

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL001-255	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 09/17/2019
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NAME OF PROVIDER OR SUPPLIER ETHEL'S FOOTPRINTS II	STREET ADDRESS, CITY, STATE, ZIP CODE 1010 MADISON STREET BURLINGTON, NC 27217
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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>INITIAL COMMENTS</p> <p>An annual and follow-up survey was completed on September 17, 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 Disabilities.</p>	V 000		
V 121	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(f) Medication review:</p> <p>(1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Review on 9/17/19 of Client #1's record revealed: -Admission date of 5/6/13. -Diagnoses of Schizoaffective Disorder; Moderate Mental Retardation; Hypothyroidism; Hyperlipidemia; GERD; Dermatitis. -Physician's order dated 1/1/19 for Hydroxyzine HCL 25 mg. 1 tablet three times daily. -Physician's order dated 1/1/19 for Lorazepam 1 mg. 1 tablet four times daily. -Physician's order dated 1/1/19 for Aripiprazole 20 mg. 2 tablets in the evening.</p>	V 121		

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

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V 121	<p>Continued From page 1</p> <ul style="list-style-type: none"> -Physician's order dated 1/1/19 for Paroxetine HCL 40 mg. 1 tablet in the evening. -Physician's order dated 4/1/19 for Divalproex Sodium ER 500 mg. 2 tablets in the evening. -Physician's order dated 4/1/19 for Mirtazapine 45 mg. 1 tablet in the evening. -The July, August and September 2019 MAR revealed Client #1 was administered the above medications daily. -There was no evidence of a six months psychotropic drug review for Client #1 conducted. <p>Interview on 9/12/19 with the Director revealed:</p> <ul style="list-style-type: none"> -He was not aware the drug review for psychotropic medications had not been conducted lately for Client #1. -He confirmed the six months psychotropic drug review for Client #1 was not completed. <p>*This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 121		
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 interview, the facility failed to ensure facility grounds were maintained in a clean, safe and attractive manner. The findings are:</p>	V 736		

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V 736	<p>Continued From page 2</p> <p>Observation on 9/17/19 at 11:10 a.m. of bedroom located by the living area revealed: -Drawers dresser #1 were broken. -Patched work on wall was not painted over. -Doors from dresser #2 were being held together by a hanger wire.</p> <p>Observation on 9/17/19 at 11:18 a.m. of hallway bathroom revealed: -There was water damage on the ceiling. -Tub was dirty with grime.</p> <p>Observation on 9/17/19 at 11:30 a.m. of the back porch revealed: -There was an old broken kitchen range on the porch. -Old paint can on the floor. -Lawnmower was being stored on the porch.</p> <p>Interview on 9/12/19 with staff #1 revealed: -Residents had a hard time being gentle with furniture and would break the drawers. -Facility's roof was recently worked after having a leak. -Roofing work was finished, but water damage in bathroom was not painted over. -Facility had recently gotten a newer kitchen range and were in process of disposing old one as it had to be taken to the dump.</p> <p>Interview on 9/12/19 with the Director revealed: -He acknowledged facility failed to ensure grounds were maintained in a clean, safe and attractive manner.</p> <p>*This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		