served approximately 19 days in jail. Additionally, staff continued to work with client #4 with no training on his treatment plan/behavioral support plan. A second incident that occurred on 8/12/25. Staff #5 attended to client #5's needs while she provided one on one services to client #4. Staff #5 did not provide her full attention to client #4 and he became physically aggressive towards her which resulted in her falling and fracturing her hip. Staff #5 pressed charges against client #4 and he was arrested again on or about 8/14/25 and served approximately 4 days in jail. The facility failed to ensure all staff were trained on client #4's treatment plan/behavioral support plan and strategies needed to address his aggressive, explosive and unpredictable behaviors. This deficiency constitutes a Type A1 rule violation for serious neglect and must be corrected within 23 days.	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	V 536		

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V 536	<p>Continued From page 16</p> <p>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.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(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.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(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.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> (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; 	V 536		

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V 536	<p>Continued From page 17</p> <p>(6) recognizing the importance of and assisting in the person's involvement in making decisions about their life;</p> <p>(7) skills in assessing individual risk for escalating behavior;</p> <p>(8) communication strategies for defusing and de-escalating potentially dangerous behavior; and</p> <p>(9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name;</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(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.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(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.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be</p>	V 536		

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V 536	<p>Continued From page 18</p> <p>approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(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.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p>	V 536		

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V 536	<p>Continued From page 19</p> <p>(I) Documentation shall be the same preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure 1 of 5 paraprofessional staff (#5) audited received annual training in alternatives to restrictive interventions. The findings are:</p> <p>Review on 9/11/25 of staff #5's personnel record revealed: -Hire Date: 7/5/18. -Job: Direct Support Professional. -ProAct training Core Plus was valid through August 22, 2025. -No documentation of a current annual training in alternatives to restrictive interventions.</p> <p>Interview on 9/4/25 staff #5 stated: -She was trained in the alternatives to restrictive intervention yearly. -She was unsure of the last time she was trained. -She was not aware it was time for her restrictive intervention training.</p> <p>Interview on 9/5/25 the Human Resources/Training Coordinator stated: -Staff #5's ProAct had just expired on 8/22/25. -The ProAct training was held monthly. -Staff #5 was scheduled to participate in the next ProAct training.</p>	V 536		

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V 537	<p>27E .0108 Client Rights - Training in Sec Rest & ITO</p> <p>10A NCAC 27E .0108 TRAINING IN SECLUSION, PHYSICAL RESTRAINT AND ISOLATION TIME-OUT</p> <p>(a) Seclusion, physical restraint and isolation time-out may be employed only by staff who have been trained and have demonstrated competence in the proper use of and alternatives to these procedures. Facilities shall ensure that staff authorized to employ and terminate these procedures are retrained and have demonstrated competence at least annually.</p> <p>(b) Prior to providing direct care to people with disabilities whose treatment/habilitation plan includes restrictive interventions, staff including service providers, employees, students or volunteers shall complete training in the use of seclusion, physical restraint and isolation time-out and shall not use these interventions until the training is completed and competence is demonstrated.</p> <p>(c) A pre-requisite for taking this training is demonstrating competence by completion of training in preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(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.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider plans to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p>	V 537		

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V 537	<p>Continued From page 21</p> <p>(g) Acceptable training programs shall include, but are not limited to, presentation of:</p> <p>(1) refresher information on alternatives to the use of restrictive interventions;</p> <p>(2) guidelines on when to intervene (understanding imminent danger to self and others);</p> <p>(3) emphasis on safety and respect for the rights and dignity of all persons involved (using concepts of least restrictive interventions and incremental steps in an intervention);</p> <p>(4) strategies for the safe implementation of restrictive interventions;</p> <p>(5) the use of emergency safety interventions which include continuous assessment and monitoring of the physical and psychological well-being of the client and the safe use of restraint throughout the duration of the restrictive intervention;</p> <p>(6) prohibited procedures;</p> <p>(7) debriefing strategies, including their importance and purpose; and</p> <p>(8) documentation methods/procedures.</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualification and Training Requirements:</p> <p>(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.</p>	V 537		

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V 537	<p>Continued From page 22</p> <p>(2) Trainers shall demonstrate competence by scoring 100% on testing in a training program teaching the use of seclusion, physical restraint and isolation time-out.</p> <p>(3) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(4) 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.</p> <p>(5) 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 (j)(6) of this Rule.</p> <p>(6) Acceptable instructor training programs shall include, but not be limited to, presentation of:</p> <ul style="list-style-type: none"> (A) understanding the adult learner; (B) methods for teaching content of the course; (C) evaluation of trainee performance; and (D) documentation procedures. <p>(7) Trainers shall be retrained at least annually and demonstrate competence in the use of seclusion, physical restraint and isolation time-out, as specified in Paragraph (a) of this Rule.</p> <p>(8) Trainers shall be currently trained in CPR.</p> <p>(9) Trainers shall have coached experience in teaching the use of restrictive interventions at least two times with a positive review by the coach.</p> <p>(10) Trainers shall teach a program on the use of restrictive interventions at least once annually.</p>	V 537		

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V 537	<p>Continued From page 23</p> <p>(11) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(k) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcome (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(l) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times, the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(m) Documentation shall be the same preparation as for trainers.</p> <p> </p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure 1 of 5 paraprofessional staff (#5) audited received annual training in seclusion, physical restraint and isolation time-out. The findings are:</p> <p> </p> <p>Review on 9/11/25 of staff #5's personnel record revealed: -Hire Date: 7/5/18. -Job: Direct Support Professional. -ProAct training Core Plus was valid through</p>	V 537		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL009-040	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 09/16/2025
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NAME OF PROVIDER OR SUPPLIER BLADEN COUNTY #1 MILLBRANCH	STREET ADDRESS, CITY, STATE, ZIP CODE 715 EAST BLADEN STREET BLADENBORO, NC 28320
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(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 537	<p>Continued From page 24</p> <p>August 22, 2025.</p> <ul style="list-style-type: none"> -No current training in seclusion, physical restraint and isolation time-out. <p>Interview on 9/4/25 staff #5 stated:</p> <ul style="list-style-type: none"> -She was trained in the alternatives to restrictive intervention yearly. -She was unsure of the last time she was trained. -She was not aware it was time for her restrictive intervention training. <p>Interview on 9/5/25 the Human Resources/Training Coordinator stated:</p> <ul style="list-style-type: none"> -Staff #5's ProAct had just expired on 8/22/25. -The ProAct training was held monthly. -Staff #5 was scheduled to participate in the next ProAct training. 	V 537		