

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601318	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/10/2019
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NAME OF PROVIDER OR SUPPLIER FRANCES MCFADDEN HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 3536 SAVANNAH HILLS DRIVE MATTHEWS, NC 28105
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 5/10/19. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Alternative Family Living.</p>	V 000		
V 109	<p>27G .0203 Privileging/Training Professionals</p> <p>10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS</p> <p>(a) There shall be no privileging requirements for qualified professionals or associate professionals.</p> <p>(b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(d) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.</p> <p>(f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional.</p>	V 109		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 109	<p>Continued From page 1</p> <p>(g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the Qualified Professional's (QP#1, QP#2) failed to demonstrate the knowledge, skills, and abilities required by the population served. The findings are:</p> <p>Review on 5/8/19 of the QP #1's record revealed: - Hired in 5/2017.</p> <p>Review on 5/10/19 of the QP's record revealed: - No hire date provided.</p> <p>Interview on 5/8/19 with QP #1 revealed: - She provided supervision to the Alternative Family Living (AFL) Provider with frequent communication "one time a week" and frequent on site visits "one time a month"; - The two clients who resided in the AFL Home had not had any hospitalizations or incidents/accidents since February 2019 to the present; - The two clients who resided in the AFL Home did not take any medications.</p> <p>Interview on 5/9/19 with the AFL Provider revealed: - QP #1 had never come inside her home to conduct any type of visit or supervision; - She did not communicate with QP #1 and QP #1 was not welcomed to her home;</p>	V 109		

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V 109	Continued From page 2 - QP #2 had come to her home to provide visits and supervision and was always welcomed to her home. Interview on 5/8, 10/19 with QP #2 revealed: - AFL Provider would probably say he (QP #2) was her QP due to their long time working relationship, but in fact QP #1 was the actual staff who supervised the home; - He was aware client #1 had a hospitalization in February 2019, where he spoke with the AFL Provider to provide assistance and complete the required paperwork including but not limited to IRIS after having learned of the incident. - No explanation regarding QP #2 and the AFL Provider.	V 109		
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:	V 118		

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V 118	<p>Continued From page 3</p> <p>(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. (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 observation, record review and interview the facility failed to have medication orders written by a person authorized by law to prescribe drugs and failed to ensure medication administration records (MAR's) were recorded after administration affecting 1 of 2 audited clients (#1). The findings are:</p> <p>Observation on 5/9/19 at approximately 5:00pm revealed: - Alternative Family Living (AFL) Provider heard client #1 sneeze, then asked him (client #1) to bring her the bottle of medication for sneezing, client #1 brought the AFL Provider an over the counter bottle of Cetirizine 10mg, client #1 was then administered (1) Cetirizine 10mg with a liquid by the AFL Provider. Thereafter the AFL Provider asked client #1 to put the bottle of medication back where he had gotten from and he (client #1) complied;</p> <p>Review on 5/9/19 of client #1's record revealed: - Admission date of 8/1/16; - Diagnoses of Profound Mild Intellectual</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>Developmental Disability;</p> <ul style="list-style-type: none"> - 33 year old male; - Physician orders for Fexofenadine 180mg- Take 1 tablet daily and Azelastine nasal spray 137 mcg/inhaler 2 sprays each nostril twice daily. Although the name of the physicians medical practice was stamped on the document entitled "physician's orders" there was no date to indicate when the actual orders were written; - No physicians order for Cetirizine 10mg; - No MAR documentation for the months of March, April and May 2019 to indicate Cetirizine 10mg had been administered to client #1; - No discontinued orders for Fexofenadine 180mg or Azelastine nasal spray 137 mcg. <p>Review on 5/8/19 of the AFL Providers record revealed:</p> <ul style="list-style-type: none"> - Hire date 8/1/16; - Medication administration training for unlicensed personnel dated 6/27/18. <p>Interview on 5/9/19 with AFL Provider revealed:</p> <ul style="list-style-type: none"> - She administered client #1 an over the counter allergy pill everyday; - She did not know she needed to document client #1's medication Cetirizine on MAR's; - She was not able to locate the physicians order for Cetirizine 10mg; - Client #1 also had a nose spray but she had never administered the medication to client #1; - She did not have discontinued orders for client #1's nose spray. <p>Interview on 5/8/19 with QP #1 revealed:</p> <ul style="list-style-type: none"> - Client #1 did not take any medications. <p>Interview on 5/8,10/19 with QP #2 revealed:</p> <ul style="list-style-type: none"> - Client #1 did not take any medications; - He was not aware client #1 was taking Cetirizine 	V 118		

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V 118	Continued From page 5 10mg daily;	V 118		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to access the Healthcare Personnel Registry (HCPR) prior to hire for 1 of 3 audited staff (#1). The findings are:</p> <p>Review on 5/10/19 of the Qualified Professional (QP) #2's personnel record revealed: - No hire date provided; - HCPR check dated 5/10/19; - No HCPR check completed prior to hire date.</p> <p>Interview on 5/10/19 with QP #2 revealed: - He was the QP for the Alternative Family Living (AFL) Provider; - He was unaware he was required to have a HCPR check since he was the Director.</p>	V 131		