STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL092-850	A. BUILDING: _____ B. WING _____	R 01/25/2019

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ACCESS HEALTH SYSTEM 2, INC	5208 COUNTRY PINES COURT RALEIGH, NC 27616

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V 000	INITIAL COMMENTS An Annual and Follow Up Survey was completed 01/25/19. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.	V 000		
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 safety issues become a primary concern.	V 291		

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V 291	Continued From page 1 This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure services were coordinated between the facility operator and the Qualified Professional responsible for one of four audited client's (#3) system of care. The findings are: Review on 01/24/19 of client #3's record revealed: -Admitted: 08/31/18 -Diagnoses: Schizophrenia, Hypertension, Hypothyroidism, Obsessive Compulsive Disorder and Obstructive Sleep Apnea with CPAP (continuous positive airway pressure) -Physician's visit note dated 09/08/18- continue using CPAP machine. *Note the purpose of CPAP machine is to treat sleep related breathing disorders which can reduce risk of heart related diseases, increase alertness, concentration and emotional stability. Observation and tour on 01/18/19 between 10:00 AM-12 Noon revealed a CPAP machine on the bedroom floor occupied by client #3. Two gallon jugs of unopened water containers were noted beside the machine. During interviews between 01/18/19 and 01/25/19, three of three staff reported the following about sleep apnea: -Staff #1 reported no clients had the diagnosis. She just started working at the facility on 01/07/19 and all clients' information was reviewed with her by the Qualified Professional/Director. Prior to the tour of the facility, she was not aware of a CPAP machine in	V 291		

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V 291	Continued From page 2 client #3's room. -Staff #4 reported his first day of work was 01/21/19. To his knowledge, none of the clients used a CPAP machine. At night, he did hear a noise from client #3's room but did not know what caused the noise. -Staff #3 reported she had worked as needed for the group home. She last worked in the facility maybe November/December 2018 before she returned on 01/25/19. She had never seen a CPAP machine in client #3's room nor had she ever witnessed client #3 use her CPAP machine. During interviews between 01/18/19 and 01/23/19, client #3 reported: -She had her CPAP machine for 5 years. She had not used her CPAP machine "in a while" because she had difficulty putting the distilled water in the machine. She was not sure the last time she had a sleep study. During interview on 01/23/19, the Physician's Assistant at the Primary Care's Office reported: -Per their records, client #3 had been served by their office since July 2015. -Their records noted Sleep Apnea diagnosis. No information regarding the sleep study or need for the CPAP had been noted. -The CPAP machine was in place prior to July 2015 and no previous historical information regarding medical necessity was documented. During interview on 01/25/19, the Qualified Professional/Director reported she: -Was aware at the time of admission, client #3 had a CPAP machine. -Spoke with client #3 to assure the client knew how to use the CPAP machine -Was not aware until this interview, client #3 did not utilize the CPAP machine nightly	V 291		

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V 291	Continued From page 3 Review on 01/25/19 of a Plan of Protection dated 01/25/19 completed by the Qualified Professional (QP)/Director revealed: -1. "What will you immediately do to correct the above rule violations in order to protect clients from further risk or additional harm? I, the QP and director of Access Health System group homes will always do everything within my power and accordance to the rules 10A NCAC 27G.5603 SUPERVISED Living to protect Clients under my care from any risks or harm. Steps will be taken to further protect my Clients from further or any harm or risks. -2. Describe your plans to make sure the above happens. Firstly, QP will thoroughly review all orders for this or other Clients and contact the said Client's physician as soon as is practically possible to decide what he deems fit to be done regarding the use of the medical equipment or need for re- evaluation. Client will be encouraged to use the medical equipment as ordered." Prior to her August 2018 admission to this group home, client #3 was diagnosed with Sleep Apnea and prescribed a CPAP machine as treatment. Both newly hired and older group home staff were not aware of the CPAP machine or the Sleep Apnea diagnosis for client #3. The Qualified Professional had not monitored the use of the CPAP nor discussed the Sleep Apnea with the physician. The frequency of use of the CPAP machine and if client #3 should utilize the machine could not be determined. Long-term, failure to coordinate care of the client's sleep apena is detrimental to her overall health increasing her risk of: high blood pressure, heart disease including heart attack and stroke, diabetes, obesity and acid reflux. This deficiency	V 291		

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V 291	Continued From page 4 constitutes a Type B rule violation and must be corrected within 30 days. If the violation is not corrected within 30 days, an administrative penalty of $200.00 per day will be imposed for each day the facility is out of compliance beyond the 30th day. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 291		
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 was not maintained in a safe and orderly manner. The findings are: Observation on 01/19/19 between 10:00 AM-12:00 Noon of the facility revealed: -Room shared by two clients (#4, #6): dresser broken (drawers off track), stains in ceiling in bedroom and bathroom -Room occupied by client #2- dresser broken (drawers off track) Interview on 01/19/19, client #6 reported: -She was admitted to the group home in July 2018 -The stained areas were caused by the leak	V 736		

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V 736	Continued From page 5 from the ceiling in her bedroom and the bathroom -Not sure how long the dresser had been broken but it was that way after she was admitted into the group home Interview on 01/25/19, the Qualified Professional/Director reported she: -Was aware of the ceiling leaked due to rain in November 2018...not aware the ceiling was stained and dressers were broken...needed to confirm the ceiling had been repaired from the leak.. -Would follow up with her husband who handled the maintenance projects of the facility	V 736		