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V 000	INITIAL COMMENTS A complaint survey was completed on March 23, 2021. The complaint (Intake #NC00173901) was substantiated. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Individuals of all Disability Groups/Alternative Family Living.	V 000		
V 119	27G .0209 (D) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge.	V 119	V 119 Medication Administration Policy will be updated to to include the proper protocols for disposing of medications including controlled medication. Updated policy will be given to all employees that handle client medication. CCHC is in the process of creating a medication disposal form that must be filled out every time a medication is disposed of. Failure for employees to follow the new policy and procedures will result in an immediate write up and will be subject to termination. CCHC is also in the process of hiring a Full Time Registered Nurse to better monitor our medication adminstration record needs. Medication monitoring will take place on a monthly basis by reviewing of the MAR and adding additional medication training as needed. V 291 CCHC strives to ensure that coordination of care is maintained for all of our clients. An internal meeting and additional training will take place to ensure that our QP's are aware of the importance in maintaining all documentation related to the coordination of care. CCHC will also stress the importance of following up with member's team to ensure that any information is received. Failure to maintain coordination of care will result in a write up. CCHC's CEO will monitor coordination of care on a quarterly basis.	5/15/2021 5/15/2021

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Aimee Smith | TITLE: VP of Operations | (X6) DATE: 3/24/21

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This Rule is not met as evidenced by:
Based on observations, record reviews and interviews, the facility failed to dispose of controlled substances which guarded against diversion or accidental ingestion for 3 of 3 clients (#1, #2 and #3). The findings are:

Observations on 3/18/21 of client #1, client #2 and client #3's controlled medications revealed:
-The 3 bottles of Diazepam 10mg was stored in secured lock boxes in an armoire that was also locked.

Review on 3/19/21 of the website for a list of controlled substances in North Carolina revealed:
-Diazepam was a scheduled IV drug

Review on 3/17/21 of client #1's record revealed:
-An admission date of 8/15/19
-Diagnoses of Autism Spectrum with Accompanying Intellectual Impairment, Severe Intellectual Disability, Anxiety Disorder, Not Otherwise Specified, Intermittent Explosive Disorder, Left Ear Reconstruction and Bi-Lateral Tubes.
-An assessment dated 8/15/19 noting "needs to increase self-care skills, increase communication skills, increase vocational skills, encourage leisure skills and support and maintain motivation to participate in activities of daily living"
-A treatment plan dated 6/29/20 noting "with 50% success rate, will develop better communication skills each day with less than 3 verbal prompts for 6 consecutive months, with 75% success rate, will interact with peers at least one time a day

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with less than 3 verbal prompts per session for 6 consecutive months, with a 75% set as a success rate, will work on using appropriate mealtime manners and supports daily and may receive up to 5 verbal prompts per trial for 6 consecutive months, with 65% set as a success rate, will work on his oral hygiene practices by brushing his teeth in the morning and at bed time with up to 4 verbal prompts per trial for 6 consecutive months, with 95% set as a success, will work to understand and follow community and house rules for safety with 4 verbal prompts or less per trial for 6 consecutive months and residential supported person care needs will be provided daily."

Review on 3/17/21 of client #1's MARs, from October 2020 to March 2021, revealed:
- Diazepam 10mg, take one by mouth as needed for medical and dental procedures
-On 10/9/20, Diazepam, 10mg was administered at 12pm for "severe agitation"
-No documentation the unused Diazepam was disposed of in a manner that guarded against diversion or accidental ingestion.

Review on 3/22/21 of the pharmacy's printout revealed:
-5 Of 5 Diazepam 10mg were dispensed

Review on 3/17/21 of client #2's record revealed:
-An admission date of 6/1/19
-Diagnoses of Moderate Intellectual Disability Disorder, Hypothyroidism, Hyperlipidemia, Ventral Hernia, History of Acute Renal Failure, Supra Pubic Catheter, Chronic Kidney Disease and Scoliosis.
-An assessment dated 6/1/19 noting "needs to increase skills related to self-care, domestic activities, vocational skills and community

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integration. Needs to reduce behavior disruptive to habilitation, has demonstrated difficulty with regard to food and completing tasks, will take food from the plates of others, when interrupted, will become upset, become verbally disruptive and on some occasions become physically aggressive."
-A treatment plan dated 5/31/20, noting "with 75% success rate will develop better communication skills each day with less than 5 verbal prompts for 6 consecutive months, with 65% set as a success, will work on increasing her home maintenance skills independently with 3 verbal prompts per trial for 6 consecutive months, with 70% success, will work on increasing her social skills with 5 verbal prompts per trial for 6 consecutive months, with 75% set as a success rate, will work on using appropriate mealtime manners daily with 3 verbal prompts for 6 consecutive months, with 95% set as a success rate, will work on keeping her hands sanitized during her day with 3 verbal prompts for 6 consecutive months, with 95% set as a success, will work to understand and follow community and house rules for safety with 5 verbal prompts of less per trial for 6 consecutive months, with 65% set as a success rate, will assist in picking her outfits daily with no more than 4 verbal prompts per trial for 6 consecutive months, with 65% set as a success rate and will get completely in the bed every night with no more than 8 verbal prompts per trial for 6 consecutive months."

Review on 3/17/21 of client #2's MARs, from October 2020 to March 2021, revealed:
- Diazepam 10mg, may crush one tablet with water and take by mouth prior to medical procedures or mix 2 crushed tablets with water and take by mouth prior to dental procedures or severe agitation as needed.

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V 119	Continued From page 4 -No documentation the unused Diazepam was disposed of in a manner that guarded against diversion or accidental ingestion. Review on 3/17/21 of client #2's MARs, from October 2020 to March 2021, revealed: -Diazepam 10mg was administered on October 7, 2020 at 1pm due to Catheter change. Review on 3/22/21 of the pharmacy's printout revealed: -5 Of 5 Diazepam 10mg were dispensed Review on 3/17/21 of client #3's record revealed: -An admission date of 12/4/18 -Diagnoses of Profound Intellectual Disability Disorder. Inguinal Hernia, History of Constipation, Blindness, Seizure Disorder, Cyst Posterior, Osteoporosis and Echolalia. -An assessment dated 12/4/18 noting "needs support determining his needs, help getting from here to there, help with decisions, choices, problem solving, help with options, responsibilities, risks and consequences, needs to increase his daily living, community, safety and personal skills" -A treatment plan dated 7/1/20 noting "with 75% set as the success rate, will properly dispose of his undergarments with 2 verbal prompts for 6 consecutive months, with 75% set as a success rate, will work on open and/or close the doors when entering or leaving the house with 1 verbal prompt per trial for 6 consecutive months, with 80% set as a success rate, will work towards not running from place to place with 4 verbal prompts per trial for 6 consecutive months, with 85% set as the success rate, will place laundry in the hamper with no more than 2 verbal prompts per 6 consecutive months, with 85% success rate, will develop better communication skills (pointing and	V 119		

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grunting) when asked about his needs each day with less than 3 verbal prompts for 6 consecutive months, with 90% set as a success rate, will place all dirty dishes in their designated area with 6 verbal prompts or less for 6 consecutive months and will have his personal care needs met to ensure his health, safety and well-being. This included bathing, dressing, all personal hygiene (brushing teeth), supervising his physical conditions and giving support in all activities."

Review on 3/17/21 of client #3's MARs, from October 2020 to March 2021 revealed:
-A Physician's order dated 11/18/20 for Diazepam, 10mg, take
one pill by mouth for agitation or medical appointments/procedures as needed.
-No documentation the unused Diazepam was disposed of in a manner that guarded against diversion or accidental ingestion.

Review on 3/22/21 of the pharmacy's printout revealed:
-5 Of 5 Diazepam 10mg were dispensed

Interview on 3/18/21 with the AFL Provider revealed:
-Was the only staff that administered medications to the clients.
-All 3 clients had prescriptions for Diazepam 10mg
-The Diazepam was filled every month by the pharmacist
-Was aware the Diazepam was a controlled substance.
-The unused Diazepam was disposed in coffee grounds at the end of each month
-Had no documentation to show the Diazepam was disposed of in accordance with the Controlled Substance Act.

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V 119	Continued From page 6 -Had attempted to take the unused Diazepam back to the pharmacy last month (February 2021). -The pharmacist stated they did not dispose of controlled substances. -Would discuss with the QP on how to dispose of the Diazepam in accordance to the Controlled Substance Act. -Denied using the Diazepam for personal use. Interview on 3/17/21 with the QP revealed: -Was aware clients #1, #2 and #3 had prescriptions for Diazepam 10mg -Was told the unused Diazepam had been disposed of at the end of each month -Was aware of the Controlled Substance Act guidelines -Was not aware the unused Diazepam had not been disposed of following those guidelines -The unused Diazepam should have been returned to the pharmacy each month -Would ensure, in the future, all unused Diazepam was disposed of according to the guidelines set forth in the Controlled Substance Act.	V 119		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (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. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for	V 291		

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treatment/habilitation or case management.
(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.
(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 or legal system is involved or when health or safety issues become a primary concern.

This Rule is not met as evidenced by:
Based on record reviews and interviews, the Qualified Professional failed to maintain coordination of care for 3 of 3 clients (#1, #2 and #3). The findings are:

Review on 3/17/21 of client #1's record revealed:
-An admission date of 8/15/19
-Diagnoses of Autism Spectrum with Accompanying Intellectual Impairment, Severe Intellectual Disability, Anxiety Disorder, Not Otherwise Specified, Intermittent Explosive Disorder, Left Ear Reconstruction and Bi-Lateral Tubes.
-An assessment dated 8/15/19 noting "needs to increase self-care skills, increase communication skills, increase vocational skills, encourage leisure skills and support and maintain motivation

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to participate in activities of daily living"
-A treatment plan dated 6/29/20 noting "with 50% success rate, will develop better communication skills each day with less than 3 verbal prompts for 6 consecutive months, with 75% success rate, will interact with peers at least one time a day with less than 3 verbal prompts per session for 6 consecutive months, with a 75% set as a success rate, will work on using appropriate mealtime manners and supports daily and may receive up to 5 verbal prompts per trial for 6 consecutive months, with 65% set as a success rate, will work on his oral hygiene practices by brushing his teeth in the morning and at bed time with up to 4 verbal prompts per trial for 6 consecutive months, with 95% set as a success, will work to understand and follow community and house rules for safety with 4 verbal prompts or less per trial for 6 consecutive months and residential supported person care needs will be provided daily."

Interview on 3/18/21 of client #1 revealed:
-Repeated words heard and was not able to engage in conversations

Review on 3/17/21 of client #2's record revealed:
-An admission date of 6/1/19
-Diagnoses of Moderate Intellectual Disability Disorder, Hypothyroidism, Hyperlipidemia, Ventral Hernia, History of Acute Renal Failure, Supra Pubic Catheter, Chronic Kidney Disease and Scoliosis.
-An assessment dated 6/1/19 noting "needs to increase skills related to self-care, domestic activities, vocational skills and community integration. Needs to reduce behavior disruptive to habilitation, has demonstrated difficulty with regard to food and completing tasks, will take food from the plates of others, when interrupted,

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will become upset, become verbally disruptive and on some occasions become physically aggressive."
-A treatment plan dated 5/31/20, noting "with 75% success rate will develop better communication skills each day with less than 5 verbal prompts for 6 consecutive months, with 65% set as a success, will work on increasing her home maintenance skills independently with 3 verbal prompts per trial for 6 consecutive months, with 70% success, will work on increasing her social skills with 5 verbal prompts per trial for 6 consecutive months, with 75% set as a success rate, will work on using appropriate mealtime manners daily with 3 verbal prompts for 6 consecutive months, with 95% set as a success rate, will work on keeping her hands sanitized during her day with 3 verbal prompts for 6 consecutive months, with 95% set as a success, will work to understand and follow community and house rules for safety with 5 verbal prompts of less per trial for 6 consecutive months, with 65% set as a success rate, will assist in picking her outfits daily with no more than 4 verbal prompts per trial for 6 consecutive months, with 65% set as a success rate and will get completely in the bed every night with no more than 8 verbal prompts per trial for 6 consecutive months."

Interview on 3/18/21 of client #2 revealed:
-Client #2 was non-verbal

Review on 3/17/21 of client #3's record revealed:
-An admission date of 12/4/18
-Diagnoses of Profound Intellectual Disability Disorder. Inguinal Hernia, History of Constipation, Blindness, Seizure Disorder, Cyst Posterior, Osteoporosis and Echolalia.
-An assessment dated 12/4/18 noting "needs support determining his needs, help getting from

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here to there, help with decisions, choices, problem solving, help with options, responsibilities, risks and consequences, needs to increase his daily living, community, safety and personal skills"
-A treatment plan dated 7/1/20 noting "with 75% set as the success rate, will properly dispose of his undergarments with 2 verbal prompts for 6 consecutive months, with 75% set as a success rate, will work on open and/or close the doors when entering or leaving the house with 1 verbal prompt per trial for 6 consecutive months, with 80% set as a success rate, will work towards not running from place to place with 4 verbal prompts per trial for 6 consecutive months, with 85% set as the success rate, will place laundry in the hamper with no more than 2 verbal prompts per 6 consecutive months, with 85% success rate, will develop better communication skills (pointing and grunting) when asked about his needs each day with less than 3 verbal prompts for 6 consecutive months, with 90% set as a success rate, will place all dirty dishes in their designated area with 6 verbal prompts or less for 6 consecutive months and will have his personal care needs met to ensure his health, safety and well-being. This included bathing, dressing, all personal hygiene (brushing teeth), supervising his physical conditions and giving support in all activities."

Interview on 3/18/21 of client #3 revealed:
-Client #3 was non-verbal

Review on 3/18/21 of the email correspondence between the QP and the social worker from the physician's office revealed:
-On October 27, 2020 at 3:31pm, an email from the physician's office to the QP noting "To follow up our conversation today, you may reach out to the provider (Nurse Practitioner #1)."

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V 291	Continued From page 11 -On October 27, 2020 at 4:11pm, a return email from the QP to the physician's office noting "I have received your email. Thank you for the information." -On October 29, 2020 at 9:41am, an email from the QP to the physician's office noting "I spoke with [the AFL Provider]. They recommended [an agency] as the possible home health agency for their home. Thank you for your help in this matter." -On December 10, 2020 at 8am, an email from the physician's office to the QP noting "I hope you are doing well. To follow up on our previous conversations about [the AFL facility]'s patients, As the Qualified Professional and the Registered Nurse assigned to the members of [the group home], you are an integral part of these special needs patients' care. It is important that we communicate regularly and share feedback. Our office wants to provide the best care to each of them and meet their healthcare needs timely. If you would please forward us (the primary care provider) a copy of the [AFL home] members' plan of care, I would appreciate it. Their healthcare provider will benefit from having this information to help manager their care. Are the home delivery of supplies and services currently meeting the needs of the patient with incontinence/catheter issues? Please fax pertinent information to [the physician's address and fax number]. Thank you." -On December 11, 2020 at 10:38am, an email from the QP to the physician's office noting "Hi I will be more than happy to fax those papers over. Is there anyone I need to make it attention to? I spoke with [the AFL Provider] and they currently are receiving the supplies that they need for the member with the incontinence issues. Currently the day program nurse is supporting them with this need. They are hoping to get home health	V 291		

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started to help with the needed cath maintenance. Their preferred provider is [a home health agency]. I did attempt to reach out to the provider in the office via email on November 24th to discuss the home but did not get a reply. Thank you for all of your help in navigating this home."
-On December 14, 2020 at 8:27am, an email from the physician's office to the QP noting "Thank you for responding. Please send the information to the attention of [Nurse Practitioner #2]."
-On December 14, 2020 at 8:4eam, an email from the QP to the physician's office noting "Will do. Thank you."
-On December 14, 2020 at 8:57am, an email from the physician's office to the QP noting "Please remove [a person's name] from this email thread. She was added by mistake."

Interview on 3/19/21 with the social worker from the physician's office revealed:
-Had requested the members' plans of care several times
-Had never received the information requested.

Interviews on 3/17/21 and 3/18/21 with the QP revealed:
-Was contacted by the social worker at the physician's office via email.
-Had cooperated fully with sending the physician's office the items they requested which included copies of the clients' treatment plans.
-When asked, the QP was unable to produce documentation that showed the information was sent to the physician's office.
-"I did not keep a copy of the fax transmittal sheet."
-Had not follow up with the physician's office to

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL023-214	A. BUILDING: _____ B. WING _____	03/23/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE THOMPSON HOUSE NC	119 NORTH PIEDMONT AVENU KINGS MOUNTAIN, NC 28086

(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 291	Continued From page 13 ensure the treatment plans were received. -"I did not follow up (with the physician's office) and I did not hear from them again, so I assumed things were okay ...I thought she would contact me if they needed additional information."	V 291		