

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL067-157</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/27/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>GUARDIAN CARE 2</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>510 CRISSY DRIVE</b> <b>JACKSONVILLE, NC 28541</b>
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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>An annual and follow up survey was completed on July 27, 2021. Deficiencies were 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 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.</p>	V 112		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to review the treatment plan annually for 1 of 2 clients (#1). The findings are:</p> <p>Review on 07/27/21 of client #1's record revealed: -60 year old female. -Admission date of 05/2006. -Diagnoses of Schizoaffective Disorder, Mild Mental Retardation and Disorder of Kidney's, Unspecified. -No updated treatment/habilitation plan.</p> <p>Attempted to interview client #1 on 07/27/21 and client #1 did not give responses and stated she did not feel good.</p> <p>During interview on 07/27/21 the House Manger/Office Manager revealed: -Client #1 had not been authorized which was why she did not have a updated treatment plan. -The agency was responsible for client #1's treatment plan and not the Managed Care Organization. -She would ensure the treatment plan was updated.</p>	V 112		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>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</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>drugs.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <p>(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> </p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to keep the MARs current affecting one of two clients (#1). The findings are:</p> <p> </p> <p>Review on 07/27/21 of client #1's record revealed: -60 year old female. -Admission date of 05/2006.</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>-Diagnoses of Schizoaffective Disorder, Mild Mental Retardation and Disorder of Kidney's, Unspecified.</p> <p>Review on 07/27/21 of client #1's Physician order dated 06/04/21 revealed: -Omeprazole 20mg (Indigestion/Reflux) Take 1 capsule by mouth every morning.</p> <p>Observation on 07/27/21 at 11:45am of client #1's medications on hand revealed Omeprazole 20mg was in the bubble pack of medications.</p> <p>Review on 07/27/21 of client #1's July 2021 MAR revealed Omeprazole 20mg was not transcribed on the MAR and no initials were present to indicate the medication had been administered.</p> <p>Attempted interview on 07/27/21 but client #1 was unable to answer questions in reference to her medication.</p> <p>During interview on 07/27/21 the House Manager/Office Manager revealed: -She did not think the doctor refilled the medication. -She was not aware the medication was in the bubble pack. -She would contact the doctor to determine if client #1 needs to continue taking the medication.</p>	V 118		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p>	V 736		

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V 736	<p>Continued From page 4</p> <p>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:</p> <p>Observation on 07/27/21 at approximately 10:45 am revealed:</p> <ul style="list-style-type: none"> <li>- Client #2's bedroom had a smoke detector that emitted a chirping sound and was hanging from the ceiling.</li> <li>-Area above fire place in the living room on the ceiling had 3 locations that appeared to of had a water leak causing ceiling damage.</li> <li>-The windows in the front of the facility had several broken slates in the blinds.</li> <li>-Client #1's bathroom light fixture was missing 1 out of the 3 light bulbs.</li> <li>-A large patched area and not painted on the wall in the hallway.</li> </ul> <p>Interview on 07/27/21 the House Manager/Office Manager revealed:</p> <ul style="list-style-type: none"> <li>- She would ensure the areas of the facility were corrected.</li> </ul>	V 736		