

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL097-045</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/01/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>HOLLY HILLS GROUP HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>179 HOLLY BROOK STREET NORTH WILKESBORO, NC 28659</b>
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on May 1, 2018. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p>	V 000		
V 109	<p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> <li>(1) technical knowledge;</li> <li>(2) cultural awareness;</li> <li>(3) analytical skills;</li> <li>(4) decision-making;</li> <li>(5) interpersonal skills;</li> <li>(6) communication skills; and</li> <li>(7) clinical skills.</li> </ol> <p>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.</p>	V 109		

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

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V 109	<p>Continued From page 1</p> <p>(g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to demonstrate that 1 of 1 Associate Professional staff /Executive Director/President of the Board of Directors received supervision from the Qualified Professional (QP) as required by rule. The findings are:</p> <p>Interview on 4/27/18 with the QP revealed: -She was the QP and she did not provide supervision to the AP/Executive Director/President of the Board of Directors;</p> <p>Interview on 4/27/18 and 5/1/18 with the AP/Executive Director/President of the Board of Directors revealed: -Her career background and education was in Veterinary Medicine; -She had been filling in as the Program Director since August 2016; -Her job responsibilities were: -ensuring client notes were current; -reviewing and discussing the Medication Administration Records (MARs) with facility staff; -identifying and arranging for staff training; -meeting with facility staff monthly as a group and individually; -responding to any problems identified by facility staff; -She did not receive supervision by the QP; -She did not provide clinical supervision to facility</p>	V 109		

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V 109	<p>Continued From page 2</p> <p>staff.</p> <p>Record review on 4/27/18 for paraprofessional staff (Staff #1) revealed: -Supervisor note dated 2/20/18 and signed by staff #1 and AP/Executive Director/President of the Board of Directors regarding review and discussion of MARs; -Supervisor note dated 3/14/18 and signed by staff #1 and AP/Executive Director/President of the Board of Directors regarding review of MARs and client progress notes; -Supervisor note dated 4/11/18 and signed by and signed by staff #1 and AP/Executive Director/President of the Board of Directors regarding discussion of client behavioral issue.</p> <p>Record review on 4/27/18 for paraprofessional staff (Staff #2) revealed: -Supervisor note dated 2/20/18 and signed by staff #2 and AP/Executive Director/President of the Board of Directors regarding review and discussion of MARs; -Supervisor note dated 3/31/18 and signed by staff #2 and AP/Executive Director/President of the Board of Directors regarding discussion of clients.</p>	V 109		
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS (a) There shall be no privileging requirements for paraprofessionals. (b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p>	V 110		

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V 110	<p>Continued From page 3</p> <p>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(e) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> <li>(1) technical knowledge;</li> <li>(2) cultural awareness;</li> <li>(3) analytical skills;</li> <li>(4) decision-making;</li> <li>(5) interpersonal skills;</li> <li>(6) communication skills; and</li> <li>(7) clinical skills.</li> </ol> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to demonstrate 2 of 2 paraprofessional staff (Staff #1 and #2) received supervision from a Qualified Professional (QP) as required by rule and agency policy. The findings are:</p> <p>Interview with the QP on 4/27/18 revealed: -She performed client assessments and wrote treatment plans; -She provided staff supervision to ensure client goals were implemented; -She stated she maintained a written record of her monthly supervision contacts;</p>	V 110		

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V 110	<p>Continued From page 4</p> <ul style="list-style-type: none"> <li>-Her supervision contact notes were currently at her home;</li> <li>-She stated "I have been slack about getting my notes typed up and signed by staff";</li> <li>-She stated "I'm sorry. I should have already done this."</li> <li>-She did not develop or update individualized supervision plans with staff.</li> </ul> <p>Review of the facility policy on supervision on 4/27/18 revealed: The Supervision/Training Policy contained the statement, "The supervisor will maintain a record of supervision and training for each staff member. Staff supervision and training notes will be reviewed on a monthly basis and indicate the type of supervision and training provided (individual, group, observation). These notes must be signed by both the supervisor and the supervisee."</p> <p>Review of a staff supervision record at the facility revealed: -Only one month (April 2018) of QP documented and signed supervision notes on Staff #1; -No supervision by the QP was documented for Staff #2.</p> <p>Interview on 5/1/18 with the Associate Professional/ Executive Director/President of the Board of Directors revealed: -The QP had been taking care of her mother the reason the QP supervision notes were not in the supervision record.</p>	V 110		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration:</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>(1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on interview, observation and record review, the facility failed to ensure the MAR was current on 1 of 3 (Client #1) sampled clients. The findings are:</p> <p>Review on 4/26/18 of Client #1's record revealed: -Admission date: 9/12/08</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>-Diagnoses: Intellectual Disability Disorder (IDD), Mild, Darier Disease, Acne, Alcohol Use Disorder-Moderate, Tobacco Use Disorder-Moderate, Rosacea, Allergic Rhinitis</p> <p>-Client #1 had physical symptom of itching associated with Darier Disease;</p> <p>-Client #1 had a doctor's signed order dated 7/19/17 for hydroxyzine (Atarax) hydrochloride (HCL) 10 milligram, 1 tablet by mouth at night for 30 days, then switch to cyproheptadine (Periactin), 4 mg, 1 tablet by mouth at night for 30 days.</p> <p>Review on 4/26/18 of Client #1's Medication Administration Record (MAR) from February 2018 through April 2018 revealed:</p> <p>-hydroxyzine HCL, 25 milligram, take 1-2 tablets by mouth at bedtime as needed for itching;</p> <p>- cyproheptadine (Periactin), 4 mg, take 1 tablet by mouth for 30 days and then switch to hydroxyzine HCL for itching.</p> <p>Observation on 4/26/18 at 11:17 am of Client #1's medication bottle labels revealed:</p> <p>- hydroxyzine HCL, 10 mg, take 1 tablet by mouth for 1 week for itching;</p> <p>- cyproheptadine, 4 mg, take 1 tablet by mouth at night for 1 week.</p> <p>Interview on 4/26/18 with Staff #1 revealed:</p> <p>-She was not initially aware the milligrams of the hydroxyzine HCL was different on the MAR from the medication label;</p> <p>-She confirmed during the survey with the local pharmacist that the hydroxyzine HCL was filled correctly at the prescribed dosage of 10 mg with administration of 1 tablet for 30 days and then alternate with cyproheptadine, 4 mg for 30 days;</p> <p>-Client #1 was supposed to be administered hydroxyzine HCL for 30 days and alternated to</p>	V 118		

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V 118	<p>Continued From page 7</p> <p>cyproheptadine (Periactin) for 30 days; -She stated the MARs were copied over each month; -She needed to find time to update the MARs.</p> <p>Interview on 4/27/18 with the AP/Executive Director/President of the Board of Directors revealed: -Her job responsibilities included reviewing and discussing MARs with the facility staff; -She had discussed the necessity of MAR accuracy with facility staff.</p>	V 118		