

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL096-062</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>01/31/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SCI-SIMMONS</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>801 SIMMONS STREET</b> <b>GOLDSBORO, NC 27530</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on January 31, 2022. 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> <p>The survey sample consisted of audits of 2 current clients and 1 former client.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <p>(5) Client requests for medication changes or</p>	V 118		

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

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V 118	<p>Continued From page 1</p> <p>checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on record reviews and observations the facility failed to administer medications as ordered by a physician and to keep MARs current affecting 1 of 1 audited former client (FC) (FC#5). The findings are:</p> <p>Review on 1/27/22 of FC#5's record revealed:</p> <ul style="list-style-type: none"> <li>- 51 year old male</li> <li>- Admitted 7/09/14.</li> <li>- Discharged 1/26/22</li> <li>- Diagnoses included Intellectual/Developmental Disability, moderate and Mental Disorder, unspecified.</li> <li>- Physician's orders signed and dated 1/19/22 for: Seroquel (quetiapine, anti-psychotic) 200 milligrams (mg) in the morning; 200 mg at noon, 100 mg at 4:00 pm, and 300 milligrams at bedtime. Ativan (lorazepam, sedative) 2 mg in the morning, 1 mg at noon, 1 mg at 4:00 pm, and 2 mg at bedtime; hold if too sedated.</li> </ul> <p>Review on 1/27/22 of FC#5's MAR for January 2022 revealed:</p> <ul style="list-style-type: none"> <li>- Pre-printed transcription for quetiapine 100 mg "Take 1 tablet by mouth once daily (4pm); with "D/C 1-26-22" handwritten.</li> <li>- Handwritten transcription for quetiapine 200 mg "Take 1 tab (tablet) every day 4 pm."</li> </ul>	V 118		

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V 118	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>- Pre-printed transcription for quetiapine 200 mg "Take 1 tablet by mouth once daily at bedtime (8pm)."</li> <li>- Pre-printed transcription for lorazepam 1 mg "Take 1 tablet by mouth four times daily . . . (8am)."</li> <li>- Staff initials indicated administration of quetiapine 100 mg at 4:00 pm 1/19/22 - 1/25/22 and 200 mg at 8:00 pm 1/19/22 - 1/26/22.</li> <li>- Staff initials indicated administration of lorazepam 1 mg at 8:00 am 1/19/22 - 1/26/22.</li> </ul> <p>During interview on 1/27/22 FC#5 stated when he lived in the facility, staff gave him his medications every day.</p> <p>During interview on 1/27/22 the Group Home Director stated the Physician's orders signed 1/19/22 were the most recent orders. The handwriting on the January MAR was her handwriting. She would get clarification from the Physician regarding the medication dosages ordered.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		
V 363	<p>G.S. 122C-61 Treatment rights in 24-hour facilities.</p> <p>§ 122C-61. Treatment rights in 24-hour facilities. In addition to the rights set forth in G.S. 122C-57, each client who is receiving services at a 24-hour facility has the following rights:</p> <p>(1) The right to receive necessary treatment for and prevention of physical ailments based upon the client's condition and projected length of stay. The facility may seek to collect appropriate reimbursement for its costs in providing the</p>	V 363		

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V 363	<p>Continued From page 3</p> <p>treatment and prevention; and</p> <p>(2) The right to have, as soon as practical during treatment or habilitation but not later than the time of discharge, an individualized written discharge plan containing recommendations for further services designed to enable the client to live as normally as possible. A discharge plan may not be required when it is not feasible because of an unanticipated discontinuation of a client's treatment. With the consent of the client or his legally responsible person, the professionals responsible for the plans shall contact appropriate agencies at the client's destination or in his home community before formulating the recommendations. A copy of the plan shall be furnished to the client or to his legally responsible person and, with the consent of the client, to the client's next of kin. (1973, c. 475, s. 1; c. 1436, ss. 6, 7; 1981, c. 328, ss. 1, 2; 1985, c. 589, s. 2.)</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to implement an individualized written discharge plan containing recommendations for further services designed to enable the client to live as normally as possible affecting 1 of 1 audited former client (FC) (FC #5). The findings are:</p> <p>Review on 1/27/22 of FC#5's record revealed:</p> <ul style="list-style-type: none"> <li>- 51 year old male</li> <li>- Admitted 7/09/14.</li> <li>- Discharged 1/26/22</li> <li>- Diagnoses included Intellectual/Developmental Disability, moderate and Mental Disorder, unspecified.</li> </ul>	V 363		

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V 363	<p>Continued From page 4</p> <ul style="list-style-type: none"> <li>- No documented discharge plan.</li> </ul> <p>During interview on 1/27/22 FC#5 stated:</p> <ul style="list-style-type: none"> <li>- He moved out of the facility "a long time ago."</li> <li>- He moved to a sister facility because a peer was "lying on staff."</li> </ul> <p>During interview on 1/27/22 the Qualified Professional stated:</p> <ul style="list-style-type: none"> <li>- Moving to a sister facility was FC#5's choice and his Guardian agreed to the move.</li> <li>- She was not aware of the requirement of a written discharge plan for clients moving to sister facilities.</li> </ul>	V 363		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews the facility was not maintained in a clean, attractive manner. The findings are:</p> <p>Observation of the facility on 1/27/22 at approximately 11:00 am revealed:</p> <ul style="list-style-type: none"> <li>- The trim molding at the base of the shower in the hall bathroom was broken.</li> <li>- Brown stains on the outside of the shower wall.</li> <li>- The vinyl floor covering in the hall bathroom was</li> </ul>	V 736		

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V 736	Continued From page 5  bubbling up from the underlayment. - The seams in the shower walls and the shower curtain liner had black stains consistent with mildew. - The ceiling exhaust vent was heavily dusty and the fan motor was very loud when turned on. - Client #1's bedroom and bathroom were noticeably cooler than other rooms in the facility; the bathroom had no visible air register. - Client #3's bedroom was noticeably warmer than other rooms in the facility. - Client #3's headboard had a heavy coating of dust. - The air return grate in the hallway had a heavy, dark gray coating of dust.  During interview on 1/27/22 the Qualified Professional stated: - She was aware of the broken molding in the hall bathroom. - She agreed the mildew stains in the hall bathroom and the dusty surfaces throughout the facility needed to be cleaned. - Some rooms in the facility were warmer than others; there did not seem to be an air vent in client #1's bathroom; the facility is an old structure.	V 736		