

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 092-516	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 07/21/2020
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NAME OF PROVIDER OR SUPPLIER MARY'S MANOR II	STREET ADDRESS, CITY, STATE, ZIP CODE 501 BUNN STREET ZEBULON, NC 27597
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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>A complaint survey was completed on 07/21/2020. The complaint was substantiated (Intake #NC 00166833). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p>	V 000		
V 541	<p>27F .0104 Client Rights - Stor. & Protect of Cloth/Poss</p> <p>10A NCAC 27F .0104 STORAGE AND PROTECTION OF CLOTHING AND POSSESSIONS</p> <p>Facility employees shall make every effort to protect each client's personal clothing and possessions from theft, damage, destruction, loss, and misplacement. This includes, but is not limited to, assisting the client in developing and maintaining an inventory of clothing and personal possessions if the client or legally responsible person desires.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to assist 1 of 1 audited client (#1) in developing and maintaining an inventory of clothing and personal possessions. The findings are:</p> <p>Review on 7/15/20 of client #1's record revealed: -Admission date 01-22-18 -Diagnoses of Seizures, Hypertension, Hyperthyroidism, Obesity, Schizophrenia, Lower Back Pain, Cerebral Hypoxia, Bipolar Mood Disorder and Primary Hypertension.</p>	V 541		

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

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V 541	<p>Continued From page 1</p> <p>Interview on 7/15/20 with Client #1 revealed he: -Needed some pants, other pants had gotten to tight. -Had about 3 pair of pants that he currently wears. -Would like a new pair of tennis shoes, had an old pair but would like a new pair. -Did not have a list of clothing that he had currently.</p> <p>Interview on 7/15/20 with Staff #1 revealed she: -Had not completed an inventory of client's clothes. -Client #1 is in need of more pants, his weight fluctuates. -Had not planned a shopping trip for client #1. -Did not know about any money until the Licensee brings the clients' money to the home.</p> <p>Interview on 7/15/20 with the Licensee revealed she: -Did not have an inventory of clothing for clients. -Said client #1 has enough clothes. -Stated client #1 had mentioned wanting some tennis shoes. -Was unaware of client #1's current pants being too tight.</p>	V 541		
V 542	<p>27F .0105(a-c) Client Rights - Client's Personal Funds</p> <p>10A NCAC 27F .0105 CLIENT'S PERSONAL FUNDS</p> <p>(a) This Rule applies to any 24-hour facility which typically provides residential services to individual clients for more than 30 days.</p> <p>(b) Each competent adult client and each minor above the age of 16 shall be assisted and encouraged to maintain or invest his money in a</p>	V 542		

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V 542	<p>Continued From page 2</p> <p>personal fund account other than at the facility. This shall include, but need not be limited to, investment of funds in interest-bearing accounts. (c) If funds are managed for a client by a facility employee, management of the funds shall occur in accordance with policy and procedures that:</p> <ol style="list-style-type: none"> (1) assure to the client the right to deposit and withdraw money; (2) regulate the receipt and distribution of funds in a personal fund account; (3) provide for the receipt of deposits made by friends, relatives or others; (4) provide for the keeping of adequate financial records on all transactions affecting funds on deposit in personal fund account; (5) assure that a client's personal funds will be kept separate from any operating funds of the facility; (6) provide for the deduction from a personal fund account payment for treatment or habilitation services when authorized by the client or legally responsible person upon or subsequent to admission of the client; (7) provide for the issuance of receipts to persons depositing or withdrawing funds; and (8) provide the client with a quarterly accounting of his personal fund account. <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to provide 1 of 1 audited client (#1) with a quarterly accounting of his personal fund account. The findings are:</p> <p>Review on 7/15/20 of Client #1's record revealed: -Admission date 01-22-18 -Diagnoses of Seizures, Hypertension,</p>	V 542		

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V 542	<p>Continued From page 3</p> <p>Hyperthyroidism, Obesity, Schizophrenia, Lower Back Pain, Cerebral Hypoxia, Bipolar Mood Disorder and Primary Hypertension.</p> <p>Interview on 7/15/20 with Client #1 revealed he: -Did not recall his bank account balance. -Did not receive quarterly statements of current balance. -Was unaware of receiving a stimulus check.</p> <p>Interview on 7/15/20 with Staff #1 revealed she: -Was unaware of any of the clients' money until the Licensee brings them money to the house. -Did take them shopping and assisted them with turning in receipts to the Licensee. -Had never seen a bank statement or bank account balances for clients.</p> <p>Interview on 7/15/20 with the Licensee revealed she: -Had a separate account set up with her name and clients name at a bank. -Had not given clients monthly bank statements. -Did have the account balance for each client.</p> <p>As of 7/20/20 the Licensee failed to produce a bank statement for client #1.</p>	V 542		