

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-586	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 08/27/2021
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NAME OF PROVIDER OR SUPPLIER RECOVERY CONNECTIONS I	STREET ADDRESS, CITY, STATE, ZIP CODE 2203 ELMWOOD AVENUE DURHAM, NC 27707
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on August 27, 2021. Deficiencies were cited.</p> <p>This facility is licensed for the following service: 10A NCAC 27G .5600 E Supervised Living for Adults with Substance Abuse Dependency.</p>	V 000		
V 107	<p>27G .0202 (A-E) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(a) All facilities shall have a written job description for the director and each staff position which:</p> <ul style="list-style-type: none"> (1) specifies the minimum level of education, competency, work experience and other qualifications for the position; (2) specifies the duties and responsibilities of the position; (3) is signed by the staff member and the supervisor; and (4) is retained in the staff member's file. <p>(b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility:</p> <ul style="list-style-type: none"> (1) is at least 18 years of age; (2) is able to read, write, understand and follow directions; (3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and (4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry. <p>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based</p>	V 107		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 107	<p>Continued From page 1</p> <p>upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure one of three audited staff (#1) met the minimum level of education requirements and had complete personnel records. The findings are:</p> <p>Review on 8/26/21 of staff #1's personnel record revealed: -Hire date of 4/7/15. -She was hired as the Facility Manager. -Job responsibilities were as a live in staff, grocery shopping, facilitating groups, administering medication, assisting clients with scheduling appointments and other administrative tasks. -There was no evidence of educational credentials.</p> <p>Interview on 8/26/21 with Staff #1 revealed:</p>	V 107		

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V 107	<p>Continued From page 2</p> <ul style="list-style-type: none"> -She is the Facility Manager. -She did not have a high diploma or GED (General Educational Development). -COVID hindered her being in school to obtain her GED. -She had started back at Durham Technical College to complete her requirements to obtain her GED. <p>Interview on 8/26/21 with Executive Director revealed:</p> <ul style="list-style-type: none"> -Staff #1 was hired with the understanding she would obtain her GED. -Staff #1 will graduate in April 2022. -Confirmed staff #1's personnel record did not include educational credentials. 	V 107		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <ul style="list-style-type: none"> (a) A written fire plan for each facility and 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. <p>This Rule is not met as evidenced by:</p>	V 114		

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V 114	<p>Continued From page 3</p> <p>Based on record review and interview the facility failed to conduct fire and disaster drills under the conditions that simulate emergencies at least quarterly and repeated for each shift. The findings are:</p> <p>Review on 8/27/21 of the facility's fire drills records revealed the following times that fire drills were completed: -There was no evidence that fire drills had been conducted on 2nd shift during the 2nd quarter of 2020. -There was no evidence that fire drills had been conducted on 3rd shift during the 1st quarter of 2021 and 3rd and 4th quarter of 2020.</p> <p>Review on 8/27/21 of the facility's disaster drills records revealed the following times that disaster drills were completed: -There was no evidence that disaster drills had been conducted on 1st shift during the 1st and 2nd quarter of 2021 and 4th quarter of 2020. -There was no evidence that disaster drills had been conducted on 3rd shift during the 1st quarter of 2021 and 3rd and 4th quarter of 2020.</p> <p>Interview on 8/27/21 with Staff #2 revealed: -The timeframe for the shifts were first shift 7am-3pm, second shift 3pm-11pm and 3rd shift 11pm-7am. -Both fire and disaster drills were completed in the facility with the clients. -She thought drills were completed on different shifts each month. -She confirmed staff failed to conduct drills under conditions that simulate emergencies under each shift on each quarter.</p>	V 114		

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V 118 V 118	Continued From page 4 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. (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. This Rule is not met as evidenced by:	V 118 V 118		

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V 118	<p>Continued From page 5</p> <p>Based on record review and interview, the facility failed to ensure clients MAR were signed off by staff after administering medication and failed to demonstrate competency for 2 of 6 current clients (client #1 and client #2). The findings are:</p> <p>Review on 8/26/21 of client #1's record revealed: -Admitted on 6/11/21. -Diagnosis of Cocaine Dependence. -Physician orders dated 6/7/21 for Enalapril Maleate 10 milligram (mg); Take 1 tablet once daily, Hydrochlorothiazide 25mg; Take 1 tablet once daily, Fluphenazine 2.5mg; Take 1 tablet every morning and take 3 tablets at bedtime and Prazosin 2mg; Take 1 capsule at bedtime. -Physician order dated 6/8/21 for Metformin 1000mg; Take 1 tablet twice daily and Ferrous Sulfate 325mg; Take 1 tablet daily. -Physician order dated 6/22/21 for Atenolol 25mg; Take 1 tablet once daily for 180 days and Methimazole 10mg; Take 2 tablet once daily for 180 days. -Physician order dated 7/20/21 for Benzotropine 0.5mg; Take 1 tablet every night and Quetiapine 50mg; Take 1 tablet at bedtime.</p> <p>Review on 8/26/21 of client #1's MAR revealed: -Staff #1 initialed another staff members initials for administering medication. -August 2021- Client was administered the above medication on 8/1 thru 8/26. -July 2021- Client was administered the above medication on 7/1/ thru 7/31. -June 2021- Client was administered the above medication on 6/11 thru 6/30.</p> <p>Review on 8/26/21 of client #2's record revealed: -Admitted on 5/6/21. -Diagnosis of Cocaine Dependence. -Physician orders dated 4/7/21 for Metformin</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>500mg; Take 1 tablet twice daily and Losartan 25mg; Take 1 tablet once daily.</p> <p>-Physician orders dated 5/5/21 for Hydroxyzine 50mg; Take 1 capsule three times daily as needed, Quetiapine 300mg; Take 1 tablet at bedtime and Divalproex 500mg; Take 3 tablets at bedtime.</p> <p>-Physician order dated 6/3/21 for Buprenorphine 8mg/Naloxone 2mg; Place 2 ½ tablet under the tongue daily.</p> <p>-Physician order dated for 6/11/21 for Donepezil 5mg; Take 1 tablet every night.</p> <p>-Physician order dated 7/12/21 Donepezil 10mg; Take 1 tablet every night.</p> <p>-Physician order dated 7/15/21 for Buprenorphine 8mg/Naloxone 2mg; Place 2 tablets under the tongue daily.</p> <p>- Physician order dated 8/12/21 for Buprenorphine 8mg/Naloxone 2mg; Place 1 ½ tablets under tongue daily and Buprenorphine 8mg/Naloxone 2mg; Place 1 tablet under tongue once daily.</p> <p>Review on 8/26/21 of client #1's MAR revealed:</p> <p>-Staff #1 initialed another staff members initials for administering medication.</p> <p>-August 2021- Client was administered the above medication on 8/1 thru 8/26.</p> <p>-July 2021- Client was administered the above medication on 7/1/ thru 7/31.</p> <p>-June 2021- Client was administered the above medication on 6/1 thru 6/30.</p> <p>Interview on 8/26/21 with staff #1 revealed:</p> <p>-She confirmed she had completed the medication administration training.</p> <p>-She thought since she did not have her GED, she could not sign off.</p> <p>-She confirmed she signed another staff member initials.</p>	V 118		

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V 118	<p>Continued From page 7</p> <p>Interview on 8/26/21 with staff #2 revealed: -She confirmed she had completed the medication administration training. -She was informed because staff #1 did not have their GED, she could not initial. -She would weekly come over to check medication and MAR. -She did not administer medications at this home.</p> <p>Interview on 8/26/21 with Executive Director revealed: -He thought staff #1 could not initial due to not having her GED. -He confirmed staff had completed the medication administration training. -He failed to ensure failed to ensure staff #1 demonstrated competency in the administration of medication.</p>	V 118		