

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL032-440</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/09/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SECURING RESOURCES FOR CONSUMERS, II</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1809 COLLIER DRIVE DURHAM, NC 27707</b>
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(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	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on November 9, 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 121	<p><b>27G .0209 (F) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></p> <p>(f) Medication review:</p> <p>(1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview the facility failed to obtain drug reviews every six months for three of three clients (#1, #2 and #3) who received psychotropic drugs. The findings are:</p> <p>a. Review on 11/8/18 of client # 1's record revealed: -Admission date of 7/1/06. -Diagnoses of Mild Mental Retardation, Bipolar I Disorder, Intermittent Explosive Disorder, Seizure Disorder and Tardive Dyskinesia.</p>	V 121		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 121	<p>Continued From page 1</p> <ul style="list-style-type: none"> <li>-Physician's order dated 8/11/18 for Lamotrigine 150 mg, one tablet two times daily; Paroxetine HCL 30 mg, one tablet in the morning and Clonazepam 0.5 mg, one tablet two times daily.</li> <li>-The November 2018 MAR revealed client #1 was administered the above medications.</li> <li>-There was no evidence of a six months psychotropic drug review for client #1.</li> </ul> <p>b. Review on 11/8/18 of client # 2's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 7/1/06.</li> <li>-Diagnoses of Mild Mental Retardation and Schizophrenia-Chronic Undifferentiated Type.</li> <li>-Physician's order dated 8/15/18 for Olanzapine 5 mg, one tablet in the morning; Olanzapine 10 mg, one tablet in the morning; Lithium 300 mg, one and one half tablet in the morning and two tablets in the evening; Lorazepam 2 mg, one tablet two times daily.</li> <li>-The November 2018 MAR revealed client #2 was administered the above medications.</li> <li>-There was a six months psychotropic drug review for client #2 dated 8/9/16.</li> <li>-There was no evidence of a current six months psychotropic drug review for client #2.</li> </ul> <p>c. Review on 11/8/18 of client # 3's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 7/1/06.</li> <li>-Diagnoses of Mild Mental Retardation, Intermittent Explosive Disorder and Personality Disorder.</li> <li>-Physician's order dated 7/9/18 for Fluoxetine 20 mg, one capsule in the morning; Carbamazepine 100 mg, one and one half tablet two times daily; Risperidone 3 mg, one tablet two times daily; Mirtazapine 15 mg, one tablet at bedtime and Trazodone HCL 150 mg, two tablets at bedtime.</li> <li>-The November 2018 MAR revealed client #3</li> </ul>	V 121		

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V 121	Continued From page 2  was administered the above medications. -There was no evidence of a six months psychotropic drug review for client #3.  Interview with the Manager on 11/8/18 revealed: -The agency had a registered nurse doing the psychotropic drug reviews. -The registered nurse had been doing the psychotropic drug reviews for a few years. -He did not realize a registered nurse could not do the psychotropic drug reviews. -The pharmacy used to do the psychotropic drug reviews for them. -He confirmed the six months psychotropic drug review for clients' #1, #2 and #3 were not completed.	V 121		
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 facility failed to ensure facility grounds were maintained in a safe, clean, attractive and orderly manner. The findings are:  Observation on 11/8/18 at approximately 12:35 PM of the facility revealed the following issues: -Bathroom #1-The door knob was loose, the toilet paper holder was broken, blinds were broken and wall was discolored.	V 736		

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V 736	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-Bathroom #2-Cabinet that surrounded sink area was broken and warped, linoleum was warped and discolored, toilet bowl ran continuously and the paint was chipped on the wall.</li> <li>-Client #1's bedroom-The blinds were broken.</li> <li>-Kitchen area-There was rust on side of the refrigerator and paint was chipped on side of the cabinet.</li> </ul> <p>Interview with the Manager on 11/8/18 revealed:</p> <ul style="list-style-type: none"> <li>-He was aware of most of the maintenance issues with the group home.</li> <li>-Client #2's bathroom area was flooded about a month ago.</li> <li>-The pipes in that bathroom area burst and had to be repaired.</li> <li>-He confirmed the facility was not maintained in a safe, clean, attractive and orderly manner.</li> </ul>	V 736		
V 752	<p>27G .0304(b)(4) Hot Water Temperatures</p> <p>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT</p> <p>(b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors.</p> <p>(4) In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to maintain the facility water temperature between 100-116 degrees Fahrenheit. The findings are:</p>	V 752		

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V 752	<p>Continued From page 4</p> <p>Observation of the facility on 11/8/18 at approximately 12:35 PM revealed :</p> <ul style="list-style-type: none"> <li>-Bathroom #1 water temperature was 123 degrees Fahrenheit.</li> <li>-Bathroom #2 water temperature was 123 degrees Fahrenheit.</li> </ul> <p>Interview on 11/8/18 with the Manager revealed:</p> <ul style="list-style-type: none"> <li>-He did not realize the water in the bathrooms were too hot.</li> <li>-The clients and/or staff had not complained to him about the water being too hot in both bathrooms.</li> <li>-He confirmed the facility failed to maintain the facility water temperature between 100-116 degrees Fahrenheit.</li> </ul>	V 752		