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V 000	INITIAL COMMENTS An annual and follow up survey was completed on August 13, 2021. 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 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (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. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (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.	V 112		

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V 112	Continued From page 1 This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to assure the treatment plan was consented and reviewed at least annually affecting 1 of 3 audited clients (#4). The findings are: Review on 8/13/21 of client #4's record revealed: -49 year old male. -Admission date 7/12/12. -Diagnoses of Intellectual Developmental Disorder-Moderate; Down's Syndrome; Hyperlipidemia; Gout; Urinary Retention; Aortic Regurgitation and Renal Insufficiency. -Person Centered Profile dated 11/3/20 and signed by client #4..."How Best to Support .... [Client #4]... [Client #4 has a legal guardian, his brother, to assist him with medical and contractual decisions." -"Letters of appointment Guardian of the Person" dated 3/7/13 and with appropriate seal appointing client #4's brother as his legal guardian. Interview on 8/13/21 the Executive Direction/Qualified Professional (QP) stated: -Client #4's legal guardian had normally signed his treatment plan. -She understood the legal guardian had to consent to the treatment plan.	V 112		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and	V 114		

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V 114	Continued From page 2 area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record review and interviews the facility failed to have fire and disaster drills held at least quarterly, repeated on each shift and held under conditions that simulate emergencies. The findings are: Review on 8/13/21 of facility records from August 2020-July 2021 revealed: - No disaster drills documented between 9:00pm-7:30am. - 1st quarter (8/1/20- 10/31/20) the shift was not identified on the October drill report. - 3rd quarter (2/1/21- 4/30/21) the time was not identified on the February drill report. - 4th quarter (5/1/21-7/31/21) the shift was not identified on the June drill report. - No fire drills documented between 11:15pm-7:00am. - 2nd quarter (11/1/20-1/31/21) had a missing drill for January. - 4th quarter (5/1/21- 7/31/21) the shift was not identified on the July drill report.	V 114		

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V 114	Continued From page 3 Interview on 7/22/21 the Qualified Professional stated: - The facility shifts were: -5:30am-8:30am during weekday's only. -3:00pm-10:00pm during weekday. -10:00pm- 5:30am as staff sleep shift. -5:30pm -8:30pm during weekday. -5:30pm-830pm as weekend shift. - All fire and disaster drills had been provided for review. - She understood fire and disaster drills were required to were to be held quarterly, repeated on each shift and simulate an emergency.	V 114		
V 120	27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.	V 120		

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V 120	Continued From page 4 This Rule is not met as evidenced by: Based on observations and interviews the facility failed to ensure medications were stored in a securely locked cabinet. The findings are: Observation on 8/13/21 of the facility at approximately 1:55pm revealed: - Client #2 had 1 peach colored tablet inside a souffle cup on top of his dresser in his bedroom. - An approximately 2 ounce clear empty cup. Interview on 8/13/21 client #2 stated: - He had taken all of his medication that morning. - He had not known why the medication was in his bedroom. - He takes his medications everyday. Interview on 8/13/21 the Lead Direct Support Professional stated: - Client's received their medications in the facility office from the medication cart or the medication cart is pushed to dining room. - Medications are not administered in the clients bedrooms. During interview on 8/13/21 the Qualified Professional stated: - The peach colored tablet was client #2's Levothyroxin tablet ordered as follows: Levothyroxin Tab 25MCG tablet, 1 tablet by mouth once daily. - She was not sure why the medication was on top of client #2's dresser. - She understood all medications were required to be stored in a securely locked cabinet.	V 120		

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V 290	Continued From page 5	V 290		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. (b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body. (d) In facilities which serve clients whose primary diagnosis is substance abuse dependency: (1) at least one staff member who is on	V 290		

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V 290	Continued From page 6 duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and (2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure a clients treatment or habilitation plan documented the client was capable of remaining in the community without supervision for specified periods of time affecting 3 of 3 audited clients (#1, #4 and #6). The findings are: Review on 7/28/21 of Client #2's record revealed: -67 year old male admitted 9/1/93. -Diagnoses included Intellectual Developmental Disability-Moderate, Depression, Bipolar Disorder, Osteoporosis, Vitamin D Deficiency, Macular Pucker; Hypocalema; Hypogonadism and Hypoparathyroidism. Person Centered Profile dated 1/27/21 included "What's Important to.... [Client #2]...[Client #2] enjoys taking 30 -minute unsupervised walks in the group home neighborhood...How Best To Support ....[Client #2] ....[Client #2] enjoys and should have, after notifying staff, 30-minute unsupervised walks in the...neighborhood." -No assessment to determine if client #2 is capable of being in the community unsupervised. -No specified goals, strategies or periods of time client #2 could be unsupervised in the community.	V 290		

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V 290	Continued From page 7 Interview on 7/29/21 Client #2 stated: -He had walked in the neighborhood alone sometimes and with his peers. -He enjoyed taking walks in the neighborhood. -He had not known how long his neighborhood walks had been. -A staff did not walk with him on his walk in the neighborhood. Review on 8/13/21 of client #4's record revealed: -49 year old male. -Admission date 7/12/12. -Diagnoses of Intellectual Developmental Disorder-Moderate; Down's Syndrome; Hyperlipidemia; Gout; Urinary Retention; Aortic Regurgitation and Renal Insufficiency. -Person Centered Profile dated 11/3/20..."What's Important to ....[Client #4]...He enjoys his neighborhood walks with his friend [Client #6]." -No assessment to determine if client #4 is capable of being in the community unsupervised. -No specified periods of time Client #4 could be unsupervised in the community. Interview on 7/28/21 Client #4 stated: -He had taken walks in the neighborhood with client #6. -Staff had not walked with him in the neighborhood. Review on 7/28/21 of Client #6's record revealed: -54 year old male admitted 9/2/93. Diagnoses included Downs syndrome, Intellectual Developmental Disability-Moderate, Eczema, Diminished thyroid, Cardiac murmur, Dermatitis,and Renal insufficiency. Person Centered Profile dated 3/30/21 included "What' important to...[Client #6]...he likes to exercise by walking or jogging."	V 290		

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V 290	Continued From page 8 -No Specified periods of time Client #6 could be unsupervised in the community. Interview on 7/29/21 Client #6 stated: -He had walked in the neighborhood alone and with peers. -Staff had not walked in the neighborhood with him. -He enjoyed walking. Interview on 7/29/21 Staff #2 stated: -She had worked at the facility for 6 years. -Client #6 had walked in the neighborhood. -Client #6 recently walked in the neighborhood without staff on 8/12/21. Interview on 8/13/21 the Lead Direct Support Professional stated: -Client #2 and Client #6 walked in the community without staff. Interview on 7/29/21 the Director/Licensee stated: -She understood the need to determine if the clients were capable of having unsupervised time and including it in the treatment plan.	V 290		
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.	V 736		

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V 736	Continued From page 9 This Rule is not met as evidenced by: Based on observations and interview the facility was not maintained in a safe, clean manner. The findings are: Observations during facility tour 8/13/21 at approximately 1:55 pm revealed: -The window sill in client #1's was dusty with bugs and the floor was heavily soiled with dirt and debris. -Bathroom #1's ceiling vent had heavy dust; there was two 2 ft areas of rust spots on both sides of the door frame; paint chipping from wall behind the sink; dark spots between tile in the shower; dark spots on the calking around shower; rust spots on the light fixture in ceiling; ceiling light fixture did not have a working bulb; 3 bulb light fixture above sink had 1 blown light. -Bathroom #2's ceiling vent had heavy dust; paint chipping behind the sink; ceiling light blown; nails in wall board around the sink had stained rust areas and rust streaks. -Single chair in living room had multiple stains. -The window sill in the living room had dead bugs. -There were rust spots on the ceiling vent in the living room. -The utensil drawer in the kitchen was dirty with debris. -The kitchen cabinet to the left of the stove was missing a door. -3 bulb light fixture in ceiling of client #2's bedroom had 1 blown light. -Client #2's nightstand top drawer was stained and dirty. -Client #6 had scratches on the wall behind the closet door. -Client #5's bedroom baseboards had heavy dust and there were dark stains in the carpet in front of the closet. -Client #4's bedroom had a 3 bulb ceiling fan had	V 736		

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V 736	Continued From page 10 1 blown bulb and the window sill was dirty and had heavy dust. -Client #3's bedroom window sill was had heavy dust and dead bugs; 9 drawer dresser had a missing knob on the top middle drawer; cable outlet plate cracked and broken with wires exposed; 3 drawer night stand had 2 missing knobs; 1 foot & 1/2 rugged carpet that was loose in front of the closet and a thumb size hole in the wall beside the dresser. During interview on 8/13/21 the Executive Director stated she understood the requirement for the facility to be maintained in a safe and clean manner.	V 736		