

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL040-009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/08/2018
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NAME OF PROVIDER OR SUPPLIER FAIR FAX	STREET ADDRESS, CITY, STATE, ZIP CODE 2535 HIGHWAY 903 SOUTH SNOW HILL, NC 28580
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on 10/08/18. A complaint was substantiated (Intake #NC00142269) and a complaint was unsubstantiated (#NC00143090). 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 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</p>	V 118		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 118	<p>Continued From page 1</p> <p>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 record reviews and interviews, the facility failed to administer medications on the written order of a physician affecting two of three clients (#2 and #3). The findings are:</p> <p>Finding #1 Review on 10/02/18 of client #2's record revealed: -31 year old female. -Admission date of 09/01/16. -Diagnoses of Major Depressive Disorder, Chronic Post Traumatic Stress Disorder, Mild Mental Retardation, Asthma, Hypertension, Obesity, Hyperglycemia, Iron Deficiency, Ascorbic Acid Deficiency. - Physician order dated 08/08/18 for Amlodipine 5mg (treat chest pain (angina) and other conditions caused by coronary artery disease) Take 1 tablet by mouth every day.</p> <p>Review on 10/02/18 of client #2's September 2018 MAR revealed transcribed entries on the back of the MAR for the following medication: Amlodipine -10 entries transcribed "Out of Med."</p> <p>During interview on 10/05/18 client #2 revealed: -She always received her medications. -She had not missed any of her medications.</p> <p>During interview on 10/03/18 the Certified Medical</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Assistant (CMA) revealed: -Client #2's Amlodipine did not have any refills. -She contacted the doctor and he wanted the medication discontinued. -She could not discontinue the medication on the MAR until she had received the discontinue order from him in writing.</p> <p>Finding #2 Review on 10/02/18 of client #3's record revealed: -37 year old female. -Admission date of 05/15/18. -Diagnoses of Schizoaffective Disorder, Bipolar Type, Moderate Mental Retardation, Diabetes, Hyperthyroidism, Chronic Constipation and Obesity. -Physician order dated 06/18/18 for Easy Touch Test Strips (used to test glucose levels) Use as directed every day.</p> <p>Review on 10/02/18 of client #3's September 2018 MAR revealed transcribed entries on the back of the MAR for the following medication: Easy Touch Test Strips -6 entries transcribed "No Test Strips."</p> <p>During interview on 10/05/18 client #3 revealed: -She received her medication daily.</p> <p>During interview on 10/05/18 the CMA revealed: -The staff had told her the test strips were running low. -She contacted the physician and the test strips had to get authorization from the insurance before they could be filled. -The Physician was aware she had run out of test strips and he informed me to keep an eye out for side affects. -She had not had any issues with high or low</p>	V 118		

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V 118	Continued From page 3 glucose levels. During interview on 10/05/18 the Program Director revealed: -Every staff had been inservice on Medication Administration by the pharmacy. -He was not aware the staff were documenting on the back of the MAR to indicate the client's needed refills. -The new CMA was on a probation period to determine if she was able to fulfill the job duties.	V 118		
V 367	27G .0604 Incident Reporting Requirements 10A NCAC 27G .0604 INCIDENT REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS (a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information: (1) reporting provider contact and identification information; (2) client identification information; (3) type of incident; (4) description of incident; (5) status of the effort to determine the cause of the incident; and	V 367		

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V 367	<p>Continued From page 4</p> <p>(6) other individuals or authorities notified or responding.</p> <p>(b) Category A and B providers shall explain any missing or incomplete information. The provider shall submit an updated report to all required report recipients by the end of the next business day whenever:</p> <p>(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or</p> <p>(2) the provider obtains information required on the incident form that was previously unavailable.</p> <p>(c) Category A and B providers shall submit, upon request by the LME, other information obtained regarding the incident, including:</p> <p>(1) hospital records including confidential information;</p> <p>(2) reports by other authorities; and</p> <p>(3) the provider's response to the incident.</p> <p>(d) Category A and B providers shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18).</p> <p>(e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary via electronic means and shall include summary information as follows:</p>	V 367		

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V 367	<p>Continued From page 5</p> <p>(1) medication errors that do not meet the definition of a level II or level III incident;</p> <p>(2) restrictive interventions that do not meet the definition of a level II or level III incident;</p> <p>(3) searches of a client or his living area;</p> <p>(4) seizures of client property or property in the possession of a client;</p> <p>(5) the total number of level II and level III incidents that occurred; and</p> <p>(6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure a critical incident report was submitted to the Local Management Entity (LME) within 72 hours as required. The findings are.</p> <p>Review on 10/02/18 of the North Carolina Incident Response Improvement System (IRIS) revealed no Level II incident reports for the following Level 1 incidents: -"[Client #2] was upset because she said another client was talking about her from her group home. Her anger escalated as we were on the way to the group home. She did not want to stay in the van and said she was opening the door, she began to open the door. I slowed down and stopped at a safe place. [Client #2] got out the van began to walk up the side of the road. I called the QP (Qualified Professional) and the police. [Client #2] walked a few feet and sat</p>	V 367		

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V 367	<p>Continued From page 6</p> <p>down. The QP and police arrived and encouraged [Client #2] to go to the hospital where thy administered meds to keep her calm down." -"Staff was outside with other consumers and [Client #2] and [Client #3] was the near the kitchen table staff heard a chair hit the floor went inside [Client #3] and [Client #2] was fussing [Client #2] said that [Client #3] was messing with her and wouldn't leave her alone. [Client #3] said she was just trying to help her. [Client #2] walked up on [Client #3] and punched her in the face. [Client #3] was screaming and walked a little up to [Client #2], but didn't hit her. [Client #2] hit [Client #3] again and [Client #3] had her hands up saying stop. Staff got in between told them to separate [Client #3] got the phone called the police and went outside by the road. Staff called the QP and got no answer and called the police. No apparent bruises or injuries."</p> <p>During interview on 10/05/18 the QP revealed: -She did not know she had to do a level II incident report every time the police were called. -She would begin doing level II's for each time the police were called and had to assist with behaviors at the facility.</p>	V 367		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p> <p>This Rule is not met as evidenced by:</p>	V 736		

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V 736	<p>Continued From page 7</p> <p>Based on observation and interview, the facility was not maintained in a clean, attractive and orderly manner and kept free from offensive odors. The findings are:</p> <p>Observation on 10/05/18 at approximately 10:00am of the facility revealed:</p> <ul style="list-style-type: none"> -The grass at the facility needed to be cut and several limbs and other debris was in the yard. -The refrigerator handle was not secure and lose when opening the door. -The carpet in the main sitting area of the facility was soiled and appeared to be dirty with 2 visible patched areas. -The bathroom down the hall of the facility had several areas on the wall and around the sink that was exposing the sheet rock. -Client #1's bedroom had a purple substance on the wall behind the dresser. -The attic door in the ceiling in the hall way was not completely closed. -Client #2's bedroom had debris on the floor and appeared to be soiled and dirty. -Client #3's bedroom had a stained and dirty comforter, the bathroom door in the bedroom had a cracked area the size of a softball and the vanity in the bathroom appeared dirty and missing a knob on the cabinet door. <p>Interview on 10/05/18 the Director of Operations stated:</p> <ul style="list-style-type: none"> - He was looking to have carpet replaced at the facility. - He understood noted issues to be addressed at the facility. 	V 736		