

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL074-246 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED R 01/28/2022 |
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| NAME OF PROVIDER OR SUPPLIER PARADIGM VI | STREET ADDRESS, CITY, STATE, ZIP CODE 4558 REEDY BRANCH ROAD WINTERVILLE, NC 28590 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on January 28, 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 3 current clients.</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 interview, the facility failed to ensure fire and disaster drills were held quarterly and repeated on each shift. The findings are:</p> <p>Review on 1/28/22 of the facility's fire and disaster drill documentation revealed:</p> | V 114 | | |

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

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| V 114 | <p>Continued From page 1</p> <ul style="list-style-type: none"> -No fire drill documented for 2nd shift for the 4th quarter October 2021 - December 2021. -No disaster drill documented for 2nd shift for the 1st quarter January 2021 - March 2021. -No disaster drill documented for 2nd shift for the 4th quarter October 2021 - December 2021. <p>During interview on 1/28/22 the Qualified Professional stated:</p> <ul style="list-style-type: none"> -The facility operated with three weekday shifts: <ul style="list-style-type: none"> - 1st 7:00 am - 3:00 pm; 7:30 am- 3:30pm; 8:00am - 4:00pm; 7:00am - 7:00pm - 2nd 3:00 pm - 11:00 pm; 7:00pm - 7:00am - 3rd 11:00 pm - 7:00 am -Weekend staff worked 12 hour shifts: 7:00 am - 7:00 pm, and 7:00 pm - 7:00 am. -Fire and disaster drills were held monthly on all shifts. -She understood that fire and disaster drills were held quarterly and repeated on each shift. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p> | V 114 | | |
| V 118 | <p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</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,</p> | V 118 | | |

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| V 118 | <p>Continued From page 2</p> <p>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:</p> <ul style="list-style-type: none"> (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. <p>(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.</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 3 audited clients (#1). The findings are:</p> <p>Review on 1/27/22 of client #1's record revealed:</p> <ul style="list-style-type: none"> -52 year old male -Admitted 3/11/69. -Diagnoses included Intellectual/Developmental Disability- Profound, Psychotic Disorder and Seizure Disorder. - Physician's orders signed and dated 11/19/21 for: <p>Milk of magnesia suspension (constipation) 30</p> | V 118 | | |

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| V 118 | Continued From page 3 milliliters (ml) at bedtime at 8:00pm. Review on 1/27/22 of client #1's MAR for November 2021 and January 2022 revealed: -No documentation for milk of magnesia 30 ml for November 1, 2021 - November 30, 2021. -No documentation for milk of magnesia 30 ml for January 1, 2022 - January 31, 2022. -No documentation of reasons why the milk of magnesia was missed. Interview on 1/27/22 - 1/28/22 the Qualified Professional stated: -She did not know why client #1 had not received the milk of magnesia. -She would discuss the medication with the physician. -She understand medications were to be administered as ordered. | V 118 | | |
| V 123 | 27G .0209 (H) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (h) Medication errors. Drug administration errors and significant adverse drug reactions shall be reported immediately to a physician or pharmacist. An entry of the drug administered and the drug reaction shall be properly recorded in the drug record. A client's refusal of a drug shall be charted. . This Rule is not met as evidenced by: | V 123 | | |

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| V 123 | <p>Continued From page 4</p> <p>Based on record reviews and interviews, the facility failed to notify the physician or pharmacist immediately of medication errors and documented refusals affecting 1 of 3 clients audited (#1). The findings are:</p> <p>Finding #1: Review on 1/27/22 of client #1's record revealed: -52 year old male -Admitted 3/14/14. -Diagnoses included Intellectual/Developmental Disability- Profound, Psychotic Disorder and Seizure Disorder. - Physician's orders signed and dated 11/19/21 for: Milk of magnesia suspension (constipation) 30 milliliters (ml) at bedtime at 8:00pm. -There was no documentation a pharmacist or the client's physician had been notified immediately when a medication had been missed.</p> <p>Review on 1/27/22 of client #1's MAR for November 2021 and January 2022 revealed: -No documentation for milk of magnesia 30 ml for November 1, 2021 - November 30, 2021. -No documentation for milk of magnesia 30 ml for January 1, 2022 - January 31, 2022. -No documentation of reasons why the milk of magnesia was not given. -No documented refusals.</p> <p>Attempted interview on 1/27/22 with client #1 was unsuccessful due to his diagnoses.</p> <p>Interview on 1/27/22 - 1/28/22 the Qualified Professional stated: -She had not contacted the prescribing physician or pharmacist regarding client #1 not receiving</p> | V 123 | | |

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| V 123 | Continued From page 5 the milk of magnesia. -Client #1 had not refused the milk of magnesia medication. -She did not know why client #1's November 2021 and January 2022 MAR for the milk of magnesia had not been documented. -She would discuss the medication with the physician. -She understand medications were to be administered as ordered. | V 123 | | |
| 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 was not maintained in a safe, clean, attractive and orderly manner. The findings are: Observation on 1/27/22 at approximately 10:20am revealed: -In client #5 and client #6's bedroom, client #5's box spring had a hole on the right side that was approximately 2 1/2 inches in size and her 7 drawer chest was missing the 3rd and 4th handles from the drawers; client #6 had a 6 drawer dresser that was missing the handle on the 3rd drawer on the right side. -The bathroom inside client #5 and client #6's | V 736 | | |

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| V 736 | <p>Continued From page 6</p> <p>bedroom had a thick black residue inside the shower along the door, the shoe molding outside of the shower on the floor was discolored and separated from the shower; the shower door had a black residue on the outside of the door; molding at the ceiling of the shower separated from wall and the sink had a crack in the base that was approximately 12 inches long.</p> <p>-A cracked wall receptacle cover behind the couch in the living room; long dark scrapes on the wall by the window in the living room and the window sill behind the couch was dusty and had dead bugs.</p> <p>-A wall receptacle cover by the door in the kitchen was cracked.</p> <p>-Client #2 had a light fixture had spider on the outside and inside of the and spider webs along the ceiling of his bedroom.</p> <p>-Client #1 had heavy dust on the floor behind his 5 drawer dresser and on top of the dresser, dark marks along the right side of the wall and heavy dust and dirt under his bed in his bedroom.</p> <p>-Client #3's five drawer chest was missing a knob on the 1st drawer.</p> <p>-Client #4's 5 drawer chest was missing a knob on the right side and the window sill by his bed had a black residue in it.</p> <p>-Client #3 and #4's bathroom had a 3 bulb light fixture with 2 bulbs not working; paint was chipping on the cabinet door under the sink; the shower curtain rod was rusty.</p> <p>-The hall bathroom had a mat in the tub that was discolored with dark stains; an approximately 3 inch hole on the back side of the bathroom door; the return air vent had heavy dust and there were two 4 light fixtures that had 2 lights not working in each.</p> | V 736 | | |

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| V 736 | <p>Continued From page 7</p> <p>During interview on 09/01/21 the Program Manager revealed:</p> <ul style="list-style-type: none"> -The sister facility had been remodeled and a lot of work had been completed. -The Licensee was doing one house at a time and the facility needed a lot of updating due to being an older home. -The updates for the facility should begin soon. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p> | V 736 | | |