Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: _ B. WING MHL0411096 09/09/2021 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3012 BRANDERWOOD DRIVE SARAH AND HATTIE'S HOME GREENSBORO, NC 27406 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 DHSR - Mental Health An annual survey was completed on 9/9/2021. Deficiencies were cited. This facility is licensed for the following service Lic. & Cert. Section category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. V 118 27G .0209 (C) Medication Requirements V 118 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 (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. Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE

FORM APPROVED Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: _ B. WING MHL0411096 09/09/2021 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3012 BRANDERWOOD DRIVE SARAH AND HATTIE'S HOME GREENSBORO, NC 27406 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) V 118 | Continued From page 1 V 118 This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure documentation of administration of medications was completed immediately following administration and that the MAR was kept current affecting 3 of 3 clients (#1, #2 & #3). The findings are: Review on 9/3/2021 of client #1's record revealed: - Admission date: 6/26/2017 - Diagnoses: Autistic Disorder; Mood Disorder; Attention Deficit-Hyperactivity Disorder (ADHD): and Moderate Intellectual Disability - Physicians orders for the following medications: - Vistaril 50 mg (milligrams), 1 capsule QAM (every morning) and 1 capsule at 1:00pm, dated The Owner will over See all MAR sociemente hours Medication was given: Documentation was as 5/13/2021: - Abilify 10mg, 1 tablet BID (twice daily), dated 8/1/2021; - Clonazepam 0.5mg, give 1 tablet midday for agitation while visiting parents' home on weekends only, dated 5/13/2021. Review on 9/3/2021 of Client #1's MARs dated 7/1/2021 to 9/3/2021 revealed:

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following:

August 2021 MARs.

- No documentation of administration of the

- Abilify at 8:00am on 7/2/2021 & 7/10/2021; and

- Vistaril at 8:00am on 7/2/2021;

at 8:00pm on 7/2/2021 & 8/12/2021; - Clonazepam was not listed on the July or

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	record revealed: - Admission date: 3/16 - Diagnoses: : Autistic Intellectual Disability Inon-food items); Seizu (ventriculoperitoneal) (procedure in which a excess cerebrospinal brain); Dysphagia; Esc Edema (aka Adult Hypand Peptic Ulcer - Physician's orders for Polyethylene glycol every evening, dated 7 Vitamin D3, 5,000 uday) at 7:00am, dated Cetirizine HCL 10m; 7/15/2021; - Fluticasone propion each nostril QHS (every dated 7/15/2021. Reviews on 9/3/2021 at MARs dated 7/1/2021; - The July to September polyethylene glycol adu "Take 1 packet daily Pfthan as ordered for dai Vitamin D was not list September 2021 MARs documentation of admidates on the August 20 - Cetirizine was not lists September 2021 MARs September 2021 MARs	and 9/7/2021 of Client #2's S/2018 Spectrum Disorder; Severe Disorder; Pica (eating ure Disorder; VP Shunt Placement shunt is placed to drain fluid from cavities in the ophagitis; Pyloric Channel pertropic Pyloric Stenosis); The following medications: 3350 powder, take 17gm 7/15/2021; nits, 1 capsule QD (every 7/15/2021; g, 1 tablet QD, dated ate nasal spray, 2 sprays in ry evening at bedtime), and 9/7/2021 of Client #2's to 9/3/2021 revealed: are MARs listed ministration directions as: RN (as needed)" rather ly use; ed on the July or s; and there was no nistration for the following 21 MAR: 7, 8, 11-31; ed on the July or s; and there was no nistration for the following 21 MAR: 3-31; e nasal spray was not	V 118	That theris a sept for the Clonater Chart is on hon that there's a MAR for the Polyettylene 9: Certaine and Chitasure p One sal sprag.	1 assured Separate 1/ Hamin A, 14 col,

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	V 118	Continued From page	3	V 118			
	 	record revealed: - Admission date: 3/16 - Diagnoses: Severe In Cerebral Palsy; and Consider - A physician's order for tablet sublingually for significant or a cluster see. Review on 9/3/2021 of 7/1/2021 to 9/3/2021 resuled: - Lorazepam for seizur July to September 202 Interview attempt on 9/1/2021 revealed: - He was non-verbal and questions regarding his element of the was non-verbal and questions regarding his element on 9/3/2021 revealed: - He was non-verbal and questions regarding his element on 9/3/2021 revealed: - He was non-verbal and questions regarding his element of the was administered his element of the Owner/Licensee (medications were corrected was admissed marks. She reviewed MARs of the properties of the reviewed MARs.	antellectual Disability; complex Partial Seizure or lorazepam 2mg, use 1 desizure lasting more than 5 dizure, dated 4/8/2019. Client #3's MARs dated devealed: des was not listed on the 1 MARs. 3/2021 with client #1 did unable to answer demedications. 3/2021 with client #2 did unable to answer demedications. with Client #3 revealed: duestions about whether demedications correctly was dith the Qualified deled: O/L) ensured that ctly entered on clients' duarterly. duarterly. dust there were blanks left		The Lovarep has been did due to the C have t had a lasting 5 min 2019. The Owner She Dwner She Nom to She Nom to She will he proper signs		

PRINTED: 09/20/2021 FORM APPROVED Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: __ B. WING MHL0411096 09/09/2021 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3012 BRANDERWOOD DRIVE SARAH AND HATTIE'S HOME GREENSBORO, NC 27406 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX COMPLETE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) V 118 Continued From page 4 V 118 Interviews on 9/3/2021 and 9/9/2021 with the O/L revealed: - She and the QP reviewed MARs for accuracy. - She should have caught the errors related to medications not being printed on the MARs. - Client #2 got medications from two separate pharmacies. - One of the Pharmacies printed out the MARs but did not include Client #2's mediations from the other pharmacy. - She would ensure that the MARs were corrected. - She believed that all three clients had been administered their medications correctly. V 736 27G .0303(c) Facility and Grounds Maintenance V 736 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. the dient Spoke with

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nails and replaced

some dangerous boards

on the grount porch This Rule is not met as evidenced by: Based on observations and interviews, the facility and its grounds were not maintained in a safe, clean, orderly manner. The findings are:

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Observation at approximately 8:45am on 9/3/2021 of the facility's exterior revealed: - Boards on the front porch had peeling paint and

Observation at approximately 4:10pm on

nails popped up in several areas.

STATE FORM

Division of Health Service Regulation STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY IDENTIFICATION NUMBER: COMPLETED A. BUILDING: B. WING _ MHL0411096 09/09/2021 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3012 BRANDERWOOD DRIVE

DALID SUMMARY STATEMENT OF DEFICIENCIES (REACH DEFICIENCY NUTS TE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) V736 Continued From page 5 9/3/2021 of the facility and its grounds revealed: - Client #1's bedroom had peeled sheetrock over an area approximately 5-feet x 3-feet There were holes beside the light switch cover plates and an electric receptacle in Client #1's bedroom that allowed access to the wiring behind the cover plates 1 of 2 window blinds in Client #2's bedroom that broken slats There was patched, but unpainted sheetrock on the wall beside the door Black duct tape covered part of the patched area The ground fault circuit interrupter (GFCI) outlet near the kitchen table had a chipped reset button and did not provide power when a charge cord was plugged in to it. Interview on 99/2021 with the Qualified Professional (QP) revealed: - Client #1 could be very destructive to property She had glues light and receptacle covers to the wall in Client #1's bedroom, but he quietly scrubbed at them with is fingernaise She had called a handyman to make repairs at the facility, but he had not started yet The property landford had not been able to look at the repairs needed because he had been sick with Covid-19.	SARAH AND HATTIE'S HOME 3012 BRANDERWOOD DRIVE GREENSBORO, NC 27406				
9/3/2021 of the facility and its grounds revealed: - Client #1's bedroom had peeled sheetrock over an area approximately 5-feet x 3-feet. - There were holes beside the light switch cover plate and an electric receptacle in Client #1's bedroom that allowed access to the wiring behind the cover plates. - 1 of 2 window blinds in Client #2's bedroom has broken slats. - There was patched, but unpainted sheetrock on the walls of Client #2's bedroom. - The bathroom had a roughly patched area of sheetrock approximately 1-foot x 1-foot on the wall beside the door. - Black duct tape covered part of the patched area. - The ground fault circuit interrupter (GFCI) outlet near the kitchen table had a chipped reset button and did not provide power when a charge cord was plugged in to it. Interview on 9/9/2021 with the Qualified Professional (QP) revealed: - She completed walk-throughs at the facility was in working order. - The Owner/Licensee (QIA) ensured that repairs were made at the facility. Interview on 9/9/2021 with the O/L revealed: - Client #1 could be very destructive to property. - She had glues light and receptacle covers to the wall in Client #1's bedroom, but he quietly scrubbed at them with is fingermals. - Client #2 would break window blinds at times. - She had called a handyman to make repairs at the facility, but he had not started yet. - The property landiord had not been able to look at the repairs needed because he had been sick	PREFIX	(EACH DEFICIENCY MUST BE PRECEDED BY FULL	PREFIX	(EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE	COMPLETE
vision of Health Service Regulation		9/3/2021 of the facility and its grounds revealed: - Client #1's bedroom had peeled sheetrock over an area approximately 5-feet x 3-feet There were holes beside the light switch cover plate and an electric receptacle in Client #1's bedroom that allowed access to the wiring behind the cover plates 1 of 2 window blinds in Client #2's bedroom has broken slats There was patched, but unpainted sheetrock on the walls of Client #2's bedroom The bathroom had a roughly patched area of sheetrock approximately 1-foot x 1-foot on the wall beside the door Black duct tape covered part of the patched area The ground fault circuit interrupter (GFCI) outlet near the kitchen table had a chipped reset button and did not provide power when a charge cord was plugged in to it. Interview on 9/9/2021 with the Qualified Professional (QP) revealed: - She completed walk-throughs at the facility AS far as she knew, everything in the facility was in working order The Owner/Licensee (O/L) ensured that repairs were made at the facility. Interview on 9/9/2021 with the O/L revealed: - Client #1 could be very destructive to property She had glues light and receptacle covers to the wall in Client #1's bedroom, but he quietly scrubbed at them with is fingernails Client #2 would break window blinds at times She had called a handyman to make repairs at the facility, but he had not started yet The property landlord had not been able to look at the repairs needed because he had been sick with Covid-19.		Sheet nock and party sheet Cover was Sheet noon has been the placed the bathroom sheet has been her back the bathroom sheet has been her placed the bathroom sheet her her pla	Les l

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