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	MHL092-686	A. BUILDING: _____ B. WING _____	R 06/07/2018

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VICTORY HEALTHCARE SERVICES, INC	3716 SUMMER PLACE RALEIGH, NC 27604

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V 000	INITIAL COMMENTS An annual and follow-up survey was completed 6/7/18. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600 Supervised Living for Adults with Mental Illness.	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, 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	V 108		

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V 108	Continued From page 1 clients. This Rule is not met as evidenced by: Based on record review and interview, the governing body failed to assure two of two staff were provided with training to meet the needs of the population served. The findings are: Review on 6/1/18 of client #5's record revealed: - an admission date of 3/31/18 - an FL2 dated 1/19/18 with diagnoses including Depression, Arthritis, Diabetes II Hypertension and Neuropathy Review on 6/1/18 of client #5's record revealed: - an admission date of 10/7/17 - an FL2 dated 10/6/17 with diagnoses including Diabetes Mellitus, Chronic Obstructive Pulmonary Disease and Obsessive Compulsive Disorder and Schizophrenia Review on 6/1/18 of the Supervisor's record revealed: - a hire date of 2/1/18 - evidence of training in Diabetic and Insulin Injecting training dated 5/1/18 During an interview on 6/1/18, the Supervisor reported she had not received any training from the agency on managing diabetes. Review on 6/1/18 of relief staff's record revealed: - a hire date of 10/23/17 - no evidence of training in assisting clients with managing diabetes	V 108		

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V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained. This Rule is not met as evidenced by: Based on record review and interview, the governing body failed to assure a plan was developed based on an assessment and in partnership with the client and responsible parties within 30 day of admission for one of three audited clients (#5). The findings are:	V 112		

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V 112	Continued From page 3 A. Review on 6/1/18 of client #5's record revealed: - an admission date of 3/31/18 - an FL2 dated 1/19/18 with diagnoses including Depression, Arthritis, Diabetes II Hypertension and Neuropathy - no evidence of a treatment or habilitation plan During an interview on 6/1/18, the Supervisor reported a plan had not been developed yet. B. Review on 6/1/18 of incident reports revealed: - a report for an incident on 3/5/18 involved client #5 and a peer engaged in a verbal altercation and a third peer called 911 - a report for an incident on 4/6/18 involved client #5 threatening a peer when confronted about using the downstairs bathroom - a report for an incident on 4/21/18 involved client #5 calling a peer a name and attempting a physical altercation but the Supervisor got between client #5 and the peer Review on 6/1/18 of client #5's record revealed: - an admission date of 10/7/17 - an FL2 dated 10/6/17 with diagnoses including Diabetes Mellitus, Chronic Obstructive Pulmonary Disease and Obsessive Compulsive Disorder and Schizophrenia - a treatment plan dated 11/9/17 with goals that addressed decreasing symptoms of mental illness by taking medications and increasing independent living skills but no goal addressing verbal and physical aggression During an interview on 6/1/18, client #1 reported the Supervisor became frightened of him and called the Administrator a few days ago because he became angry with her for taking up for a	V 112		

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V 112	Continued From page 4 peer. During an interview on 6/7/18, the Administrator reported no goal addressing the aggressive behavior had been placed in the treatment plan yet but client #5 had been assigned a therapist.	V 112		
V 113	27G .0206 Client Records 10A NCAC 27G .0206 CLIENT RECORDS (a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to: (1) an identification face sheet which includes: (A) name (last, first, middle, maiden); (B) client record number; (C) date of birth; (D) race, gender and marital status; (E) admission date; (F) discharge date; (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV; (3) documentation of the screening and assessment; (4) treatment/habilitation or service plan; (5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician; (6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician; (7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders	V 113		

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V 113	Continued From page 5 diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143. This Rule is not met as evidenced by: Based on record review and interview, the governing body failed to assure consent for authorization for emergency care was maintained in client records for three of three audited clients (#1, #4, #5). The findings are: Review on 6/1/18 of client #1's record revealed: - an admission date of 11/6/08 - an FL2 dated 5/31/18 with diagnoses including Bipolar Affective Disorder, Mild Mental Retardation and Seizure Disorder - no evidence of consent for authorization for emergency care Review on 6/1/18 of client #4's record revealed: - an admission date of 10/7/17 - an FL2 dated 10/6/17 with diagnoses including Diabetes Mellitus, Chronic Obstructive Pulmonary Disease and Obsessive Compulsive Disorder and Schizophrenia - no evidence of consent for authorization for emergency care	V 113		

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V 113	Continued From page 6 Review on 6/1/18 of client #5's record revealed: - an admission date of 3/31/18 - an FL2 dated 1/19/18 with diagnoses including Depression, Arthritis, Diabetes II Hypertension and Neuropathy - no evidence of consent for authorization for emergency care During an interview on 6/7/18, the Administrator reported had had taken the documents to a contracting agency but they were not returned.	V 113		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (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. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (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. (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	V 118		

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V 118	Continued From page 7 drug. (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. This Rule is not met as evidenced by: Based on record review and interviews, the governing body failed to assure medications were administered on the order of a person authorized to prescribe medications for one of three audited clients (#5). The findings are: Review on 6/1/18 of client #5's record revealed: - an admission date of 3/31/18 - an FL2 dated 1/19/18 with diagnoses including Depression, Arthritis, Diabetes II Hypertension and Neuropathy - a physician's order dated 5/7/18 for Ropinirole HCL 0.5 mg , used to treat symptoms of Parkinson's Disease, with instructions to administer 1 tablet at hour of sleep - the May 2018 had no documentation to reflect the above medication was administered 5/31/18 During an interview on 6/1/18, the Supervisor reported the medication was not given because the medication ran out. The Supervisor reported she had contacted the pharmacy on 5/29/18 to reorder the medication and was informed the doctor would need to write a new prescription. [This deficiency constitutes a recited rule area and must be corrected within 30 days.]	V 118		

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V 736	Continued From page 8	V 736		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interview, the governing body failed to assure the home was maintained in an attractive manner. The findings are: Observation on 6/1/18 at approximately 2:03 PM revealed: - client #4's room had two holes in the wall to the left of the closet door the size of a fist and a hole in the wall above the night stand the size of a lemon - walls were dirty and in need of washing and/ or painting through out the house During an interview on 6/1/18, the Supervisor reported the holes had been in clinet #4's bedroom walls since February 2018. [This deficiency constitutes a recited rule area and must be corrected within 30 days.]	V 736		