

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL074-255 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 07/24/2019 |
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| NAME OF PROVIDER OR SUPPLIER PARADIGM 4 KIDS | STREET ADDRESS, CITY, STATE, ZIP CODE 4075 PITT STREET AYDEN, NC 28513 |
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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 | INITIAL COMMENTS An annual survey was completed on July 24, 2019. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600F, Supervised Living for Individuals of all Disability Groups/Alternative Family Living. | V 000 | | |
| 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. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR. file followed up by appointment or consultation | V 118 | | |

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AUG 21 2019
DHSR-MH Licensure Sect

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Division of Health Service Regulation

PRINTED: 07/26/2019
FORM APPROVED

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| V 118 | <p>Continued From page 1 with a physician.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to ensure medications administered were recorded immediately after administration for 1 of 2 audited clients (#2). The findings are:</p> <p>Review on 7/19/19 of client #2's record revealed: - 14 year old male admitted 3/7/19. - Diagnoses included Autism and Attention Deficit Hyperactivity Disorder (ADHD). - Physician's orders, signed 3/5/19 for docusate sodium (stool softener) 100 mg (milligrams) 1 capsule by mouth every day, guanfacine (can treat ADHD) 3 mg 1 tablet by mouth every morning before breakfast, hydroxyzine (an antihistamine, sometimes used to treat anxiety) 50 mg 1 tablet by mouth twice daily at 6:00 am and 6:00 pm, ziprasidone (antipsychotic) 20 mg 1 capsule by mouth every morning, vitamin D3 (promotes bone strength) 2000 international units 1 tablet by mouth every morning, gummy vitamins (multivitamin for nutritional support) 2 by mouth every morning.</p> <p>Review on 7/19/19 of client #2's MAR for July 2019 revealed; - Transcriptions for hydroxyzine to be administered at 6:00 am, guanfacine to be administered at 7:30 am, docusate sodium, ziprasidone, vitamin D3 and gummy vitamins to be administered at 8:00 am. - No documentation that client #2's morning medications had been administered 7/19/19.</p> | V 118 | | |

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| V 118 | Continued From page 2 During interview on 7/19/19 at approximately 10:30 am the AFL (Alternative Family Living) Parent stated client #2 had not taken his morning medications. Client #2 was in the shower at the time of the surveyor's arrival and "we just sort of got caught up in everything this morning." During a subsequent interview, the AFL Parent stated the AFL Parent Assistant had administered client #2's morning medications, but had not documented them on the MAR. She would have him document administration of client #2's morning medications. | V 118 | | |
| V 736 | 27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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. This Rule is not met as evidenced by: Based on observations and interview the facility was not maintained free from offensive odors. The findings are: Observation of the facility 7/19/19 at approximately 9:30 am revealed an overwhelmingly strong odor of feces in the hallway and in client #1's bedroom. During interview on 7/19/19 the AFL (Alternative Family Living) Parent stated client #1 would throw and smear feces on his bedroom walls. His bedroom walls had been covered with PVC | V 736 | | |

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| V 736 | Continued From page 3 (polyvinyl chloride) panels so the walls could be cleaned more easily, but the odor was still present. During interview on 7/24/19 the Program Manager stated they were aware of the odor in the facility and were working with client #1 to decrease his feces smearing behaviors. | V 736 | | |
| V 752 | 27G .0304(b)(4) Hot Water Temperatures 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (4) In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit. This Rule is not met as evidenced by: Based on observations and interview the facility failed to maintain water temperatures between 100 and 116 degrees Fahrenheit in areas where clients are exposed to hot water. The findings are: Observation on 7/19/19 at approximately 9:00 am revealed the hot water temperature in the hall bathroom bathtub was 122 degrees Fahrenheit. During interview on 7/19/19 the AFL (Alternative Family Living) Parent stated the clients bathed in the hall bathroom. She would have the hot water temperature adjusted. | V 752 | | |

Appendix 1-B: Plan of Correction Form

Plan of Correction

Please complete all requested information and email completed Plan of Correction form to:

Plans.Of.Correction@dhhs.nc.gov

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| Provider Name: Paradigm 4 Kids | Phone: 252-561-8112 | Time Line |
| Provider Contact Jeannette Barnett, Program Director | Fax: 252-561-7455 | Implementation Date: |
| Person for follow-up: | Email: j Barnett@paradigminc.org | Projected Completion Date: 8/23/2019 |
| Address: 4075 Pitt Street Street Ayden NC Provider # MHL074-255 | | |
| Finding | Corrective Action Steps | Responsible Party |
| <p>V118 27G .0209(c) Medication Requirements (c) Location and Exterior Requirements:</p> <p>Rule not met by:</p> <ol style="list-style-type: none"> Based on record review and interviews the facility failed to ensure medications administered were recorded immediately after administration for 1 of 2 audited clients. | <ol style="list-style-type: none"> All staff administering medication within the home have been trained by the agency registered nurse. All staff administering medications have reviewed policy and procedure regarding medication administration. Staff will continue to adhere to policies and procedure to ensure all steps are followed with regard to medication administration | <p>Jeannette Barnett Program Director</p> |
| <p>V736 27G .0303 (c) Facility and Grounds Maintenance Location and Exterior Requirements: 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>Rule not met by:</p> <ol style="list-style-type: none"> Observation revealed an overwhelmingly strong odor of feces in the hallway and in client #1s bedroom | <ol style="list-style-type: none"> Is should be noted that client #1 has a history of smearing feces. Agency has done a complete overhaul of the home such as PVC walls, taking up the carpet and replacing it with hardwood floors Staff will continue to keep the home and all areas of the home wiped down, cleaned , and sanitized to reduce the odor. | <p>Jeannette Barnett Program Director</p> |
| <p>V752 27G .0304 (b) (4) Hot Water Temperature (b)Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff, and visitors (4) In areas of the facility where clients are</p> | <ol style="list-style-type: none"> The hot water temperature was adjusted by Paradigm's maintenance person on the evening of 7/24/2019. This has been corrected. Staff will continue to complete environmental checklists monthly which includes checking the water temperature to ensure that it is at the appropriate temperature. | <p>Jeannette Barnett Program Director</p> |
| | | Implementation Date: |
| | | Projected Completion Date: 9/22/2019 |
| | | Implementation Date: |
| | | Projected Completion Date: 7/19/2019 |

exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit.

Implementation Date:

Projected Completion Date:

Implementation Date:

Projected Completion Date: