

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 02/14/2019</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 2/14/19. The complaint was unsubstantiated (intake #NC00148218). 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 120	<p><b>27G .0209 (E) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b> (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interviews the facility failed to ensure medications were in a securely locked cabinet affecting one of three current clients (#2). The findings are:</p>	V 120		

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

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V 120	<p>Continued From page 1</p> <p>Review on 2/14/19 of client #2's record revealed: -An admission date of 12/28/16. -Diagnoses of Schizoaffective Disorder, Type II Diabetes and High Cholesterol. -Physician's order dated 9/10/18 for Lantus Solostar 100 u/ml, inject 52 units subcutaneously before supper and Novolog Flexpen 100 u/ml inject subcutaneously 14 units before breakfast, 20 units at lunch and 18 units at dinner. -The February 2019 MAR indicated client #2 had been administered the medications above.</p> <p>Observation on 2/13/19 at 11:38 AM of the facility's kitchen area revealed: -There were four boxes of Lantus Solostar 100 u/ml insulin inject pens in the refrigerator. The dispensed dates ranged from 12/24/18 to 9/10/18. Three of the boxes had five inject pens and one box had four inject pens. -There were four boxes of Novolog Flexpen 100 u/ml insulin inject pens in the refrigerator. The dispensed dates for all four boxes was 9/10/18. Three of the boxes had five inject pens and one box had three inject pens. -The eight boxes of insulin pens were not in a locked box in the refrigerator.</p> <p>Interview with staff #1 on 2/13/19 revealed: -She did not know the insulin pens were supposed to be in a locked box. -She thought client #2's boxes of insulin pens had been kept unlocked for several months. -She confirmed facility staff failed to ensure medications were securely locked in a container.</p> <p>Interview with the Qualified Professional on 2/14/19 confirmed: -The facility staff failed to ensure medications were securely locked in a container.</p>	V 120		

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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: 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:</p> <p>Observation on 2/13/19 at approximately 11:05 AM of the facility revealed the following issues: -The living room area-The vent on ceiling near smoking detector was rusting. The paint was peeling from the ceiling. There were two sets of broken blinds. -Clients' #4 and #5 bedroom-A drawer was missing from the dresser and there was a set of broken blinds. -Dining room area-There was a set of broken blinds. -Bathroom #1-The toilet was loose and turned at an angle. There was a dirt like substance in the toilet bowl. -Bathroom #2-The toilet bowl had dark stains. The towel rack was missing from the wall. There was a set of broken blinds. The sink was filled with water (clogged). The water in the sink contained an oily substance and hair. -Client #2's bedroom-There were shoes, clothing and trash laying in piles on the floor, bed and the chair.</p>	V 736		

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V 736	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-Bathroom #3-The shower curtain was faded and had grayish stains. The sink had oily stains. There was dried feces on the toilet seat and inside the toilet bowl.</li> <li>-Bathroom #4-There was a crack in ceiling approximately four feet long. The toilet seat had dried feces on it. The inside of the toilet had dirt like stains.</li> <li>-Kitchen area-There were two sets of broken blinds. The blinds were covered with food particles, grease and a dark substance.</li> <li>-Dining room area-A set of broken blinds.</li> </ul> <p>Interview with staff #1 on 2/13/19 and 2/14/19 revealed:</p> <ul style="list-style-type: none"> <li>-She was not sure why management had not made the repairs to the home.</li> <li>-The sink in bathroom #2 was clogged because the sink stopper was not working properly.</li> <li>-The clients were responsible for cleaning their bedrooms and/or bathrooms.</li> <li>-The person who made the repairs to the ceiling should be returning to the home on 2/14/19.</li> <li>-She was told the repair person needed some additional materials in order to finish the repairs.</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 2/14/19 revealed:</p> <ul style="list-style-type: none"> <li>-She purchased the items to make the repairs to the home around 12/8/18.</li> <li>-She also purchased several sets of blinds and some other items for the home.</li> <li>-She put the purchased items in the storage area towards the back of the home.</li> <li>-She went on vacation and returned to the home at the beginning of January 2019.</li> <li>-When she returned to the home she noticed the purchased items were missing.</li> </ul>	V 736		

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V 736	<p>Continued From page 4</p> <ul style="list-style-type: none"> <li>-The clients and staff did not know the whereabouts of the purchased items.</li> <li>-She had a maintenance person come out towards the end of November 2018.</li> <li>-The maintenance person come into the home and put caulk on the ceiling and walls.</li> <li>-The maintenance person never returned to the home to finish the repairs.</li> <li>-She just recently had another maintenance person come to the home to do the repairs.</li> <li>-She failed to ensure the previously cited issues with the home were corrected.</li> <li>-She confirmed the facility was not maintained in a safe, clean, attractive and orderly manner.</li> </ul> <p>Review on 2/14/19 of a Plan of Protection written by the Qualified Professional dated 2/14/19 revealed: What will you immediately do to correct the above rule violations in order to protect clients from further risk or additional harm?: "As of 2/13/19 all blinds were mounted on each room in the facility. The facility will be cleaned professionally by 2/19/19. The painting and caulking will be completed by 2/16/19. All cited areas will be repaired, cleaned or replaced by 2/19/19."Describe your plans to make sure the above happens: "[The Qualified Professional] will supervise all repairs and ensure everything is completed by 2/19/19."</p> <p>This group home was previously cited on 9/27/18 and a Type B was identified. A follow up survey was completed on 11/29/18 and the Type B was imposed due to failure to correct the citation. The majority of the issues cited during that 11/29/18 survey remain out of compliance. The toilet in bathroom #1 was loose and turned at an angle. The sink in bathroom #2 was clogged. The toilets in all four bathrooms had some type of stain on</p>	V 736		

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V 736	Continued From page 5  seat and/or inside the bowl (feces and/or dirt like substance). There were repairs needed for the ceiling in two separate areas of the home. Blinds needed to be replaced in four separate areas of the home. This deficiency constitutes a Continued Failure to Correct 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		