STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL074-248	A. BUILDING: _____ B. WING _____	R 01/02/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BETTER CONNECTIONS-HARMONY	110 SALEM CIRCLE GREENVILLE, NC 27858

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V 000	INITIAL COMMENTS An annual, complaint and follow up survey was completed on 1/2/20. The complaint was substantiated. Intake #NC00159066. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying,	V 108		

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V 108	Continued From page 1 reporting, investigating and controlling infectious and communicable diseases of personnel and clients. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to provide staff training to meet the needs of the clients for 4 of 4 direct care staff audited (Staff #1, #3, #4, and #7). The findings are: Review on 12/30/19 of client #2's record revealed: -28 year old female. -Date of admission of 12/16/15. -Diagnoses included Unspecified Mood Disorder, Undifferentiated Schizophrenic, Moderate Intellectual Disabilities, Autism Spectrum, Chronic Constipation and Pre-Diabetes. -Crisis plan dated 01/01/19 "In the event my blood sugar levels are 60 or below, or over 240, my support staff should contact the nurse"... Review on 12/30/19 of client #2's physician orders revealed: 2/5/19 -Accu-Check Aviva Plus Test. Check blood sugar at 7:30am, 11:30am and 5:30pm. Review on 12/30/19 of client #2's Medication Administration Records (MARs) from 9/1/19 - 12/31/19 revealed: -Parameters for blood sugar levels and nurse contact were not transcribed to the MARs. Interview on 12/31/19 client #2 stated:	V 108		

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V 108	Continued From page 2 -Staff assisted her with blood sugar levels everyday. Review on 12/31/19 of Staff #1's personnel file revealed: -Hire date 3/18/19. -Position, Residential Director. -No documentation of training on diabetes. Review on 12/31/19 of Staff #3's personnel file revealed: -Hire date 3/21/19. -Position, Direct Care Professional. -No documentation of training on diabetes. Review on 12/31/19 of Staff #4's personnel file revealed: -Hire date 12/30/29. -Position, Direct Care Professional. -No documentation of training on diabetes. Review on 12/31/19 of Staff #7's personnel file revealed: -Hire date 12/30/29. -Position, Qualified Professional (QP). -No documentation of training on diabetes. Interview on 12/30/19 Staff #1 stated: -She knew about diabetes due to a family member having it. -She was formally trained by the facility on diabetes. -Staff #4 stated she had not been trained on diabetes. -Attempted interview on 12/31/19 was unsuccessful due to no return phone call from Staff #3.	V 108		

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V 108	Continued From page 3 -Attempted interview on 12/31/19 was unsuccessful due the QP being on vacation. Interview on 01/02/20 Medical Records staff stated: -Staff for the facility had not been trained on diabetes. -He would schedule diabetes training for the staff.	V 108		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record review and interviews the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings are: Review on 12/31/19 of facility records from 12/01/18 - 12/31/19 revealed: Fire Drills:	V 114		

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V 114	Continued From page 4 -1st quarter (12/01/18-02/28/19): No second or third shift fire drills documented and no weekend drills documented. -3rd quarter (06/01/19- 08/31/19): No third shift fire drill documented and no weekend drills documented. -4th quarter (09/01/19- 11/30/19): No first shift fire drill documented and no weekend drill documented for the 8:00am-8:00pm shift. Disaster Drills: -1st quarter (12/01/18-2/28/19): No disaster drills documented. -2nd quarter (03/01/19-05/31/19): No disaster drills documented. -3rd quarter (06/01/19- 08/31/19): No disaster drills documented. -4th quarter (09/01/19- 11/30/19): No disaster drill for 8:00am-8:00pm shift. Interview on 01/02/19 the Residential Director stated: -1st shift was 8:00am-4:00pm. -2nd shift was 4:00pm- 12:00am. -2nd shift was 5:00pm-10:00pm. -3rd shift was 12:00am- 8:00am. -A second staff person worked the 5:00pm-10:00pm shift. -Weekend shifts were 8:00am - 8:00pm and 8:00pm - 8:00am and 11:00am-7:00pm. -She put a schedule up for all drills to be completed. She would ensure they were completed correctly.	V 114		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration:	V 118		

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V 118	Continued From page 5 (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 with a physician. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure medications and orders were implemented as ordered by the physician and failed to ensure MARs were kept current for two of three audited clients (#1 and #2). The findings are:	V 118		

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V 118	Continued From page 6 Review on 12/30/19 and 12/31/19 of client #2's record revealed: -28 year old female. -Admission date of 12/16/15. -Diagnoses of Unspecified Mood Disorder, Undifferentiated Schizophrenia, Autism Spectrum Disorder and Moderate Intellectual Disability. Review on 12/30/19 and 12/3/19 of signed "physician orders" revealed: 2/5/19 -Accu-Check Aviva Plus Test. Check blood sugar at 7:30am, 11:30am and 5:30pm. 6/26/19 -Benztropine (treats bipolar disorder) - 0.5 milligrams (mg), one tablet twice daily. -Fanapt (treats schizophrenia) - 8mg one tablet twice daily. -Propranolol (treats hypertension) - 20 mg-1 tablet twice daily. -Klonopin (treats anxiety) - 1 mg tablet three times daily. -Colace (treats constipation) - 100mg 1 capsule twice daily. -Fluticasone nasal spray (treats nasal congestion) 2 sprays each nostril twice daily. -Lamotrigine (treats bipolar disorder) 150mg tablet- 1 tablet two times daily. -Metformin (treats diabetes) - 500mg 1 tablet- one tablet twice daily. -Polyethylene glycol 3350 (treats constipation) - Mix 1 capful (17 grams) with 4oz of water/juice twice daily. -Linzess (treats constipation) 72mcg 1 tablet every morning. -Senna (treats constipation) - 8.6 mg tablet- 2 tablets daily. -Sertraline HCL (treats depression) - 25mg- one tablet in the morning.	V 118		

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V 118	Continued From page 7 Review on 12/30/19 and 12/31/19 of client #2's September 2019 - December 2019 MARs revealed the following: September 2019 -Blood sugar values were not obtained on the following dates: 7:30am: 9/5/19, 9/12/19-9/28/19 5:30pm: 9/5/19, 9/8/19 and 9/12/19-9/27/19. Blanks reviewed on the MAR's on the following dates: -Benztropine - 9/30/19 at 8:00pm. -Fanapt - 9/30/19 at 8:00am. October 2019 -Propranolol - 10/11/19 at 8:00am. -Klonopin - 10/10/19 at 8:00am. November 2019 -Colace - 11/21/19 and 11/22/19 at 8:00pm. -Benztropine Mes - 11/21/19 at 8:00pm -Fanapt - 11/21/19 at 5:00pm. -Fluticasone Nasal Spray - 11/21/19 at 8:00pm December 2019 - Blood sugar values were not obtained as ordered on the following dates: 7:30am: 12/2/19, 12/16/19, 12/18/19, 12/19/19, 12/28/19 and 12/29/19. 11:30am: 12/28/19 and 12/29/19 5:30pm: 12/2/19-12/6/19; 12/9/19 and 12/10/19; 12/15/19, 12/17/19, 12/18/19, 12/20/19, 12/28/19 and 12/29/19. Blanks reviewed on the MAR's on the following dates: -Colace - 12/28/19-12/30/19 at 8:00am; 12/2/19, 12/4/19-12/6/19, 12/10/19, 12/20/19, 12/23/19 and 12/28/19 at 8:00pm.	V 118		

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V 118	Continued From page 8 -Linzess - 12/28/19 and 12/29/19 at 8:00am. -Senna - 12/28/19 and 12/29/19 at 8:00am. -Sertraline HCL - 12/28/19 and 12/29/19 at 8:00am. -Vitamin D - 12/28/19 and 12/29/19 at 8:00am. -Vitamin E - 12/28/19 and 12/29/19 at 8:00am. -Benztropine Mes-12/28/19 and 12/29/19 at 8:00am; 12/28/19 and 12/29/19 at 8:00pm -Fanapt 8mg - 12/28/19 and 12/29/19 at 8:00am;12/28/19 at 5:00pm. -Fluticasone Nasal Spray- 12/28/19 and 12/29/19 at 8:00am; 12/28/19 8:00pm. -Lamotrigine - 12/28/19 and 12/29/19 at 8:00am; 12/28/19 at 8:00pm. -Metformin HCL - 12/28/19 and 12/29/19 at 8:00am; 12/28/19 at 6:00pm. -Polyethylene Glycol - 12/28/19 and 12/29/19 at 8:00am; 12/28/19 at 8:00pm. -Klonopin - 12/28/19 and 12/29/19 at 8:00am; 12/28/19 at 8:00pm. -Propranolol - 12/28/19 and 12/29/19 at 8:00am and 12/28/19 at 8:00pm. Interview on 12/31/19 Client #2 stated: -She got her medications everyday. -Staff assisted her with checking her blood sugar everyday. Review on 12/30/19 and 12/31/19 of client #1's record revealed: -42 year old female. -Admission date of 8/31/17. -Bipolar-Severe with Psychotic Features, Mild Intellectual Disabilities. Review on 12/30/19 and 12/31/19 of client #1's signed physician orders revealed: -Cogentin (treats bipolar disorder) 0.5mg - 1 tablet twice daily. -Buspar (treats anxiety) 10mg - 1 tablet 3 times	V 118		

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V 118	Continued From page 9 daily. -Celexa (treats depression) 40mg - 1 tablet every morning. -Zyrtec (treats allergy symptoms) 10mg - 1 tablet every evening. Review on 12/30/19 and 12/31/19 of client #1's September 2019 - December 2019 MAR's revealed the following blanks: September 2019 -Cogentin - 9/27/19 at 8:00pm October 2019 -Buspar - 10/31/19 at 4:00pm. November 2019 -Buspar - 11/28/19 at 8:00pm. December 2019 -Celexa - 12/30/19 at 8:00am. -Zyrtec - 12/15/19 at 8:00pm. Interview on 12/31/19 Client #1 stated: -Staff administered her medications daily. Interview on 12/31/19 the Residential Director stated: -Clients were administered their medications daily. -Clients had not refused any medications. -Blanks in the MAR may be due to staff not signing the MAR. -If client is out of the facility, she normally fills in the blanks later. -She understood the MAR must be kept current. Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician.	V 118		

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V 118	Continued From page 10 [This deficiency constitutes a re-cited deficiency and must be corrected with 30 days.]	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 observation and interviews, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are: Observations of the facility on 12/30/19 at approximately 10:50am revealed: -Window sill in living room to the left of the fire place had the screen loose from the frame with leaves in it. -Chest in Client # 3's dresser had knobs missing on the first and second drawer. -Ceiling above shower in hall bathroom had an area approximately 12 inches long and 6 inches wide that was black. -An area above the tile wall of shower approximately 5 inches long that was also black. -Various sized scuff marks behind television in client #2's bedroom. -Small wasp nest between the window pane and screen. -Dresser in Client #1's bedroom had 1 knob off	V 736		

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V 736	Continued From page 11 second drawer. Interview on 12/30/19 the Residential Director stated: -She had completed a work order prior to 12/25/19 for the black area on the ceiling of the the shower. -Clients sometimes point the shower head up in that area and have been asked to stop. [This deficiency constitutes a re-cited deficiency and must be corrected with 30 days.]	V 736		
V 744	27G .0304(b) Safety 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. This Rule is not met as evidenced by: Based on observation and interview the licensee failed to ensure the facility was equipped in a manner that ensured the physical safety of one of three audited clients (Client #2). The findings are: An observation on 12/30/19 of the facility at approximately 10:55am revealed: -The room had a window facing the side of the home and a window facing the front of the home. -The window facing the side of the home would not open.	V 744		

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V 744	Continued From page 12 -Interview on 12/31/19 Client #2 stated she did not know why her window wouldn't open. Interview on 12/30/19 the Residential Director stated: -Client # 2 had previously broken one of the window panes in the window. -The window would not open after the window pane was repaired. - She was not sure how long the window would not open. -She would follow up on getting the window repaired.	V 744		