STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL098-170	A. BUILDING: _____ B. WING _____	R 12/13/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILSON COUNTY GROUP HOME #2	3108 TILGHMAN ROAD WILSON, NC 27893

(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 and follow up survey was completed on December 13, 2018. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to access the health care personnel registry (HCPR) prior to hiring 1 of 3 audited staff (#2). The findings are: Review on 12/12/18 and 12/13/18 of Staff #2's file revealed: -Hire date was 2/20/18. -Position: Paraprofessional, direct care staff. -HCPR accessed 2/22/18. Interview on 12/12/18 Staff #2 stated: -Her hire date was 2/20/18. -She was full time and her shift started Wednesdays at 2 pm and ended on Saturday	V 131		

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V 131	Continued From page 1 mornings at 6 am. Per interview on 12/13/18 the Program Manger stated: -Staff #2 was hired on 2/20/18. -She confirmed with human resources the hire date and HCPR check dates.	V 131		
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	V 291		

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V 291	Continued From page 2 safety issues become a primary concern. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to maintain coordination of services with the qualified professionals who are responsible for treatment for 1 of 3 audited clients (#4). The findings are: Review on 12/12/18 of client #4's record revealed: -64 year old male admitted 8/11/11. -Diagnoses included intellectual developmental disorder; high blood pressure; overactive bladder; arthritis; hyperlipidemia; visual loss, cerebral palsy, heart condition. -Orders dated 3/6/18 and 8/17/18 to check blood pressure 1 hour after medications and call the physician for systolic less than 100 or greater than 150 and diastolic less than 50 or greater than 100. -Orders dated 8/17/18 for the following medications to treat high blood pressure: Metoprolol - Hydrochlorothiazide, Amlodipine, and Losartan. -No documentation the physician had been notified of blood pressures outside of ordered parameters for notification. Review on 12/12/18 of client #4's medication administration records between 8/1/18 and 12/12/18 revealed: -The following blood pressures documented that exceeded parameters to notify the physician: 8/4/18 = 160/103; 8/8/18 = 160/103; 8/19/18 = 152/87; 9/1/18 = 163/93; 9/2/18 = 142/107; 9/30/18 = 157/99; 11/3/18 = 153/93; 12/7/18 = 151/98.	V 291		

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V 291	Continued From page 3 -Interview on 12/12/18 staff #1 stated she would document client #4's blood pressure in the care coordination log if outside of the ordered parameters. -Interview on 12/12/18 staff #2 stated she would notify the Manager if client #4's blood pressure was outside of the ordered parameters. Either she or the manager would call the physician. She had not notified the physician in the past 90 days. Interview on 12/12/18 the Manager/Qualified Professional stated calls to the physician would be documented in the coordination of care log. She could not locate documentation the physician had been called for client #4's blood pressures above ordered parameters for reporting. This is a recited deficiency and must be corrected within 30 days.	V 291		
V 752	27G .0304(b)(4) Hot Water Temperatures 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (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. This Rule is not met as evidenced by: Based on observation and interview, the facility failed to maintain the water temperature between	V 752		

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V 752	Continued From page 4 100-116 degrees Fahrenheit. The findings are: Observation on 12/12/18 at approximately 9:00 am revealed: -The hot water temperature in the client bathroom with a walk in shower was 126 degrees Fahrenheit. -The hot water temperature in the client bathroom with the tub/shower was 122 degrees Fahrenheit in the tub, and 126 degrees Fahrenheit in the sink. Interview on 09/29/17 the Manager/Qualified Professional stated: -Staff checked the water temperatures at the facility. -She would have the hot water temperature adjusted to the required level.	V 752		