STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	mhl092516	A. BUILDING: _____ B. WING _____	R 07/22/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARY'S MANOR II	501 BUNN STREET ZEBULON, NC 27597

(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	INITIAL COMMENTS An annual and follow up survey was completed on July 22, 2019. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illnesses.	V 000		
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 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	V 113		

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V 113	Continued From page 1 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. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure 2 of 3 audited clients' records (#3 and #5) maintained documentation of progress towards outcomes. The findings are: Review on 7/19/19 of client records revealed: a. Client #3: - admission date 10/29/13 - diagnoses including Schizophrenia, Bipolar Disorder (DO), Obesity, Diabetes, Hypertension, Seizure DO, Hypoxia, Brain Injury at Birth, Hypothyroidism and Vitamin D Deficiency - a treatment plan with goals to 1. Improve Physical Health, 2. Improve independent living skills to practice living on his own, 3. Develop coping skill to manage signs and symptoms of his illness and 4. Develop positive relationship with his family - the last progress note from the Qualified Professional (QP) with information regarding his progress toward outcomes was dated February, 2019 b. Client #5: - admission date 6/24/17	V 113		

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V 113	Continued From page 2 - diagnoses including Schizophrenia, Antisocial Behavior, Diabetes, Alcohol and Drug Abuse, High Cholesterol and Vitamin D Deficiency - a treatment plan dated 12/19/18 with goals to 1. Work towards maintaining his physical and mental health treatment providers and 2. Establish better relationships with family and friends and develop new and appropriate supportive relationships - the last progress note from the QP with information regarding his progress toward outcomes was dated February, 2019 During an interview on 7/19/19, staff #1 reported the QP came to the house monthly and met with all the clients. She stated she thought the QP wrote notes but they were not left in the record.. During an interview on 7/22/19, the Licensee reported she expected the QP to write progress notes monthly. She was not sure whether this was identified in the QP Job Description.	V 113		