

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-204	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 11/02/2020
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NAME OF PROVIDER OR SUPPLIER KENWOOD HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 413 KENWOOD DRIVE JACKSONVILLE, NC 28540
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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 and follow up survey was completed on was completed on November 2, 2020. The complaint was unsubstantiated (Intake #NC00164563). A deficiency was 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 291	<p>27G .5603 Supervised Living - Operations</p> <p>10A NCAC 27G .5603 OPERATIONS</p> <p>(a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity.</p> <p>(b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management.</p> <p>(c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals.</p> <p>(d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court</p>	V 291		

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

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V 291	<p>Continued From page 1</p> <p>or legal system is involved or when health or safety issues become a primary concern.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to maintain coordination of services with the qualified professionals who are responsible for treatment for one of three audited clients (#3). The findings are:</p> <p>Review on 10/28/20 and 10/29/20 of client #3's record revealed: -65 year old male. -Admission date of 4/01/20. -Diagnoses of Diabetes and Intellectual and Developmental Disability (moderate). -No order, policy/procedure, or guidelines with blood sugar (BS) parameters and instructions for response for results that would be considered too high or too low by the physician.</p> <p>Review on 10/28/20 -10/29/20 of client #3's April 2020 - September 2020 medication administration record (MAR) revealed: -BS to be checked three times daily (April 9, 2020 - August 13, 2020). -BS to be checked two times daily (April 1, 2020 - April 9, 2020 and August 14, 2020 - current).</p> <p>Review on 10/30/20 of client #3's April 2020 - September 2020 BS Tracking Logs revealed: -Morning BS results for April 2020 ranged from 46 - 168. Afternoon BS results ranged from 41 - 281. Evening results ranged from 79-313. -Morning BS results for May 2020 ranged from 46-173. Afternoon results ranged from 91-324. Evening results ranged from 74-274. -Morning BS results for June 2020 ranged from</p>	V 291		

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V 291	<p>Continued From page 2</p> <p>64-189. Afternoon results ranged from 97-218. Evening results ranged from 91-195. -Morning BS results for July 2020 ranged from 75-193. Afternoon results ranged from 81-173. Evening results ranged from 80-193. -Morning BS results for August 2020 ranged from 68-170 Afternoon results ranged from 89-163. Evening results ranged from 80-168. -Morning BS results for September 2020 ranged from 72-119. Evening results ranged from 77-149.</p> <p>Interview on 10/28/20 staff #2 stated: -Client #3's BS checks were completed in the morning and evening. -Facility nurse (RN) was contacted if anyone had questions or concerns regarding client #3's BS.</p> <p>Interview on 10/28/20 staff #10 stated: -Client #3's BS checks were completed daily. -RN was contacted if anyone had questions or concerns regarding client #3's BS.</p> <p>Interview on 10/28/20 staff #14 stated: -Client #3's BS checks were completed daily. -She did not administer meds on her shift.</p> <p>Interview on 10/29/20 RN stated: -There were no parameters or guidelines for staff to follow for blood sugar results that were too high or too low. -She had worked closely with physician's office to monitor client #3's BS readings since client #3's admission to facility. -She maintained consistent communication with staff to ensure that any concerns were reported right away.</p>	V 291		