

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL092-535</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>02/06/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BLESSED HOME, LLC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3113 EDGETONE DRIVE RALEIGH, NC 27604</b>
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V 000	INITIAL COMMENTS  An annual and follow-up survey was completed 2/6/18. 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 108	27G .0202 (F-I) Personnel Requirements  10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and	V 108		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 108	<p>Continued From page 1</p> <p>clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the governing body failed to assure 1 of 2 staff had evidence of current first aid training. The findings are:</p> <p>Review on 1/30/19 of staff #1's record revealed: - a hire date of 9/24/18 - no evidence of first aid training in the personnel record</p> <p>During an interview on 2/6/19, staff #1 reported she worked her shift alone.</p> <p>During an interview on 2/6/19, the Administrator reported she thought first aid was part of the cardiopulmonary resuscitation training.</p> <p>[This deficiency constitutes a recited rule area and must be corrected within 30 days.]</p>	V 108		
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <p>(a) There shall be no privileging requirements for paraprofessionals.</p> <p>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p> <p>(c) Paraprofessionals shall demonstrate</p>	V 110		

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V 110	<p>Continued From page 2</p> <p>knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(e) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> <li>(1) technical knowledge;</li> <li>(2) cultural awareness;</li> <li>(3) analytical skills;</li> <li>(4) decision-making;</li> <li>(5) interpersonal skills;</li> <li>(6) communication skills; and</li> <li>(7) clinical skills.</li> </ol> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, 1 of three facility staff (Manager) failed to demonstrate communication skills to meet the needs of clients. The findings are:</p> <p>Observation on 1/28/19 at approximately 4:00 PM revealed:</p> <ul style="list-style-type: none"> <li>- client #2 spoke with the Manager about the behavior of client #6 at their day program</li> <li>- the Manager was heard confronting client #6 in another room about asking others for money/ snacks in a loud tone;</li> <li>when client #6 tried to explain herself, the Manager replied "Girl, bye!" and ended the</li> </ul>	V 110		

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V 110	Continued From page 3  discussion without listening to client#6's account of the event.  During an interview on 2/6/19, the Qualified Professional reported the Manager had a northern accent and naturally had a "rough" tone. The QP reported she had spoken to the Manager about her tone. The QP reported she had conducted a Sensitivity Training with staff but the Manager missed the training. The QP reported she had a one on one scheduled for the Manager.	V 110		
V 113	27G .0206 Client Records  10A NCAC 27G .0206 CLIENT RECORDS (a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to: (1) an identification face sheet which includes: (A) name (last, first, middle, maiden); (B) client record number; (C) date of birth; (D) race, gender and marital status; (E) admission date; (F) discharge date; (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV; (3) documentation of the screening and assessment; (4) treatment/habilitation or service plan; (5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician; (6) a signed statement from the client or legally	V 113		

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V 113	<p>Continued From page 4</p> <p>responsible person granting permission to seek emergency care from a hospital or physician; (7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the governing body failed to assure a signed consent granting permission to seek emergency medical care was maintained in records for 2 of 3 audited clients (#2, #6). The findings are:</p> <p>Review on 1/28/19, 1/29/19 and 2/6/19 of client #2's record revealed: - an admission date of 2/1/18 - an FL2 dated 1/10/19 with diagnoses including Schizophrenia, Major Depression Disorder and Mild Intellectual Disability - there was no evidence of a signed consent granting permission to seek emergency medical care</p> <p>Review on 1/28/19 and 1/29/19 of client #6's</p>	V 113		

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V 113	Continued From page 5  record revealed: - an admission date of 9/16/13 - an FL2 dated 10/10/18 with diagnoses including Down's Syndrome, Moderate Mental Retardation, Psychosis not otherwise specified and Depression with anxiety - there was no evidence of a signed consent granting permission to seek emergency medical care  The Administrator reported she was not aware the consent was needed.	V 113		
V 114	27G .0207 Emergency Plans and Supplies  10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use.  This Rule is not met as evidenced by: Based on record review and interview, the governing body failed to assure safety drills were repeated for each shift. The findings are:	V 114		

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V 114	Continued From page 6  Review on 1/29/19 of the facility fire and disaster drills revealed fire and disaster drill were each conducted monthly, however all the drills took place between 3:00 and 4:33 PM. There was variation in times of day; no drills were conducted during morning or sleep hours.  During an interview on 2/6/19, the Administrator reported she would have staff vary the times of drills.	V 114		
V 118	27G .0209 (C) Medication Requirements  10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (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. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (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. (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: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug.	V 118		

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V 118	<p>Continued From page 7</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 with a physician.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the Administrator failed to assure 1 of 2 staff (#1) were trained to administered medications by a registered nurse, pharmacist or legally qualified person to administer medications. The findings are:</p> <p>Review on 1/30/19 of staff #1's record revealed: - a hire date of 9/24/18 - no evidence of medication administration training in the personnel record</p> <p>During an interview on 2/6/19, staff #1 reported she worked her shifts alone.</p> <p>During an interview on 1/30/19, the Administrator reported she did not think staff had to have medication administration training.</p>	V 118		
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (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</p>	V 120		

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V 120	<p>Continued From page 8</p> <p>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, and interview, facility staff failed to assure medications were secured for 2 of 3 audited clients (#2, #3). The findings are:</p> <p>Observation on 1/28/19 between 2:40 and 2:55 PM revealed: - client #3's Medroxyprogesterone 150 MG was stored in the refrigerator in the kitchen in an unlocked box - client #2's Hair, Skin Nails Argon Oil Infused Softgels vitamin supplement was on a dresser in the bedroom she shared with peer, client #1</p> <p>During an interview on 1/28/19, the Manager reported she did not lock the medication box in the refrigerator because there was only one key and she was concerned the key could become misplaced. During continued interview, the Manager explained client #2 used the over the counter supplement for her hair and nails. The Manager reported she used the same</p>	V 120		

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V 120	Continued From page 9 supplement.  Observation on 2/6/19 at approximately 1:00 PM, the medication box in the refrigerator was still not locked.	V 120		