

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-688	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 02/06/2019
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NAME OF PROVIDER OR SUPPLIER BLESSED HOME, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 1120 HARDIMONT ROAD RALEIGH, NC 27609
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow-up survey was completed 2/6/19. 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 113	<p>27G .0206 Client Records</p> <p>10A NCAC 27G .0206 CLIENT RECORDS</p> <p>(a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to:</p> <p>(1) an identification face sheet which includes:</p> <ul style="list-style-type: none"> (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; <p>(2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV;</p> <p>(3) documentation of the screening and assessment;</p> <p>(4) treatment/habilitation or service plan;</p> <p>(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;</p> <p>(6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician;</p> <p>(7) documentation of services provided;</p> <p>(8) documentation of progress toward outcomes;</p> <p>(9) if applicable:</p> <ul style="list-style-type: none"> (A) documentation of physical disorders 	V 113		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 113	<p>Continued From page 1</p> <p>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 3 of 3 audited clients (#2, #3, #5). The findings are:</p> <p>Review on 2/4/19 of client #2's record revealed: - an admission date of 5/15/18 - an FL2 dated 5/15/18 with diagnoses including Schizoaffective Disorder, Tobacco Use Disorder and Hypertension - there was no evidence of a signed consent granting permission to seek emergency medical care</p> <p>Review on 2/4/19 of client #3's record revealed: - an admission date of 4/25/16 - an FL2 dated 10/10/18 with diagnoses including Schizophrenia, Mild Intellectual Disability and Lennox Gastaut Syndrome - there was no evidence of a signed consent granting permission to seek emergency medical care</p>	V 113		

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V 113	Continued From page 2 Review on 2/4/19 of client #6's record revealed: - an admission date of 7/21/14 - an FL2 dated 7/9/18 with diagnoses including Bipolar Disorder, Vitamin D Deficiency and Irritable Bowel Syndrome - 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 119	27G .0209 (D) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining	V 119		

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V 119	<p>Continued From page 3</p> <p>drug supply shall not be held for more than 30 calendar days after the date of discharge.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview, the governing body failed to assure expired medications were disposed of to guard against accidental ingestion for one of three audited clients (#3). The findings are:</p> <p>Observation on 2/4/19 at approximately 1:00 PM of client #3's medications revealed Docusate Sodium 100 mg tablets were present with instructions to administer one tablet daily. The tablets had an expiration date of 11/20/18.</p> <p>Review on 2/4/19 of client #3's record revealed:</p> <ul style="list-style-type: none"> - an admission date of 4/25/16 - an FL2 dated 10/10/18 with diagnoses including Schizophrenia, Mild Intellectual Disability and Lennox Gastaut Syndrome - a physician's order dated 10/10/18 instructed Docusate Sodium 100 mg should be administered once daily - medication administration records for November and December 2018 and January 2019 had documentation that reflected the medication was administered daily <p>During an interview on 2/6/19, the Administrator reported she was not aware the medication was expired.</p>	V 119		

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V 367	Continued From page 4	V 367		
V 367	<p>27G .0604 Incident Reporting Requirements</p> <p>10A NCAC 27G .0604 INCIDENT REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS</p> <p>(a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information:</p> <ol style="list-style-type: none"> (1) reporting provider contact and identification information; (2) client identification information; (3) type of incident; (4) description of incident; (5) status of the effort to determine the cause of the incident; and (6) other individuals or authorities notified or responding. <p>(b) Category A and B providers shall explain any missing or incomplete information. The provider shall submit an updated report to all required report recipients by the end of the next business day whenever:</p> <ol style="list-style-type: none"> (1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or (2) the provider obtains information required on the incident form that was previously 	V 367		

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V 367	<p>Continued From page 5</p> <p>unavailable.</p> <p>(c) Category A and B providers shall submit, upon request by the LME, other information obtained regarding the incident, including:</p> <ol style="list-style-type: none"> (1) hospital records including confidential information; (2) reports by other authorities; and (3) the provider's response to the incident. <p>(d) Category A and B providers shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18).</p> <p>(e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary via electronic means and shall include summary information as follows:</p> <ol style="list-style-type: none"> (1) medication errors that do not meet the definition of a level II or level III incident; (2) restrictive interventions that do not meet the definition of a level II or level III incident; (3) searches of a client or his living area; (4) seizures of client property or property in the possession of a client; (5) the total number of level II and level III incidents that occurred; and (6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that 	V 367		

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V 367	<p>Continued From page 6</p> <p>meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the Manager failed to report a level II incident so the Local Management Entity could be notified within 72 hours of the event involving 1 of 3 audited clients (#2). The findings are:</p> <p>Review on 2/4/19 of client #2's record revealed: - an admission date of 5/15/18 - an FL2 dated 5/15/18 with diagnoses including Schizoaffective Disorder, Tobacco Use Disorder and Hypertension</p> <p>During an interview on 2/4/19, the Manager reported: - client #2 was out of cigarettes and asked the Manager for a cigarette but the Manager did not have any - client #2 called the police and reported someone had stolen from her - when the police arrived, client #2 reported someone had stolen 5 packs of cigarettes from her over 6 months ago - the police spoke with client #2 without filing a report and left - the Manager reported she did not complete an incident report</p> <p>The Qualified Professional reported she was not made aware of the incident.</p> <p>The Administrator reported she was aware the police arrived and spoke with client #2 about</p>	V 367		

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V 367	Continued From page 7 alleged stolen cigarettes but did not complete an incident report.	V 367		