

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-622	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 07/27/2018
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NAME OF PROVIDER OR SUPPLIER AGAPE FAMILY CARE HOMES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 2336 RAVENHILL DRIVE RALEIGH, NC 27615
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V 000	<p>INITIAL COMMENTS</p> <p>An Annual and Follow Up Survey was completed on July 27, 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 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> <p>(1) general organizational orientation;</p> <p>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</p> <p>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</p> <p>(4) training in infectious diseases and bloodborne pathogens.</p> <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> <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</p>	V 108		

Division of Health Service Regulation 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>clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure one of two audited staff (#2) was trained in first aid and cardiopulmonary resuscitation (CPR). The findings are:</p> <p>Review on 07/27/18 of staff #2's personnel record revealed: -Hired: 08/20/13 -Roster dated 03/15/17 for Adult, Child First Aid/CPR training -No evidence of CPR/First aid card or if training was successfully completed or passed</p> <p>During interview on 07/25/18, staff #1 reported: -The group home operated the home using a live in staff primarily with relief -Staff worked alone</p> <p>Interview on 07/27/18, the Qualified Professional/Registered Nurse/Licensee reported: -Prior to 07/27/18, he had contacted the First Aid/CPR instructor but had not received a return call or the cards</p>	V 108		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local</p>	V 114		

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V 114	<p>Continued From page 2</p> <p>authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure fire and disaster drills were held at least quarterly and repeated for each shift. The findings are:</p> <p>Review on 07/26/18 of facility record revealed: -Facility utilized 2 shifts for operational purposes. -January-July 2018, one fire drill completed 02/25/18 at 8:30AM..no other fire drills noted in the record -January-July 2018, no disaster drills in the book.</p> <p>Interview on 07/26/18, staff #1 reported: -She thought staff #2 had completed and documented drills</p> <p>Interview on 07/27/18, the Qualified Professional/Registered Nurse/Licensee reported he: -Provided oversight of the group home and the fire drills -Was not aware of missing drills... -Required staff to complete fire and disaster drills on each shift</p>	V 114		

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V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(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 observation, record review and interview, the facility failed to ensure one of three</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>audited client's (#6) medication was administered on the written order of a physician. The findings are:</p> <p>Review on 07/25/18 of client #6's record revealed:</p> <ul style="list-style-type: none"> -Admitted: 10/28/15 -Diagnoses of Borderline Intellectual Developmentally Disability, Schizophrenia, Depression, Hypertension, Diabetes and Dyslipidemia -FL-2 dated 02/07/18..."ProAir HFA inhaler 2 puffs twice a day as needed" (rescue inhaler)..also noted was Dulera 100-5 mcg two inhalations twice a day (asthma medication) <p>Review on 7/25/18 of client #6's May, June & July 2018 MAR revealed:</p> <ul style="list-style-type: none"> -ProAir HFA listed but not initialed as administered <p>Observation on 07/25/18 at 1:33 PM of client #6's medications revealed no ProAir</p> <p>During interviews on 7/26/18 and 07/27/18, the Qualified Professional/Registered Nurse/Licensee reported:</p> <ul style="list-style-type: none"> -He was not aware client #6 required ProAir...often during medication monitoring the pharmacy would take medications that had not been used...he did not have a discontinue order for the Pro Air -He spoke with the pharmacy and a physician's order was required to dispense the ProAir...pharmacist awaited orders from the physician 	V 118		
V 133	G.S. 122C-80 Criminal History Record Check	V 133		

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V 133	<p>Continued From page 5</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</p> <p>(a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter.</p> <p>(b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not</p>	V 133		

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V 133	<p>Continued From page 6</p> <p>covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency.</p> <p>(c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:</p> <p>(1) The level and seriousness of the crime.</p> <p>(2) The date of the crime.</p>	V 133		

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V 133	<p>Continued From page 7</p> <p>(3) The age of the person at the time of the conviction.</p> <p>(4) The circumstances surrounding the commission of the crime, if known.</p> <p>(5) The nexus between the criminal conduct of the person and the job duties of the position to be filled.</p> <p>(6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed.</p> <p>(7) The subsequent commission by the person of a relevant offense.</p> <p>The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:</p> <p>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.</p> <p>(2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.</p> <p>(e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of</p>	V 133		

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V 133	<p>Continued From page 8</p> <p>persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes,</p>	V 133		

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V 133	<p>Continued From page 9</p> <p>supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p> <p>(1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.</p> <p>(2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.)</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to request statewide criminal record check within five business days of hiring two of two staff (#1 and #2). The findings are:</p> <p>Review on 07/27/18 of the facility's personnel record revealed: -Staff #1: Hired 06/01/13....county wide criminal check dated 07/21/16 -Staff #2: Hired 08/12/13...county wide criminal check dated 07/21/16</p> <p>During interview on 07/27/18, the Qualified Professional/Registered Nurse/Licensee</p>	V 133		

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V 133	Continued From page 10 reported: -He was not aware the agency could not use the criminal record checks from the local clerk of court office...did not realize the criminal check was only for a specific county not the entire state.	V 133		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses; (4) "D" designation means a facility which serves minors whose primary diagnosis is	V 289		

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V 289	<p>Continued From page 11</p> <p>substance abuse dependency but may also have other diagnoses;</p> <p>(5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or</p> <p>(6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e) (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL).</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to ensure it operated within the scope for which it was licensed affecting 2 of 3 audited clients (#1 and #2). The findings are:</p> <p>Review on 07/25/18 of the facility's public record maintained by Division of Health Service</p>	V 289		

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V 289	<p>Continued From page 12</p> <p>Regulation revealed:</p> <ul style="list-style-type: none"> - License effective January 1, 2018 for service category 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities - Annual, Complaint and Follow Up Surveys <p>Statement of Deficiencies between 2010 and 2018 yielded citations for Supervised Living Scope regarding admitting clients with no diagnosis of Intellectual or Developmental Disability (IDD).</p> <p>Review on 07/25/18 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admitted: 01/03/18 - Diagnoses: Paranoid Schizophrenia and Dyslipidemia - No diagnosis related to IDD. <p>Review on 07/25/18 of client #2's record revealed:</p> <ul style="list-style-type: none"> - Admitted: 03/29/14 - Diagnoses: Paranoid Schizophrenia, Hypertension and Type 2 Diabetes - No diagnosis related to IDD. <p>During interview on 07/27/18, the Qualified Professional/Registered Nurse/Licensee stated:</p> <ul style="list-style-type: none"> -No new clients had been admitted since January 2018. -Prior to this interview, he was not aware of the process to request a waiver to obtain an exemption for the current clients that resided in his home...currently, he had a total of 4 of the 5 clients that would need to be included in the waiver <p>This deficiency constitutes a recited deficiency and must be corrected within 30 days</p>	V 289		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-622	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 07/27/2018
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NAME OF PROVIDER OR SUPPLIER AGAPE FAMILY CARE HOMES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 2336 RAVENHILL DRIVE RALEIGH, NC 27615
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V 736 V 736	Continued From page 13 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 facility failed to maintain the facility and it's grounds in an attractive manner. The findings are: Observation on 07/25/18 between 12 noon & 3:00 PM revealed: -Upstairs large bedroom occupied by two clients had patches of brown spots on the walls and in the corners near wall/ceilings. -Outside the facility: white car in front of yard with windows busted...television outside on the ground turned over near the trash can During interviews between 07/25/18-07/27/18, the Qualified Professional/Registered Nurse/Licensee reported: -TV: discarded because it didn't work...thought it was going to be picked up soon -Bedroom: the spots on the wall were a result of the chemicals from the exterminator for bedbug treatment -Car: had been in the yard for a month...it belonged to an employee and needed repair During interview on 07/26/18, the exterminator reported: -Residue from a chemical spray would leave	V 736 V 736		

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V 736	Continued From page 14 a film or wet spot on the wall..last treatment to the facility was July 13, 2018 and the film or wet area would have disappeared...he had not been made aware of any residue left after the treatment -Based on the description and text picture of the bedroom area, the spots appeared to be bedbug droppings composed of fecal matter and blood. -Area could be cleaned or repainted to resolve the bedbug residue issue	V 736		
V 738	27G .0303(d) Pest Control 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (d) Buildings shall be kept free from insects and rodents. This Rule is not met as evidenced by: Based on observation, record review and interview, the governing body failed to ensure the facility was kept free of insects and rodents. The findings are: Observation on 07/25/18 between 12 noon & 3:00 PM revealed: -Ants in the kitchen area on the dinner table -Upstairs large bedroom occupied by two clients had patches of brown spots on the walls and in the corners near wall/ceilings. Observation on 07/26/18 at 1:00 PM revealed no ants Review on 07/26/18 of a "Bed bug prep list"	V 738		

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V 738	<p>Continued From page 15</p> <p>provided by the exterminator to the Qualified Professional/Registered Nurse/Licensee revealed:</p> <ul style="list-style-type: none"> -1. Remove all linen from the bed. Stand mattresses and box springs up on sides. Dismantle bed rails/frames if possible. -2. Remove all clothing and loose articles from all dressers, drawers and tables, and night stands in all rooms to be treated -3. Remove all clothing and loose articles from all closets in rooms to be treated. -4. All clothing and bed linens removed from above mentioned furniture will need to be washed in hot water and dried on high heat in an available laundry facility. Once washed/dried it is recommended to store clothing in a sealable trash bags/totes to avoid any accidental re-infestation during treatment duration. -5. All loose articles and furniture will need to be drug out at least 6 inches from the edges of all walls in rooms to be treated. -6. All picture frames will need to be removed from walls in rooms and stacked in the rooms for treatment. <p>*Bagged clothing and loose items sealed/moved for treatment may be stored in bathrooms, kitchens, garages, or plastic containers in hallways in order to have sufficient room in bedrooms and living rooms for our technicians to move furniture around un-hindered during treatments.</p> <p>*Treatments are conducted every 2 weeks until the infestation is remedied. Two treatments are set up automatically with following treatments conducted as needed subsequently."</p> <p>During interviews between 07/25/18 & 07/26/18, staff #1 reported:</p>	V 738		

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V 738	<p>Continued From page 16</p> <p>-07/25/18: Ants were caused because one client drink sodas and the ants were attracted to the sweetness of the soda...the facility did not have bedbugs</p> <p>-07/26/18: She purchased some spray and resolved the issues with the ants</p> <p>During interview on 07/26/18, client #6 reported:</p> <p>-Shared the large bedroom located upstairs with a peer</p> <p>-Bedroom had "lice" that crawled on her...last felt something crawling on her earlier in the week of this interview..staff were aware</p> <p>During interviews between 07/25/18-07/27/18, the Qualified Professional/Registered Nurse/Licensee reported:</p> <p>-Brown spots on the wall were a result of the chemicals from the exterminator for bedbug treatment</p> <p>-Bedroom was currently under treatment...exterminator last visited July 13, 2018 and bedbugs were found</p> <p>-Exterminator had visited the facility three times since February 2018</p> <p>During interview on 07/26/18, the Exterminator reported:</p> <p>-Prior to February 2018, another technician at the same extermination company provided treatment to the group home per records in November...as of February, he provide services to the home as he would be able to guarantee the services...to avoid an extra cost to the group home, he would not document his services, therefore no receipts were available...between February -July 2018, he estimated three treatments to the group home...he treated the rooms identified by the Qualified Professional/Registered Nurse/Licensee's</p>	V 738		

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V 738	<p>Continued From page 17</p> <p>wife...he treated two different bedrooms (one staff and one client upstairs with double occupancy)</p> <p>-A prelist of expectations before, after and during treatment was provided to the home...the prelist completion along with the treatment normally yield results to resolve bedbug issues...at this home, the clothes not being fully dried or taken out of the bags after laundry would be signs the prelist was not followed</p> <p>-At least two occasions, technicians had scheduled a treatment but the group home had not completed the necessary preparations..at least once, the staff room was prepared per the prelist and another treatment was scheduled for the client bedroom</p> <p>-Under normal circumstances, the group home should contact the exterminator immediately once they observe bedrooms within the warranty time frame of 60 days..this home contacted the exterminator past the 60 days window but treatment was provided at no cost...unsure if the recent infestation was new or if the initial February 2018 infestation was not resolved.</p> <p>-"Successful bedbug resolution was a partnership between the customer and the company"...he wanted the group home to resolve the bedbug issue</p> <p>During interview on 07/27/18, the Qualified Professional/Registered Nurse/Licensee reported he:</p> <p>-Followed the instructions of the prelist...the instructions were different than the previous technician...this technician advised he throw things away when the previous technician indicated the chemical treatment would resolve the bedbug issue</p> <p>-Did not recall an occasion the treatment had to be rescheduled or canceled</p>	V 738		

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V 738	<p>Continued From page 18</p> <p>-Felt the bedbug issue remained an issue because the clients attended day programs...he had spoken with clients about bringing items from the day programs in the home...he had not spoken with the day programs about his concerns..*Note: clients in the large bedroom attended different day programs</p> <p>-Had concerns about the extermination services being provided and may need to find another company</p> <p>Review on 07/27/18 of the facility's Plan of Protection dated 07/27/18 submitted by the Qualified Professional/Registered Nurse/Licensee revealed:</p> <p>-What will you do to correct the above rule violation in order to protect the clients from further risk or additional harm?</p> <p>1. Will inspect the room and clothing items for bugs and immediately schedule the exterminator for treatment. Will wash and dry all clothing items in the rooms . Will cover the mattress with mattress covers. Will change linens and replace them with new and clean ones. Will follow the checklist as provided by the contracted exterminator.</p> <p>- Describe your plans to make sure the above happens.</p> <p>2. Will be inspecting the room weekly for bedbugs. Will be encouraging clients to avoid bringing items from infected areas or locations. Will encourage clients to wash and dry new items before bring into their rooms. Will schedule quarterly inspections of the facility by the exterminator. Will train staff on what to observe and to report immediately to Administrator. The Administrator will be responsible for ensuring that treatment and follow ups are done.</p> <p>This facility has had bedbugs prior to November</p>	V 738		

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V 738	Continued From page 19 2017. Since February 2018, at least two chemical treatments for bedbugs were provided for the bedroom occupied by two clients. The chemical treatments have not resolved the infestation either by lack of follow through by the agency to adhere to the treatment prelist or notification to the exterminator when bedbugs were observed. These deficient practices causes difficulty to determine if the bedbug issue is ongoing or if these are new infestations. This deficiency constitutes a Type B rule violation and must be corrected within 45 days. If the violation is not corrected within 45 days, an administrative penalty of \$200.00 per day will be imposed for each day the facility is out of compliance beyond the 45th day.	V 738		