

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL060-586</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/26/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>IDLEWILD HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>6807 IDLEWILD BROOK LANE CHARLOTTE, NC 28212</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on 7/26/18. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1300 Residential Treatment for Children or Adolescents.</p>	V 000	<p style="text-align: center;"><b>DHSR - Mental Health</b></p> <p style="text-align: center;"><b>OCT 10 2018</b></p> <p style="text-align: center;"><b>Lic. &amp; Cert. Section</b></p>	
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local 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 records 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 7/18/18 of facility roster revealed facility runs 3 shifts.</p> <p>Interview on 7/18/18 with client #2 revealed: -came to the facility on 5/10/18; -not done any drills since admission.</p>	V 114		<p>PCS will ensure that Fire Drills are Completed quarterly on each shift. QA/QA will verify with staff on a quarterly basis and keep a separate log in the office.</p>

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*[Handwritten Signature]*

TITLE  
*President*

(X8) DATE  
**9/3/18**

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V 114	<p>Continued From page 1</p> <p>Review on 7/18/18 of the facility fire and disaster drill documentation from 8/1/2017-7/18/2018 revealed the following:                      -no third shift fire drills from 8/1/2017-12/31/17;                      -no third shift disaster drills from 8/1/17-12/31/17;                      -no first or third shift disaster drills from 1/1/18-7/18/18;                      -no second shift disaster drills from 1/22/18-7/18/18.</p> <p>Interview on 7/18/18 with the Group Home Manager revealed:                      -not aware of missing drills;                      -require staff to complete fire and disaster drills on each shift as required.</p>	V 114		
V 115	<p>27G .0208 Client Services</p> <p>10A NCAC 27G .0208 CLIENT SERVICES                      (a) Facilities that provide activities for clients shall assure that:                      (1) space and supervision is provided to ensure the safety and welfare of the clients;                      (2) activities are suitable for the ages, interests, and treatment/habilitation needs of the clients served; and                      (3) clients participate in planning or determining activities.                      (h) Facilities or programs designated or described in these Rules as "24-hour" shall make services available 24 hours a day, every day in the year, unless otherwise specified in the rule.                      (c) Facilities that serve or prepare meals for clients shall ensure that the meals are nutritious.                      (d) When clients who have a physical handicap are transported, the vehicle shall be equipped with secure adaptive equipment.                      (e) When two or more preschool children who</p>	V 115	<p>PCS will ensure that clients are Supervised during all outings and Ensure that anytime client is unsupervised it will be listed in consumers Treatment Plan.</p>	<p>10/31/18</p>

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V 115	<p>Continued From page 2</p> <p>require special assistance with boarding or riding in a vehicle are transported in the same vehicle, there shall be one adult, other than the driver, to assist in supervision of the children.</p> <p>This Rule is not met as evidenced by: Based on interviews, the facility failed to ensure supervision was provided during activities to ensure the safety and welfare of the clients affecting 3 of 3 clients (#1, #2 and #3). The findings are:</p> <p>Interview on 7/18/18 with staff #1 revealed: -take clients to a program at YMCA every Friday and Saturday night; -program from 8pm-11pm; -police are there to supervise; -clients play basketball and other recreational activities.</p> <p>Interview on 7/23/18 with staff #2 revealed: -take clients to a program at YMCA every Friday and Saturday night; -starts at 8pm and stops at 11pm; -drop clients off and pick them up; -YMCA staff supervise and police are present.</p> <p>Interview on 7/18/18 with client #1 revealed: -go every Friday and Saturday to YMCA; -staff takes them and stays there; -play basketball and other sports.</p> <p>Interview on 7/18/18 with client #2 revealed: -go to YMCA on weekends at night;</p>	V 115		

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V 115	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-staff drop them off and pick them up;</li> <li>-police there to monitor them.</li> </ul> <p>Interview on 7/18/18 with client #3 revealed:</p> <ul style="list-style-type: none"> <li>-go to program at YMCA and play basketball;</li> <li>-staff drop them off and pick them up;</li> <li>-police there to watch them and also YMCA staff;</li> <li>-metal wand them when they come in;</li> <li>-can enter from 8pm-9pm then doors are locked and no one else can enter;</li> <li>-doors open back up at 11pm when over and staff there to pick them up.</li> <li>-when drop off, staff stay until they go inside YMCA.</li> </ul> <p>Interview on 7/18/18 with the Group Home Manager revealed:</p> <ul style="list-style-type: none"> <li>-clients go to a program on Friday and Saturday nights at YMCA;</li> <li>-one of the agency's staff works there for this program;</li> <li>-staff drop clients off and picks them up;</li> <li>-police and YMCA there to provide supervision.</li> </ul>	V 115		
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,</p>	V 118	<p>PCS will ensure that all Prescriptions will have physicians orders even if the meds are over the counter. Group Home managers will ensure that this is done as consumer meds change or as new consumers come in.</p>	<p>9/1/18</p>

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V 118	<p>Continued From page 4</p> <p>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:</p> <p>(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 records review, observations and interviews, the facility failed to ensure medications were administered to a client on the written order of a person authorized by law to prescribe drugs, medications were self-administered by clients only when authorized in writing by the client's physician and a Medication Administration Record (MAR) of all drugs administered to each client was kept current affecting 2 of 3 clients (#1 and #3). The findings are:</p> <p>Finding #1: Review on 7/18/18 of client #1's record revealed: -admission date of 6/8/18 with diagnoses of Attention Deficit Hyperactivity Disorder; -no physician's orders present in the record for</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>Naphcon-A eye drops and Nystatin 10,000.</p> <p>Review on 7/18/18 of the MARs from 6/8/18-7/18/18 revealed: -Naphcon-A eye drops 1-2 drops both eyes four times a day as needed listed on the MARs but not administered; -Nystatin 10,000 apply to affected area twice daily for 10 days listed on the MARs and documented as administered from 7/1-7/11 twice daily.</p> <p>Observation on 7/18/18 at 12:17pm of client #1's medications on site revealed: -Naphcon-A eye drops 1-2 drops both eyes four times a day as needed (prn) dispensed on 5/29/18; -Nystatin 10,000 apply to affected area twice daily for 10 days completed and not present.</p> <p>Interview on 7/18/18 with client #1 revealed: -got his medications daily; -staff give them to him in the am and the pm.</p> <p>Finding #2: Review on 7/18/18 of client #3's record revealed: -admission date of 7/4/18 with diagnoses of Post Traumatic Stress Disorder; -no physicians' orders for medications present in the record; -no self administration physician's order present in the record.</p> <p>Review on 7/18/18 of the MARs from 7/4/18-7/18/18 revealed no MAR for client #3.</p> <p>Observation on 7/18/18 at 12:30pm of client #3's medications on site revealed: -Trazadone 100mg one tablet prn; -Zyrtec 10mg one tablet in the am; -Clonidine 0.1mg one tablet every 4 hours prn;</p>	V 118		

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V 118	Continued From page 6  -Senexon 8.6/50mg two tablets daily prn; -Vitamin C 500mg one tablet daily; -Albuterol Sulfate 2 puffs every 4 hours prn.  Interview on 7/18/18 with client #3 revealed: -no regular medications; -only have prn medications; -have not needed to use any of his prn medications.  Review on 7/18/18 of the facility's communication log for the month of 7/2018 revealed the following documented: -7/5 third shift give client #3 his medications, take with food; -7/13 client #3 can take his inhaler with him when he goes to the YMCA.  Interview on 7/18/18 with the Group Home Manager revealed: -no MAR for client #3 as do not have any physician orders; -working to get physician orders from previous provider; -all medications were prn; -client #3 does use his inhaler when he needs it; -does take it with him when he goes to play sports.	V 118		
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.	V 736	PCS has completed all the tasks listed And there are copies of the completed Task. PCS will in-service staff on reporting And ensuring that facilities need to be Maintained and any issues should be reported to our maintenance person to be fixed.	9/1/18

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V 736	<p>Continued From page 7</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed was not maintained in a safe, clean, attractive and orderly. The findings are:</p> <p>Observation on 7/18/18 at 9:25am revealed: -two missing light bulbs from the light fixture over the sink in the upstairs bathroom; -broken curtain rod in the window in client #3's bedroom; -missing post in the stair railing leading from upstairs to front door; -light over toilet in the downstairs bathroom not working; -missing bulb in the light fixture over the mirror in the downstairs bathroom; -overhead light in client #1's bedroom downstairs had no light cover and the bulb was not working; -walls stained and marked throughout the facility.</p> <p>Interview on 7/18/18 with client #1 revealed: -overhead light does not work in his bedroom; -uses a small desk lamp for light; -bathroom light over toilet does not work but uses light over sink in downstairs bathroom.</p> <p>Interview on 7/18/18 with client #3 revealed: -curtain rod been broken; -would like for it to be fixed.</p>	V 736		











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J. H. HOFFMAN  
K. H. HOFFMAN  
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M. H. HOFFMAN  
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