

Division of Health Service Regulation

(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-826	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 02/21/2020
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NAME OF PROVIDER OR SUPPLIER THE LOVING HOME, INC #2	STREET ADDRESS, CITY, STATE, ZIP CODE 162 Dobbin Holmes Road FAYETTEVILLE, NC 28303
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V000	INITIAL COMMENTS An annual, complaint, and follow up survey was completed on February 21, 2020. The complaint was unsubstantiated (Intake NC#00160612). Deficiencies were cited.	V000		
V108	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 clients 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 Heat Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying,	V108	The Loving Home, Inc (TLH) General Manager will contract a RN Nurse to do an in-service training for staff on ostomy care. When the training is completed a certificate will be placed in each staff personnel chart to show proof of the ostomy training.	Implementation Date: 04/01/2020 Projected Completion Date: Ongoing

DHSR-Mental Health

MAR 23 2020

Lic. & Cert. Section

Division of Health Service Regulation

STATE FORM

6899

8U7L11

If continuation sheet 1 of 15

Signature: *Vincent M. Williams, BS/QP*

Date: 03/19/2020

Vincent M. Williams, Clinical Direct

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V118	<p>Continued From page 4</p> <p>Date revealed:</p> <ul style="list-style-type: none"> -1/7/20: Benztropone 0.5 mg (milligrams) daily as needed for tremors. -1/8/20: Doculace 100 mg twice daily. (Prevent or treat constipation.) -1/7/20: Haloperidol 5 mg every evening. (Anti-psychotic medicine used to treat mental and mood disorders, including schizophrenia.) -1/7/20: Hydroxyzine 50 mg twice daily. (Used to treat anxiety, or allergic skin reactions such as hives or contact dermatitis.) -1/8/20: Latanoprost 0.005% eye drops, 1 drop in each eye at bedtime. (Used to treat high pressure inside the eye, i.e. due to glaucoma.) -1/7/20: Quetiapine 400 mg every evening. (Used to treat certain mental/mood disorders, i.e. schizophrenia.) -1/8/20 Simvastatin 40 mg every evening. (Lowers cholesterol.) -1/8/20: Nicotine polacrelex (Nicorette) 4 mg gum, chew 1 if needed for smoking cessation (as needed for cravings). <p>Review on 2/13/20 of client #1's January and February 2020 MARs revealed:</p> <ul style="list-style-type: none"> -The 7 pm scheduled doses of the following medications had not been documented as administered on 2/12/20: Doculace 100 mg, Haloperidol 5 mg, Hydroxyzine 50 mg, Latanoprost 0.005% eye drops, Quetiapine 400 mg, and simvastatin 40 mg -The transcribed order for Benztropine 0.5 mg read to be administered as needed. The indication, "for tremors" had not been transcribed to MARs. No Benzropine had been documented as administered. -Nicotine polacrelex (Nicorette) 4 mg yum had not been transcribed to the January or February 2020 MARs. 	V118	<p>The Loving Home, Inc (TLH) The General Manager will contract with a RN Nurse to conduct an in-service training to staff on documenting/transcribing medications information on MAR's and administering them at the appropriate time. The QP and/or Group Home Manager will ensure documenting/transcribing remain in compliance by reviewing daily.</p>	<p>Implementation Date: 04/01/2020</p> <p>Projected Completion Date: Ongoing</p>

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V120	<p>Continued From page 8</p> <p>Subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure medications that required storage between 36 degrees and 46 degrees Fahrenheit were stored in a separate, locked compartment or container in a refrigerator for 2 or 3 clients audited (#1, #2)/ The findings are:</p> <p>Review on 2/13/20 of client #1's record revealed: -40year old female admitted 3/13/19. -Diagnoses included schizoaffective disorder; mild mental retardation; depressive disorder. -Order dated 1/8/20: Latanoprost 0.005% eye drops, 1 drop in each eye at bedtime. (Used to treat high pressure inside the eye, i.e. due to glaucoma.)</p> <p>Observations on 2/13/20 at approximately 4:39 pm of client #1's medications on hand revealed -1 opened bottle of Latanoprost 0.005% eye drops stored in a file cabinet, dispense date, 11/27/19. -10 unopened bottles of Latanoprost 0.005% eye drops stored in an un-refrigerated file cabinet with the following dispense dates: 4/1/19, 4/29/19, 5/28/19, 6/26/19, 7/22/19, 8/13/19, 8/14/19, 10/14/19, 12/27/19, and 1/22/20. -The instructins on the boxes of unopened Latanoprost 0.005% eye drops read, during shipment the medication could be maintained at temperatures up to 104 degrees Fahrenheit, not to exceed 8 days. Once opened the eye drops did not require refrigeration for up to 6 weeks. Unopened bottles should be stored under</p>	V120	<p>The Loving Home, Inc (TLH) The General Manager will contract with a RN Nurse to conduct an in-service training to staff on when and how to store medications in a refrigerator according to instruction. The QP and/or Group Home Manager will ensure staff is following in-service training remain in compliance by reviewing it monthly or as needed.</p>	<p>Implementation Date: 04/01/2020</p> <p>Projected Completion Date: Ongoing</p>

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V120	Continued From page 10 Deteriorate prior to use. Interview on 2/13/20 the Clinical Director stated he would address the storage issues for the eye drops.	V120		
V736	27G .0303(c) Facility and Ground Maintenance 10A NCAC 27G .0303 LOCATIION 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 interview, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are: Observations on 2/13/20 between 11:30 a and 12:30 pm revealed: -The covered front porch of the facility had 1 metal chair and 1 metal sofa without cushions to provide for outdoor seating. There was a piece of plywood across the meal supports in the chair that would make it possible to be used for sitting. Upholstery on the seat of a cushioned chair was worn away exposing the fabric backing of the vinyl covering. -Green discoloration/staining on the exterior vinyl siding and gutters on the home, front and back. Black speckled stains around the exterior light on the front porch. -Tow smoke detectors were chirping.	V736	The Loving Home, Inc (TLH) The General Manager and/or Clinical Director will replace the cushions on the metal chair and metal sofa that were put away to inclement weather. General Manager and/or Clinical Director will contract with lawn care and maintain person to clean the siding and gutters on the home front and back and black speckled stains around the exterior light on the front porch. Implementation Date: 04/01/2020 Projected Completion Date: Ongoing	

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V738	Continued From page 13 Interview on 2/13/20 client #2 stated: -There had been a couple of mice in the kitchen "a while back." -Mouse traps were set using peanut butter. -The traps were set by the refrigerator and freezer. Interview on 2/13/20 client #3 stated: -He had seen mice in the kitchen about a month prior. -Mouse traps had been put out but he did not know how many had been caught. Interview on 2/13/20 the Clinical Director stated he would follow up on the evidence of insects and rodents.	V738	The Loving Home, Inc (TLH) The General Manager and/or Clinical Director will contract with State Pest Control Company to go the facility and spray for insects and rodents. The QP and Group Home manager will inspect for insect and rodents bi-monthly or as needed to ensure the facility be kept free from insects and rodents.	Implementation Date: 04/01/2020 Projected Completion Date: Ongoing
V752	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. The Rule is not met as evidenced by: Based on observations and interview, the facility failed to maintain water temperatures between 100-116 degrees Fahrenheit where clients had access to hot water, The findings are Observations on 2/13/20 between 11:30 am and	V752	The Loving Home, Inc (TLH) The Clinical Director or QP will adjust the hot water temperature in the facility to between 100-116 degrees Fahrenheit. The QP and/or the Group Home Manager will ensure the hot water temperature in the facility maintain between 100-116 degrees Fahrenheit by inspecting it bi-monthly.	Implementation Date: 04/01/2020 Projected Completion Date: Ongoing

Signature: Vincent M. Williams, BS/AP
Vincent M. Williams, Clinical Direct

Date: _____