

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL074-248</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>04/11/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BETTER CONNECTIONS-HARMONY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>110 SALEM CIRCLE</b> <b>GREENVILLE, NC 27858</b>
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(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	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow-up survey was completed on April 11, 2019. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</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>	V 118		

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

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V 118	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to insure medications and orders were implemented as ordered by the physician and failed to ensure MARs were kept current for one of two clients (#2). The findings are:</p> <p>Review on 04/09/19 and 04/10/19 of client #2's record revealed: - 27 year old female. - Admission date of 12/16/15. - Diagnoses of Mood Disorder Not Otherwise Specified, Unspecified Schizophrenia, Autism Spectrum Disorder and Mild Intellectual Developmental Disability.</p> <p>Review on 04/10/19 of a signed physician order for client #2 dated 11/08/18 revealed: - Accu-Check - take blood sugar 30 minutes before meals (6:30am, 11:30am and 4:30pm).</p> <p>Review on 04/10/19 of client January 2019 and April 2019 MARs revealed: January 2019 - The back page of the MAR revealed the blood sugar values were not obtained on the following dates due to no batteries for the glucometer (checks Finger Stick Blood Sugar (FSBS) values) - 01/17/19, 01/21/19 thru 01/24/19 and 01/28/19 thru 01/31/19.</p> <p>April 2019 - No documented blood sugar values.</p> <p>Review on 04/10/19 of an electronic facility record</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>from January 2019 thru April 2019 revealed the following documented blood sugar values:</p> <ul style="list-style-type: none"> <li>- January 2019 - 9 documented FSBS values.</li> <li>- February 2019 - 1 documented FSBS value.</li> <li>- March 2019 - 11 documented FSBS values.</li> <li>- April 2019 - 3 documented FSBS values.</li> </ul> <p>Interview on 04/10/19 client #2 stated:</p> <ul style="list-style-type: none"> <li>- Staff checked her FSBS values.</li> <li>- She did not recall the frequency of FSBS checks.</li> </ul> <p>Interview on 04/10/19 the Residential Director stated staff had not been documenting the FSBS values as required.</p> <p>Interview on 04/10/19 the Clinical Director stated she would follow up with staff on documentation of FSBS values for client #2.</p>	V 118		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(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 was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p>	V 736		

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V 736	<p>Continued From page 3</p> <p>Observation on 04/09/19 at approximately 1:30pm revealed:</p> <ul style="list-style-type: none"> <li>- The kitchen table had particles of food on the surface. The light fixture above the kitchen table had 3 of 5 bulbs in the sockets. A chair at the kitchen table revealed a loose leg on the front.</li> <li>- The handle to the front storm door was loose.</li> <li>- The kitchen facet handle was loose. The kitchen window revealed dead insects on the inside of the sill.</li> <li>- The hallway bathroom revealed the towel rack was broken.</li> <li>- The carpet throughout the facility revealed dark spots.</li> <li>- The hallway walls revealed dark scuff marks.</li> <li>- Client #2's bedroom revealed a golf ball sized hole in the wall behind the door. A dresser revealed 3 broken drawers.</li> </ul> <p>Interview on 04/11/19 the Operations Director stated he had no questions regarding facility items discussed at exit of the survey.</p> <p>[This deficiency constitutes a re-cited deficiency and must be corrected with 30 days.]</p>	V 736		