

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL032-611</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R-C 11/29/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ABSOLUTE HOME-ROXBORO STREET</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2826 SOUTH ROXBORO STREET DURHAM, NC 27707</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint and follow up survey was completed on 11/29/18. The complaint was unsubstantiated (intake #NC00145374). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 5600A Supervised Living for Adults with Mental Illness.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></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</p>	V 118		

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

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V 118	<p>Continued From page 1 with a physician.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interviews the facility failed to keep the MAR current affecting one of three clients audited (#2). The findings are:</p> <p>Review on 11/28/18 of client # 2's record revealed: -Admission date of 7/26/16. -Diagnosis of Schizoaffective Disorder-Bipolar Type. -Physician's order dated 10/18/18 for Ranitidine HCL 150 mg, one tablet two times daily. -The November 2018 MAR did not have Ranitidine HCL 150 mg listed.</p> <p>Observation on 11/28/18 at approximately 3:05 PM of the medication area for client #2 revealed: -There was a bottle of Ranitidine HCL 150 mg tablets.</p> <p>Interview with staff #1 on 11/28/18 revealed: -She had administered the Ranitidine HCL tablets to client #2. -She did not realize the Ranitidine HCL 150 mg tablets were not listed on the November 2018 MAR. -She confirmed staff failed to keep the MAR current for client #2.</p> <p>Interview with the Qualified Professional on 11/28/18 revealed: -The pharmacy normally did the MAR's each month.</p>	V 118		

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V 118	Continued From page 2  -The Ranitidine HCL 150 mg was not put onto the November 2018 MAR. -Client #2 did get the Ranitidine HCL 150 mg as prescribed. -She confirmed staff failed to keep the November 2018 MAR current for client #2.  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	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.  This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to ensure facility grounds were maintained in a safe, clean, attractive and orderly manner. The findings are:  Observation on 11/28/18 at approximately 1:40 PM of the facility revealed the following issues: -The living room area-The smoke detector was inoperable and hanging from the ceiling. The vent on ceiling near smoking detector was rusting. There were two dime sized holes in ceiling near light fixture. There were two sets of broken blinds. -Client #1's bedroom-There was a white putty like substance on the ceiling. There was a crack in the wall approximately two feet long. -Dining room area-There was a set of broken blinds.	V 736		

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V 736	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-Bathroom #1-The toilet was loose and turned at an angle.</li> <li>-Bathroom #2-The toilet bowl had grayish and brownish stains. The towel rack was missing from the wall. There was a set of broken blinds. The walls had grease and dirt stains on them. The ceiling had approximately six dime sized cracks.</li> <li>-Client #2's bedroom-There were shoes, clothing and bed linens laying in piles on the floor and the chair.</li> <li>-Bathroom #3-The shower curtain was faded and had grayish stains.</li> <li>-Bathroom #4-There was a putty like substance on wall near the toilet. Crack in ceiling approximately four feet long.</li> <li>-Client #4's bedroom-The bedroom door knob was loose. There was a set of broken blinds. There was a crack in the ceiling approximately two feet long. The walls had peeling paint and greasy spots on them.</li> <li>-Sitting room-There was a putty like substance on the wall.</li> <li>-Walls throughout the group home had grease and dirt stains on them.</li> </ul> <p>Interview with staff #1 on 11/28/18 revealed:</p> <ul style="list-style-type: none"> <li>-She had been working at the home for about two weeks.</li> <li>-She thought she noticed the issues with the home when she started her employment.</li> <li>-She thought management was aware of most of the issues with the home.</li> <li>-She confirmed the facility was not maintained in a safe, clean, attractive and orderly manner.</li> </ul> <p>Interview with the Qualified Professional on 11/28/18 and 11/29/18 revealed:</p> <ul style="list-style-type: none"> <li>-She was aware of the maintenance issues with the group home.</li> <li>-She was more concerned about the major issues</li> </ul>	V 736		

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V 736	<p>Continued From page 4</p> <p>with the group home.</p> <ul style="list-style-type: none"> <li>-The Licensee immediately had the ceiling and floor repaired in client #1's bedroom.</li> <li>-The maintenance person was supposed to come back to the home for other repairs.</li> <li>-She was not sure why the maintenance person had failed to do the other repairs.</li> <li>-She was supposed to purchase some items related to other issues with the home.</li> <li>-She confirmed the facility was not maintained in a safe, clean, attractive and orderly manner.</li> </ul> <p>Review on 11/29/18 of a Plan of Protection written by the Qualified Professional dated 11/29/18 revealed:</p> <p>What will you immediately do to correct the above rule violations in order to protect clients from further risk or additional harm?: "[The Maintenance Person] is coming today to patch holes in wall today. [The Maintenance Person] will also repair the smoke detector in the living room. Additionally [The Maintenance Person] will seal the cracks between the molding and ceiling today. The toilet and blinds will be replaced by Monday, December 3, 2018. All other issues will be repaired/replaced, etc. "</p> <p>Describe your plans to make sure the above happens: "[The Qualified Professional] will monitor. Pictures will be taken of completed work and submitted with statement of deficiencies. [The Qualified Professional] will contact DHSR (Division of Health Service Regulation) when all work is completed. Expected date of completion is December 7, 2018."</p> <p>This group home was previously cited on 9/27/18. Some of the maintenance issues with the group home were corrected, however the majority of the issues remain out of compliance. The smoke detector in the living room area was inoperable</p>	V 736		

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V 736	Continued From page 5  and hanging from the ceiling. The toilet in bathroom #1 was loose and turned at an angle. There were holes or cracks in the ceiling in four separate areas throughout the home. The walls and/or ceiling had a putty like substance on them in three separate areas of the home. The walls throughout home were greasy and/or had a dirt like substance on them. Blinds needed to be replaced in three separate areas of the home. This violation constitutes an Imposed Type B rule violation. An administrative penalty of \$200.00 per day is imposed for failure to correct within 45 days.	V 736		