

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL064-091	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/15/2018
NAME OF PROVIDER OR SUPPLIER SIMBELYN		STREET ADDRESS, CITY, STATE, ZIP CODE 211 SIMBELYN DRIVE NASHVILLE, NC 27856		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	INITIAL COMMENTS An Annual survey was completed on August 15, 2018. A deficiency was cited. This facility is licensed for the following category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.	V 291		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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V 291	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to coordinate with other qualified professionals (QP) who are responsible for the treatment/habilitation for one of six clients (#3). The findings are:</p> <p>Review on 8/15/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> - admitted to the facility on 12/14/10 - diagnoses of Moderate Mental Retardation; Diabetes; Down Syndrome; Obesity & Sleep Apnea - a physician's order dated 5/4/18 "glucose chew 4gm 1-2 tablets (PRN) as needed"...used to treat low blood sugars <p>Review on 8/15/18 of client #3's August 2018 MAR (medication administration record) revealed:</p> <ul style="list-style-type: none"> - ...check blood sugars 2 hours after meals on Sunday, Tuesday and Thursdays - the blood sugars were as follows: August 2: 127; August 5: 106; August 7: 48; August 9: 109; August 12: 75 & August 14: 86 - no documentation of glucose chews administered...no documentation on August 7, 2018 blood sugar was rechecked <p>During interview on 8/15/18 staff #1 reported:</p> <ul style="list-style-type: none"> - she has worked at the facility since November 2017 - if client #3 blood sugar was low she would administer a glucose chew - she was not sure when client #3 blood sugars were considered low - she has not administered the glucose chew <p>During interview on 8/15/18 the Residential</p>	V 291		

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V 291	<p>Continued From page 2</p> <p>Director (RD) reported:</p> <ul style="list-style-type: none"> - client #3 was a diabetic - he had glucose chews if his blood sugars were low - if client #3 was sluggish, had slurred speech... his blood sugar was probably low - he thought blood sugars below 75 or 70 was low - client #3 had an upcoming physician's appointment and he would get the physician to put it in writing <p>During interview on 8/15/18 the QP reported:</p> <ul style="list-style-type: none"> - she was not able to locate any documentation that notified staff when to administer the glucose chew - if client #3 had a blood sugar of 48 the facility's nurse should have been notified <p>During interview on 8/15/18 the facility's nurse reported:</p> <ul style="list-style-type: none"> - she reviewed the MARs monthly...her last review was last week - staff needed to contact her if client #3's blood sugars were abnormal (a blood sugar not within client #3's normal range) - if client #3's blood sugar was 48 he should have been given something to eat or drink...blood sugar rechecked within 30-40 minutes - she should have also been notified of a blood sugar of 48...she was not contacted - the RD contacted the physician's office today for a physician's order on when to administer the glucose chews 	V 291		