

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL081-087	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/18/2019
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NAME OF PROVIDER OR SUPPLIER KELLY'S CARE 6	STREET ADDRESS, CITY, STATE, ZIP CODE 156 US HWY-122-A FOREST CITY, NC 28043
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on September 18, 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 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</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 review and interview, the facility failed to keep current the client MAR for 1 of 3 sampled clients (Client #2). The findings are:</p> <p>Review on 9/18/19 of Client #2's record revealed: -He was 24 years old and diagnosed with Infantile Autism, Generalized Anxiety Disorder, Mixed Personality Disorder and a history of Traumatic Brain Injury; -His 6/29/19 treatment plan had him with a continued need for support with his personal hygiene; -1/25/19, his physician-ordered external medications included: -Triamcinolone Lotion 0.1% apply twice daily to scalp to treat eczema and/or psoriasis; -Hydrocortisone Cream 2.5 % apply twice daily to face to treat eczema and/or dermatitis; -Ketoconazole Cream 2% apply twice daily to face to treat dermatitis; -His physician-orders for Ketoconazole 2% Shampoo changed from an 8/2019 order to use twice weekly to a 9/6/19 order to use daily.</p> <p>Review on 9/18/19 of Client #2's July 2019-September 2019 MARs revealed: -7/7/19, 7/13/19 through 7/15/19 for the 8 AM administration time, the Triamcinolone Lotion 0.1%, Hydrocortisone Cream 2.5 %, and Ketoconazole Cream 2% were circled and staff-initialed; -7/7/19, 7/13/19, 7/14/19, and 7/15/19 for the administration time between 7 AM to 2:59 PM, the Ketoconazole 2% Shampoo were circled and</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>staff-initialed; -7/12/19, 7/13/19 through 7/15/19 for the 8 PM administration time, the Triamcinolone Lotion 0.1%, Hydrocortisone Cream 2.5 % and Ketoconazole Cream 2% were circled and staff-initialed; -8/30/19 through 9/2/19 and on 9/7/19 for the 8 AM administration time, the Triamcinolone Lotion 0.1% was circled and staff-initialed; -8/30/19 through 9/2/19 for the 8 AM administration time, the Hydrocortisone Cream 2.5 % and Ketoconazole Cream 2% were circled and staff-initialed; -On 8/30/19, the Ketoconazole 2% Shampoo was circled and staff-initialed; -8/29/19 through 9/1/19 for the 8 PM administration time, the Triamcinolone Lotion 0.1%, Hydrocortisone Cream 2.5 %, and Ketoconazole Cream 2% were circled and initialed; -There were no exception codes or reason(s) documented on the July-September 2019 MARs that indicated why these medications were circled and initialed by staff.</p> <p>Review on 9/18/19 of a written note with a fax date of 9/18/19 revealed: -The electronic MAR had experienced "a few glitches" and appeared there was an exception on a medication; - "This error has been corrected;" -The note was signed by the pharmacy.</p> <p>Interview on 9/17/19 with Client #2 revealed: -He had prescribed facial creams he put on because of one of his goals was to maintain good hygiene.</p> <p>Interview on 9/18/19 with Staff #1 revealed: -She did not know the reason why Client #2's</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>external medications did not show up in the exceptions section of the MAR; -She was aware Client #2 was given his medications by staff at a sister facility where he spent the weekend of 8/30/19 through 9/2/19.</p> <p>Interview on 9/18/19 with the facility's Registered Nurse (RN) and the Director of Operations/Qualified Professional (QP) revealed: -Client #2 received his external medications from staff; -He spent the weekend of 8/30/19 at a sister facility with a friend as there was a bed vacant at the time; -They understood the medication exceptions for the prescribed external medications on the client MARs needed to be documented the same as for the prescribed internal client medications.</p>	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 ensure that before employment of health</p>	V 131		

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V 131	<p>Continued From page 4</p> <p>care personnel, the Health Care Personnel Registry (HCPR) was not accessed for 2 of 3 audited staff (Staffs #2 and #3). The findings are:</p> <p>Review on 9/18/19 of Staff #2's personnel record revealed: Job position: House Staff Hire date: 4/25/18 HCPR accessed: 4/27/18.</p> <p>Review on 9/18/19 of Staff #3's personnel record revealed: Job position: House Staff Hire date: 6/27/19 HCPR accessed: 6/28/19.</p> <p>Interview on 9/18/19 with the Director of Operations/Qualified Professional (QP) revealed: -Staff were not placed in the facility to work directly with clients until their criminal background checks and HCPR checks were cleared; -He would need to clarify the staff hire dates in the personnel records.</p>	V 131		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to be kept free from insects and be</p>	V 736		

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V 736	<p>Continued From page 5</p> <p>maintained in a safe, clean and attractive manner. The findings are:</p> <p>Observation on 9/18/19 between 11:36 am- 12:05 pm of the facility revealed:</p> <ul style="list-style-type: none"> -The window at the head of Client #4's bed had a large spider web that stretched from a right to left corner in his window and between the glass pane and window screen with the bottom of the window having 2 places where insects had entered his room; -2-3 insects were lying dead on the inside of his window sill; -There was black debris on the bottom of his window sill; -A black line of debris was at the bottom of the window sill beside the vacant bed in Client #4's bedroom; -The ceiling in the shared bathroom closest to Client #2's bedroom had ceiling material peeling apart at the seam and the wall paint around the window in the shower was peeling. <p>Interview on 9/18/19 with the Director of Operations/Qualified professional (QP) revealed:</p> <ul style="list-style-type: none"> -He would have this spider web removed from Client #4's window today; -He would assess the repairwork needed in the shared bathroom. 	V 736		