

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL032-414</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/24/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>BREAK OUT, LLC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>412 PINELAND AVENUE DURHAM, NC 27704</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on September 24, 2021. The complaint was unsubstantiated (intake #NC00181123). Deficiencies were cited.</p> <p>The facility is licensed for the following service category: 10A NCAC 27 G .5600C Supervised Living for Adults with Developmental Disabilities</p>	V 000		
V 111	<p>27G .0205 (A-B) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to:</p> <ol style="list-style-type: none"> <li>(1) the client's presenting problem;</li> <li>(2) the client's needs and strengths;</li> <li>(3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission;</li> <li>(4) a pertinent social, family, and medical history; and</li> <li>(5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs.</li> </ol> <p>(b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter referred to as the "plan," strategies to address the client's presenting problem shall be documented.</p>	V 111		

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

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V 111	<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 ensure that an assessment was completed prior to the delivery of services affecting one of three audited clients (#1). The findings are:</p> <p>Review on 9/23/21 of Client #1's record revealed: -Admission date of 9/30/20.. -Diagnoses of Hypertension; Cerebella Hypoplasia; Autism Spectrum; Bipolar Disorder; Tobacco Dependence; Sickle Cell Trait, Hyperlipidemia. -There was no evidence of an admission assessment completed for Client #1 prior to the delivery of services.</p> <p>Interview on 9/24/21 with the Qualified Professional revealed: -She was responsible for completing the admission assessment. -She reported that she had been feeling pressured by both the hospital and the managed care organization to take Client #1 in and she had forgotten to complete the admission assessment. -She confirmed that the admission assessment for Client #1 was not inside his file.</p>	V 111		
V 121	27G .0209 (F) Medication Requirements	V 121		

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V 121	<p>Continued From page 2</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(f) Medication review:</p> <p>(1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview the facility failed to obtain drug reviews every six months for three of three clients (#1, #2 and #3) who received psychotropic drugs. The findings are:</p> <p>Review on 9/23/21 of Client #1's record revealed: -Admission date of 9/30/20.. -Diagnoses of Hypertension; Cerebella Hypoplasia; Autism Spectrum; Bipolar Disorder; Tobacco Dependence; Sickle Cell Trait, Hyperlipidemia. -Physician's order dated 8/25/21:     -Olanzapine 5 milligram (mg), one tablet at bedtime. -Physician's order dated 8/27/21:     -Divalproex Sodium 500 mg, one tablet daily.     -Divalproex Sodium 250 mg, three tablets at bedtime. -The July, August and September 2021 Medication Administration Record (MAR)</p>	V 121		

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V 121	<p>Continued From page 3</p> <p>revealed Client #1 was administered the above medications daily.</p> <p>-There was no evidence of a psychotropic drug review for Client #1's medications in the last six months.</p> <p>Review on 9/23/21 of Client #2's record revealed:</p> <p>-Admission date of 7/7/19.</p> <p>-Diagnoses of Moderate Intellectual Disability; Unspecified Mood Disorder; Impulse Control Disorder.</p> <p>-Physician's order dated 6/11/21.</p> <p>-Lorazepam 0.5 mg, Two tablets twice a day.</p> <p>-Risperidone 0.5 mg, One tablet twice a day.</p> <p>-The July, August and September 2021 Medication Administration Record (MAR) revealed Client #2 was administered the above medications daily.</p> <p>--There was no evidence of a psychotropic drug review for Client #2's medications in the last six months.</p> <p>Review on 9/23/21 of Client #3's record revealed:</p> <p>-Admission date of 7/22/16.</p> <p>-Diagnoses of Disruptive Mood Disorder; Autism Spectrum Disorder; Intellectual and Developmental Disorder; Mild.</p> <p>-Physician's order dated 8/12/21:</p> <p>-Fluoxetine 20 mg, One capsule once a day</p> <p>-Amphetamine Salt Com 20 mg, One tablet three times a day.</p> <p>-Divalproex Sodium 500mg, One tablet three times a day.</p> <p>-Benztropine Mesylate 0.5 mg, One tablet twice a day.</p> <p>-Risperidone 4 mg, One tablet twice a day.</p> <p>-The July, August and September 2021 Medication Administration Record (MAR) revealed Client #3 was administered the above medications daily.</p>	V 121		

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V 121	Continued From page 4  -There was no evidence of a psychotropic drug review for Client #3's medications in the last six months.  Interview on 9/24/21 with the Qualified Professional revealed: -Pharmacist for the group home had stopped coming out to the home to do the medications review when COVID-19 pandemic started. -She would have pharmacist review the client's psychotropic medications. -She confirmed the six months psychotropic drug review for Clients #1, #2 and #3 were not completed.	V 121		
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, the facility failed to ensure facility grounds were maintained in a clean, safe and attractive manner. The findings are:  Observation on 9/23/21 at 11:00 am of the Living Area revealed: -There was a crack between the edge of the wall and the ceiling that stretched from the living area all the way to the end of the hallway.	V 736		

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V 736	<p>Continued From page 5</p> <p>Observation on 9/23/21 at 11:05 am of Client #2's bedroom revealed: -There was an unfinished patched up work on the ceiling. It was not sanded down and painted over.</p> <p>Observation on 9/23/21 at 11:20 am of the outside area of the home revealed -Outside window frames were starting to show rot and needed to be painted over. -Section of the roof by the entrance had mildew/mold on top of the ceiling. -There was some rotten wood observed on the ceiling part in front of the house. -Front storm door was dirty/stained. -One of the sidings on the right side of the house was coming off.</p> <p>Interview on 9/24/21 at 11:00 am with the Qualified Professional revealed: -Facility owned the home. -They were responsible for maintaining the home. -They recently had a storm go by and created some damages to the roof. -They had fixed some of the damages, but still had some other things to complete inside the home. -She was unaware on what may had caused the crack on the wall that stretched from living area to the end of the hallway. -She confirmed the facility failed to ensure grounds were maintained in a clean, safe and attractive manner.</p>	V 736		