

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL059-077	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/03/2021
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NAME OF PROVIDER OR SUPPLIER STAMEY HOME 1	STREET ADDRESS, CITY, STATE, ZIP CODE 180 JUSTICE ROAD MARION, NC 28752
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V 000	INITIAL COMMENTS An annual, complaint and follow up survey was completed on June 3, 2021. The complaint was unsubstantiated (Intake #NC00176930). 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 115	27G .0208 Client Services 10A NCAC 27G .0208 CLIENT SERVICES (a) Facilities that provide activities for clients shall assure that: (1) space and supervision is provided to ensure the safety and welfare of the clients; (2) activities are suitable for the ages, interests, and treatment/habilitation needs of the clients served; and (3) clients participate in planning or determining activities. (h) Facilities or programs designated or described in these Rules as "24-hour" shall make services available 24 hours a day, every day in the year, unless otherwise specified in the rule. (c) Facilities that serve or prepare meals for clients shall ensure that the meals are nutritious. (d) When clients who have a physical handicap are transported, the vehicle shall be equipped with secure adaptive equipment. (e) When two or more preschool children who require special assistance with boarding or riding in a vehicle are transported in the same vehicle, there shall be one adult, other than the driver, to assist in supervision of the children.	V 115	DHSR - Mental Health JUL 9 2021 Lic. & Cert. Section	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Almex Smith TITLE **CEO** (X6) DATE **7/1/2021**

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V 115	Continued From page 1 This Rule is not met as evidenced by: Based on observation and interview the facility failed to ensure meals were nutritious for 3 of 3 clients (Client #1, Client #2 and Client #3). The findings are: Observation of the facility at 9:00 am on 6-1-21 revealed: -The kitchen cabinet contained the following foods: 1/2 jar of peanut butter, 1/2 pack of hot dog buns, 1 container of Quick Oats, 1 1/2 containers of grits, 1 pack of Bisquick mix and a pack of blueberry muffin mix with a "best if used by" date of 5-26-18. - The kitchen cabinet contained the following condiments: 1 carton of beef stock, 2 bottles of white vinegar, 1/2 bottle of red wine vinegar, 3 bottles of vegetable oil, 8 packs of gravy mix, 2 packs of salt and pepper, and a bottle of canola oil. -The refrigerator was empty except for a zip locked bag of chopped onions, a zip locked bag of cole slaw, a zip locked bag of hot dogs and 1 bag of carrots. -The top freezer section of the refrigerator contained 1/2 carton of ice cream, 1 bag of frozen cole slaw which had a use by date of 5-10-21 and a pack of frozen broccoli with a use by date of 5-11-21. -A deep freezer contained 50 frozen individual pot pies, 1 bag of popsicles, 1 frozen turkey, 1 unsealed pack of chicken nuggets, 1 large bag of frozen vegetables with approximately 1 handful of vegetables. -There was no other food or beverages at the facility.	V 115	Groceries will be ordered on a weekly basis and the grocery date will be put on the product/s with permanent marker. All backup emergency food and water will be reviewed weekly for expirations. Live in care provider will have the assistance needed to store the food appropriately via freezer, refrigerator, or cabinets. AFL provider will try home delivery prepared meals (ie Hello Fresh) to assist with healthy eating habits and diabetes control for specific members' residing in the home. Fresh fruit and bottled water will always be made available on the counter for easy access. AFL and live in care provider will refrain from throwing out all condiments prior to full use or expiration.	6/30/2021

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V 115	<p>Continued From page 2</p> <p>Interview on 6-1-21 with Client #1 revealed: -He had a chicken sandwich from a fast food restaurant for breakfast. -Most meals were hot dogs, chicken nuggets and Ramen Noodles. -Sometimes fruit was available for the clients.</p> <p>Interview on 6-1-21 with Client #2 revealed: -He stated, "We have too many sodas here. We asked for other drinks. They buy water bottles for us and flavor packets and we have running water." -There were no groceries in the house for 7-8 days. -Staff #1 usually spent his own money to purchase food for the clients from restaurants. -Yesterday he had a sandwich and a coke from a local fast food restaurant. -Clients rarely got a "home cooked" meal. -Meals mostly consisted of Hamburger Helper and macaroni and cheese. -Vegetables were usually not provided with meals.</p> <p>Interview on 6-1-21 with Client #3 revealed: -Staff #1 made a variety of meals such as burgers, hot dogs, corn dogs, TV dinners, macaroni and cheese, chicken tenders, pizzas, Sloppy Joes, tater tot casseroles and chili. -He stated "I'm a picky eater."</p> <p>Interview on 6-1-21 with Staff #1 revealed: -Staff shopped for groceries 1-2 times every week. -He made various meals for the clients such as hot dogs, hamburgers, french fries, macaroni and cheese, corn and grilled vegetables. -He tried to give balanced meals including vegetables.</p>	V 115		

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V 115	Continued From page 3 -Groceries were scheduled to be delivered at 11:00 am today. -This grocery order took longer than normal to be delivered. -He stated, "I had enough food at the facility to make dinner for us and I can order out." Interview on 6-1-21 with Staff #2 revealed: -Groceries were ordered on a weekly basis. -Every time we get groceries, we completely clean out the cabinets and refrigerator. -He stated, "We ordered food two days ago, but the order through the app (mobile application) got messed up and caused a delay." -He sent a new order for groceries yesterday. -Groceries would be at the facility at 11:00 am today. Observation on 6-1-21 at 11:40 am revealed: -Staff #2 and an unknown individual brought several bags of groceries into the facility.	V 115		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (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.	V 118		

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V 118	<p>Continued From page 4</p> <p>(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.</p> <p>This Rule is not met as evidenced by: Based on record reviews, observation and interviews facility staff failed to follow the physician's orders and failed to keep the MAR (Medication Administration Record) current affecting 2 of 3 clients (Client #2 and Client #3). The findings are:</p> <p>Review on 6-1-21 of Client #2's record revealed: -Date of Admission: 8-30-16. -Diagnoses: Mild Intellectual Disability; Unspecified Paraphilic Disorder; Attention Deficit/Hyperactivity Disorder (ADHD); Oppositional Defiant Disorder; Personal Sexual Abuse History in Childhood; Personal History of Self-Harm. -Physicians' orders for the following medications: -An order dated 2-18-21 for Tums (antacid)</p>	V 118	<p>Live in care provider will have follow-up Medication Training by CCHC's licensed RN on 6/30/2021.</p> <p>All medications for each member will be reviewed upon pick-up and compared with the MAR for: right patient, right medication, right dose, right route and right time.</p> <p>Copies of medication orders will be kept on site for immediate reference.</p> <p>Designated staff members will accompany members on all medical appointments and relay doctor orders or any changes to the live in care provider on the same day of appointment.</p> <p>CCHC medical follow-up form will be kept in the transportation vehicle for immediate access.</p> <p>CCHC will implement a medication sign out sheet when member is staying out of the home overnight.</p> <p>CCHC RN will visit onsite to review all MARs and pill packs for accuracy. This will be done on a quarterly basis.</p>	6/30/2021

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V 118	Continued From page 5 500 milligrams (mg) chew 1 tablet orally twice daily. -An order dated 5-12-21 for Depakote (divalproex sodium) 500 mg 2 tablets orally twice daily. Review on 6-1-21 of Client #2's June 2021 MAR revealed: -Transcription for Tums 500 mg chew 1/2 tablet orally twice daily. -There were no administration instructions for route, dose, or frequency of the Depakote. Review on 6-1-21 of Client #3's record revealed: -Date of Admission: 4-26-19. -Diagnoses: Autism Spectrum Disorder; Bipolar Disorder; ADHD; Anxiety Disorder; Depressive Disorder. -Physicians' orders for the following medications: -An order dated 1-25-21 with three 30-day supply refills for clindamycin phosphate (antibiotic) apply to affected areas 1-2 times per day. Review on 6-1-21 of Client #3's June 2021 MAR revealed: -Transcription for clindamycin phosphate apply topically to affected areas 1-2 times per day. Observation on 6-1-21 at 11:20 am revealed: -The clindamycin phosphate for Client #3 could not be located at the facility. Interview on 6-1-21 with Client #3 revealed: -He had not used clindamycin phosphate in several months. Interview on 6-3-21 with the Qualified Professional (QP) revealed: -MAR's were prepared by the local pharmacy.	V 118		

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V 118	Continued From page 6 -A Registered Nurse (RN) used to review the MAR's, but the position was currently vacant. -A new RN was going to be hired to provide oversight and review the MAR's on a regular basis. This deficiency constitutes a re-cited deficiency and must be corrected within 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 interview, staff failed to maintain the facility in a safe, clean, attractive and orderly manner and failed to ensure the facility was kept free from offensive odor. The findings are: Observation during walk through of the facility on 6-1-21 at 9:00 am revealed: -There was a strong musty odor in the living room and kitchen. -A locked doorway to enter the basement which was not accessible to clients. -The basement/underspace beneath the home had a dirt floor with a sheet of plastic on top of it. -Client #3's bedroom had three empty 2 liter soft drink bottles as well as numerous bottles of other	V 736	AFL provider will make weekly walk-through visits to the home to observe for cleanliness and offensive odors. Qualified Professional will do monthly call ins to check status of home and quarterly walk throughs. New house rule will be put into place that no food or drinks will be kept in the member's bedrooms. Members will have their own assigned cabinet in the kitchen for personal food and drink storage.	6/30/2021

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V 736	Continued From page 7 beverages laying on the floor. There was also trash scattered across the floor of the bedroom. Interview on 6-3-21 with the Qualified Professional (QP) revealed: -The basement/underspace beneath the home was usually damp. -There were plans to move the facility to a new location within in the near future. -Direct care staff were responsible for maintaining cleanliness of the facility. -Staff #1 resided at the facility and should have instructed Client #3 to keep his bedroom in an orderly manner. -She was responsible for oversight of the facility. -She had not been on site at the facility due to COVID 19. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 736		
V 774	27G .0304(d)(7) Minimum Furnishings 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements: (7) Minimum furnishings for client bedrooms shall include a separate bed, bedding, pillow, bedside table, and storage for personal belongings for each client.	V 774	Each member will be purchased their own individual nightstand.	6/30/2021

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V 774	<p>Continued From page 8</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to provide minimum furnishings affecting 2 of 3 clients (Client #1 and Client #2). The findings are:</p> <p>Observation on 6-1-21 at 9:00 am revealed: -Bedroom #2 was shared between Client #1 and Client #2. -There was only 1 nightstand in the bedroom.</p> <p>Interview on 6-3-21 with the Qualified Professional (QP) revealed: -She had not made any recent visits to the facility due to COVID 19. -She was not sure why there was only 1 nightstand in the bedroom. -She planned to follow up at the facility to ensure that each client had the required bedroom furniture.</p>	V 774		
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