

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL026-658</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/22/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CAROL'S DDA GROUP HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>334 MOORE STREET</b> <b>FAYETTEVILLE, NC 28301</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual, complaint and follow up survey was completed on July 22, 2021. The complaint was unsubstantiated (intake #NC00178221). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p>	V 000		
V 112	<p><b>27G .0205 (C-D)</b> <b>Assessment/Treatment/Habilitation Plan</b></p> <p><b>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</b></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> <ol style="list-style-type: none"> <li>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</li> <li>(2) strategies;</li> <li>(3) staff responsible;</li> <li>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</li> <li>(5) basis for evaluation or assessment of outcome achievement; and</li> <li>(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.</li> </ol>	V 112		

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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 reviews and interviews, the facility failed to develop and implement strategies to address needs and behaviors for 2 of 3 audited clients (#4, #6) and failed to assure the treatment plans were reviewed at least annually. The findings are:</p> <p>Finding #1 Review on 7/21/21 - 7/22/21 of client #4's record revealed: -39 year old male. -Admission date 5/3/01. -Diagnoses include Mild Intellectual disability, Major Depressive disorder, Glaucoma and Colostomy bag. -Last treatment/habilitation plan completed on 5/16/18. -There was no current treatment/habilitation plan.</p> <p>Interview on 7/22/21 client #4 stated: -He had lived at he facility since he was 18 years old. -He worked at a local restaurant. -He needed reminders with changing his colostomy bag.</p> <p>Finding #2 Review on 7/21/21 - 7/22/21 of client #6's record revealed: -69 year old male. -Admission date 9/5/03. -Diagnoses include Psychotic disorder, Mild Intellectual disability, Seizure disorder and Schizophrenia.</p>	V 112		

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V 112	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>-Last treatment/habilitation plan completed on 3/22/18 and reviewed on 1/8/19.</li> <li>-There was no current treatment/habilitation plan.</li> <li>-There were no goals or strategies based on client #6's needs.</li> </ul> <p>Review on 7/22/21 of an "Independent Assessment for Personal Care Services" for client #6 revealed:</p> <ul style="list-style-type: none"> <li>-Assessment date 7/6/21.</li> <li>-Extensive assistance needed with bathing and personal hygiene task, dressing tasks and toileting/incontinence management.</li> <li>-Total assistance needed with making bed, laundry task and cleaning bathroom.</li> <li>-Limited assistance with eating tasks.</li> </ul> <p>Interview on 7/22/21 client #6 stated:</p> <ul style="list-style-type: none"> <li>-He lived at the facility a long time.</li> <li>-He had not been anywhere.</li> </ul> <p>Interview on 7/22/21 staff #1 stated:</p> <ul style="list-style-type: none"> <li>-He talked with clients one on one each week to see what their goals were.</li> <li>-Client #4 was limited to some things like keeping his room clean and required redirections.</li> <li>-Client #6 was very limited and needed extreme help with bathing and getting dressed.</li> <li>-Client #6 did not attend a day program.</li> <li>-Client #6 went to the "back house" or rode with staff #2 during the day.</li> </ul> <p>Interview on 7/22/21 staff #2 stated:</p> <ul style="list-style-type: none"> <li>-Client #6 needed total care.</li> <li>-Client #6 needed his food cut into small pieces so he would not choke and had to be monitored while eating.</li> <li>-Client #6 needed help bathing.</li> <li>-It was difficult for client #6 to walk around and client #6 dragged his leg when walking.</li> </ul>	V 112		

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V 112	<p>Continued From page 3</p> <p>-Client #6 no longer went to the day program because of medical issues.</p> <p>Interview on 7/22/21 staff #3 stated: -Client #6 had extensive needs.</p> <p>Interview on 7/21/21 - 7/22/21 the Licensee/Qualified Professional stated: -The PSR completes client treatment plans. -She would complete the treatment plan if the client does not attend a PSR. -She had not updated client #4's treatment plan. -Client #4's goals would remain the same. -She had not completed a treatment plan for client #6. -Client #6 was discharged from the PSR in 2019 due to safety concerns regarding his health. -Client #6 suffered a stroke in 2019 and had a decline in his health. -Client #6 needs had changed since last treatment plan. -Client #6 had not been assessment for a higher level of care. -There were not current treatment plans for client #4 and client #6.</p>	V 112		
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 personal fund account other than at the facility. This shall include, but need not be limited to,</p>	V 542		

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V 542	<p>Continued From page 4</p> <p>investment of funds in interest-bearing accounts.</p> <p>(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"> <li>(1) assure to the client the right to deposit and withdraw money;</li> <li>(2) regulate the receipt and distribution of funds in a personal fund account;</li> <li>(3) provide for the receipt of deposits made by friends, relatives or others;</li> <li>(4) provide for the keeping of adequate financial records on all transactions affecting funds on deposit in personal fund account;</li> <li>(5) assure that a client's personal funds will be kept separate from any operating funds of the facility;</li> <li>(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;</li> <li>(7) provide for the issuance of receipts to persons depositing or withdrawing funds; and</li> <li>(8) provide the client with a quarterly accounting of his personal fund account.</li> </ol> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to manage and maintain records of client personal funds as required and provide quarterly accounting of clients' personal fund accounts affecting 1 of 3 clients (#6). The findings are:</p> <p>Review on 7/21/21 - 7/22/21 of client #6's record revealed: -69 year old male.</p>	V 542		

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V 542	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-Admission date 9/5/03.</li> <li>-Diagnoses include Psychotic disorder, Mild Intellectual disability, Seizure disorder and Schizophrenia.</li> </ul> <p>Review on 7/22/21 of the facility's beneficiary account statement revealed client #6 received \$1400 on 4/7/21.</p> <p>Interview on 7/22/21 client #6 stated:</p> <ul style="list-style-type: none"> <li>-He did not have money because he did not work.</li> <li>-Staff #1 went to the store for him.</li> </ul> <p>Interview on 7/21/21 - 7/22/21 the Licensee/Qualified Professional stated:</p> <ul style="list-style-type: none"> <li>-She met with clients in May to see how they wanted to spend their economic stimulus checks.</li> <li>-Client economic stimulus checks were deposited into a beneficiary account.</li> <li>-Economics stimulus checks were kept separate from facility operating account.</li> <li>-Clients' economic stimulus checks went to shopping, clothes, TV's and pharmacy copays.</li> <li>-Client #6 had money remaining.</li> <li>-She had not kept track of how stimulus money had been spent by each client.</li> <li>-She was unable to separate how much money each client had remaining for stimulus checks.</li> <li>-There was about \$29000 remaining in beneficiary account and whatever clients wanted she would get.</li> <li>-She had maintained personal funds logs for clients \$66 only.</li> <li>-She had not provided client #6's guardian with a quarterly account statements.</li> </ul>	V 542		