

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-059 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED R 08/11/2021 |
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| NAME OF PROVIDER OR SUPPLIER HILLSIDE COURT | STREET ADDRESS, CITY, STATE, ZIP CODE 108 HILLSIDE COURT JACKSONVILLE, NC 28540 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on August 11, 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 114 | <p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>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 and repeated on each shift. The findings are:</p> <p>Review on 8/11/21 of facility records from 7/1/20 - 6/30/21 revealed: - No disaster drills had been completed between 7/01/20 - 6/30/21. - 3rd quarter (7/01/20 - 9/30/20): No fire drills</p> | V 114 | | |

DHSR - Mental Health
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Lic. & Cert. Section

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| Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Coural Nelson</i> | TITLE <i>Vice President</i> | (X6) DATE <i>8/22/2021</i> |
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| V 114 | <p>Continued From page 1</p> <p>documented on 2nd or 3rd shifts. - 4th quarter (10/01/20 - 12/31/20): No fire drills documented on 3rd shift. - Safety Practice drills for "medical" (6 drills), "violent behavior" (5 drills), and "utility failure" (1) had been documented between 7/1/20 - 6/30/21. -6 "medical," 5 "violent behavior," and 1 "utility failure" drills had been documented between 7/1/20 - 6/30/21.</p> <p>Interview on 8/11/21 staff #1 stated: - 1st shift was 7:00am- 3pm. - 2nd shift was 3pm- 11pm. - 3rd shift was 11pm- 7am. -Weekend shifts were 7am -7pm and 7pm - 7am.</p> <p>Interview on 8/11/21 the House Manager stated: - 1st shift was 7:00am- 3pm. - 2nd shift was 3pm- 11pm. - 3rd shift was 11pm- 7am. - Most of the time weekend shifts were 7am -7pm and 7pm - 7am.</p> <p>Interview on 8/11/21 the Vice President stated: - 1st shift was 7:00am- 3pm. - 2nd shift was 3pm- 11pm. - 3rd shift was 11pm- 7am. - The facility had held the medical emergency, violent behavior, and utility failure drills to meet requirements for a voluntary accreditation organization. -She was aware from a sister facility DHSR (Division of Health Service Regulation) survey that the some of the drills required by the voluntary accreditation organization were not disaster drills. -She had "reworked" the sister facility plan to make sure disaster drills were done as required by DHSR, and would do the same for this facility. - She would review disaster drills and ensure the</p> | V 114 | <p>V114 Emergency Plan & Supplies Disaster Drills</p> <p>1. As evidenced from the review on 08/11/2021, it was determined that Nantucket Residential did fail to hold safety drills at least quarterly for each shift. After meeting with Manager of facility, the following steps have been implemented and will start on 9/1/2021.</p> <ol style="list-style-type: none"> The current scheduled calendar has been retrained and developed to follow; to ensure that all drills are held at least quarterly for each shift. The Program manager will review the safety drills monthly to ensure that drills are being conducted as scheduled. Program Manager will continue and follow up with discussing safety drills in monthly staff meetings. The manuals quarterly will be reviewed managers meetings as planned with QP and Vice President. <p>Program Manager will be responsible for ensuring that all staff follow the calendar plan and chart out drills as designed. The calendar will address shifts for 1st, 2nd, 3rd, 7a-7p, and 7p to 7am shifts.</p> |

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| V 114 | Continued From page 2 drills were reflective of disasters. - She would ensure drills were completed and documented on every shift. | V 114 | | |
| V 542 | 27F .0105(a-c) Client Rights - Client's Personal Funds 10A NCAC 27F .0105 CLIENT'S PERSONAL FUNDS (a) This Rule applies to any 24-hour facility which typically provides residential services to individual clients for more than 30 days. (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, investment of funds in interest-bearing accounts. (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: (1) assure to the client the right to deposit and withdraw money; (2) regulate the receipt and distribution of funds in a personal fund account; (3) provide for the receipt of deposits made by friends, relatives or others; (4) provide for the keeping of adequate financial records on all transactions affecting funds on deposit in personal fund account; (5) assure that a client's personal funds will be kept separate from any operating funds of the facility; (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; (7) provide for the issuance of receipts to | V 542 | <p>V 542 Client Rights- Personal Funds</p> <p>It is evident that CRS, had not fully complied with the rule as written by not understanding the full text noted in the manual.</p> <p>The following steps have been put into place for implementation.</p> <ul style="list-style-type: none"> • Vice President has instructed Accountant to provide a monthly account of off clients funding into a separate ledger for each client. • All funds will be listed for accounts receivable and accounts payable for accounting of funds. • Program Managers will receive an email of the account ledgers to provide the Guardians on a quarterly basis. • Program Manager will email or mail the ledgers to the guardians for review. <p>At anytime a guardian, request for no ledger, as in the past; the guardian will write a letter to inform Manager of not desiring to receive the ledger. ****If this does occur, the ledgers will continue to be conducted and filled away in client record or corporate office for review at anytime upon request by guardian.</p> | |

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| V 542 | <p>Continued From page 3</p> <p>persons depositing or withdrawing funds; and (8) provide the client with a quarterly accounting of his personal fund account.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to maintain adequate financial records on all transactions and provide quarterly accounting of personal funds affecting 1 of 2 audited clients (#1). The findings are:</p> <p>Review on 8/11/21 of client #1's record revealed: - 81 year-old female admitted 7/01/19. - Diagnoses included intellectual and developmental disability- severe, hyperlipidemia, hypothyroidism, chronic kidney disease, heart disease, hypertension, esophagitis, and history of recurrent melanoma.</p> <p>Review on 8/11/21 of client #1's "Consumer Funds" logs for February, March, April, and May 2021 revealed: -February 2021 Log: \$53.72 carried over from January 2021; Deposit of \$66. -March 2021 Log: \$100.01 carried over from February 2021; Deposit of \$66. -April 2021 Log: \$119.35 carried over from March 2021. Deposit of \$66 -May 2021 Log: \$161.63 carried over from April 2021; Deposit of \$66 -No deposits from Economic Impact Payments (Stimulus funds) were documented on the Consumer Fund logs.</p> <p>Review on 8/11/21 of the facility banking accounts for May 2020, January 2021, and April 2021 revealed:</p> |
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| V 542 | <p>Continued From page 4</p> <ul style="list-style-type: none"> -May 2020 statement recorded 2 Stimulus deposits on 5/28/20 for \$1,200 each. -January 2021 statement recorded 2 Stimulus deposits on 1/04/21 for \$600 each. -April 2021 statement recorded 8 Stimulus deposits on 4/07/21 for \$1,400 each. <p>Interview on 8/11/21 the House Manager stated:</p> <ul style="list-style-type: none"> -She maintained a log for client #1's funds in the home. -There was a new log sheet completed with receipts each month. -The logs were shared with client #1's guardian when requested. -She did not send a copy of client#1's Consumer Fund log to her guardian as a routine. -She estimated the last time client #1's Consumer Fund log had been sent to her guardian was probably 6 months ago. -She received \$66 a month for client #1 to spend. <p>Interview on 8/11/21 the Vice President stated:</p> <ul style="list-style-type: none"> -The facility was the payee for client #1. -The facility was not the payee for client #2. -Client #1 had a guardian. -Client #1 received 3 Stimulus checks. -All Stimulus money received for clients was deposited and maintained in one bank account; this was not the facility operating account. -From the bank account summaries it could not be determined which client received the posted deposits. -There was no ledger or document that summed up the unspent Stimulus funds for client #1. -She did not provide client #1 or her guardian with a quarterly accounting of her personal fund account to include the Stimulus funds received. -She thought the House Manager sent client #1's guardian a copy of her Consumer Fund log each month. | V 542 | | |
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| V 542 | Continued From page 5 -Client #1 had not spent any of her Stimulus funds. | V 542 | | |