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| V 000 | INITIAL COMMENTS<br><br>An annual and follow-up survey was completed on March 10, 2022. Deficiencies were cited.<br><br>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.<br><br>The survey sample consisted of audits or 3 current clients. | V 000 | | |
| V 113 | 27G .0206 Client Records<br><br>10A NCAC 27G .0206 CLIENT RECORDS<br>(a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to:<br>(1) an identification face sheet which includes:<br>(A) name (last, first, middle, maiden);<br>(B) client record number;<br>(C) date of birth;<br>(D) race, gender and marital status;<br>(E) admission date;<br>(F) discharge date;<br>(2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV;<br>(3) documentation of the screening and assessment;<br>(4) treatment/habilitation or service plan;<br>(5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician;<br>(6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician;<br>(7) documentation of services provided; | V 113 | | |

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| V 113 | Continued From page 1<br>(8) documentation of progress toward outcomes;<br>(9) if applicable:<br>(A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM);<br>(B) medication orders;<br>(C) orders and copies of lab tests; and<br>(D) documentation of medication and administration errors and adverse drug reactions.<br>(b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.<br><br>This Rule is not met as evidenced by:<br>Based on records review and interview, the facility failed to ensure records were complete for one of three audited clients (#2). The findings are:<br><br>Review on 3/10/22 of Client #2's record revealed:<br>-Admission date of 7/2/18.<br>-Diagnosis of Schizophrenia.<br>-No documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician.<br><br>Interview on 3/10/22 with Staff #1 revealed:<br>-The Qualified Professional was responsible for obtaining a signed statement from Client #2 to seek emergency care.<br>-He confirmed that there was no documentation of a signed statement from the client granting permission to seek emergency care from a | V 113 | | |

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| V 113 | Continued From page 2<br>hospital or physician in Client #2's file. | V 113 | | |
| V 114 | 27G .0207 Emergency Plans and Supplies<br><br>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES<br>(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.<br>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.<br>(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.<br>(d) Each facility shall have basic first aid supplies accessible for use.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview, the facility failed to conduct fire and disaster drills under conditions that simulate emergencies at least quarterly and repeated for each shift. The findings are:<br><br>Record review on 3/10/22 of the facility's fire drill log revealed:<br>-11/30/21- 2nd shift<br>-12/8/21- 1st shift<br>-11/5/21- 3rd shift<br>-11/13/21- 2nd shift<br>-10/21/21- 1st shift<br>-10/21/21- 1st shift<br>-12/17/21 3rd shift | V 114 | | |

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| V 114 | Continued From page 3<br>-12/29/21- 9:4-5 am- 1st shift<br>-1/15/22-8:41 -am- 1st shift<br>-1/28/22-2:11 -pm- 1st shift<br>-2/11/22-7:10 pm- 2nd shift<br>-2/25/22-6:40 pm- 2nd shift<br>-3/11/22-10:11 am- 1st shift<br>-There was no evidence that fire drills had been conducted on 1st , 2nd and 3rd shift for the second quarter of 2021.<br>-There was no evidence that fire drills had been conducted on 1st , 2nd and 3rd shift for the third quarter of 2021.<br><br>Record review on 3/10/22 of the facility's disaster drill log revealed:<br>-There were no disaster drills performed on 2021.<br>-There was no evidence that disaster drills had been conducted on 1st, 2nd and 3rd shift for the first, second, third and fourth quarter of 2021.<br><br>Interview on 3/10/22 with the Staff #1 revealed:<br>-Although he was a live-in staff, house operated under three shifts.<br>-He was under the impression that fire and disaster drills had to be conducted monthly regardless of shift.<br>-He was not aware that a fire and a disaster drill had to be performed for each shift and for each quarter.<br>-He confirmed facility failed to conduct fire and disaster drills under conditions that simulate emergencies under each shift on each quarter. | V 114 | | |
| V 118 | 27G .0209 (C) Medication Requirements<br><br>10A NCAC 27G .0209 MEDICATION REQUIREMENTS<br>(c) Medication administration:<br>(1) Prescription or non-prescription drugs shall | V 118 | | |

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| V 118 | Continued From page 4 | V 118 | | |

only be administered to a client on the written order of a person authorized by law to prescribe drugs.
(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.

This Rule is not met as evidenced by:
Based on record review, observation, and interview the facility failed to: A) Ensure medication was available according to the physician order for one of three audited clients (#1); B) Ensure the Medication Administration Record (MAR) was kept current affecting one of

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| V 118 | Continued From page 5 | V 118 | | |

three audited clients (#2) and C) to have updated physician orders for administered medications affecting one of three audited clients (#2.) The findings are

The following is evidence that facility failed to ensure medication was available:

Review on 3/10/22 of Client # 1's record revealed:
-Admission date of 10/20/09.
-Diagnoses of Paranoid Schizophrenia; Hypertension; Dry Skin; History of Prostate Cancer.

Review on 3/10/22 of Client #1's physician's order dated 5/6/21 revealed:
-Ativan 2 mg, one tablet twice a day for agitation.

Observation on 3/10/22 at 9:50 am of Client #1's medication revealed:
-There was a bubble package with a dispensing date of 9/3/20 containing Ativan 2 mg date with 4 pills left.

Review on 3/10/22 of Client #1's MAR for January 2022 through March 2022 revealed:
-Medication had been marked as given twice daily from January 2022 Though March 10, 2022.

The following is evidence that facility failed to ensure the MAR was kept current and physician orders were updated:

Review on 3/10/22 of Client #2's record revealed:
-Admission date 7/2/18.
-Diagnosis of Schizophrenia.

Review on 3/10/22 at 10:30 am of Client #2's physician order revealed:

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| V 118 | Continued From page 6<br>Order (FI2) dated 5/14/21 revealed:<br>Ventolin 90 mcg Inhaler; inhale 2 puffs every 6 hours as needed,was scratched off and signed by the physician. There were no new orders from the physician at the house.<br>Order dated 10/5/21:<br>-Trazodone 100 mg, take one tablet every night at bedtime.<br><br>Observation on 3/10/21 at 10:30 am of Client #2's medications revealed:<br>-Ventolin 90 mcg was available and dispensed on 2/9/22.<br>-Trazodone 100 mg was available.<br><br>Review on 3/10/22 of Client #2's MARs for January 2022 through March 2022 revealed:<br>-January 2022:<br>-Albuterol 90 mcg was marked as given from January 1-31.<br>-Trazodone 100 mg had blanks from January 1-31.<br><br>Interview on 3/10/22 with Staff #1 revealed:<br>-Facility recently changed pharmacies.<br>-There had been a mess up on one of the medications and agency's medical staff had reviewed them and took some packages to be redone at the pharmacy to be repackaged.<br>-He was not able to tell which were the packages that had been taken.<br>-He continued to give Client #1 medication from old package.<br>-He was not aware that it was an old package as he did not check on the date.<br>-Regarding Client #2's Trazodone, he was sure that the medication had been given to him, but acknowledged that he made a mistake and did not marked it as given.<br>-Regarding Client #2's Ventolin, he was not aware | V 118 | | |

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| V 118 | Continued From page 7 | V 118 | | |

that the physician had scratched off the medication on his last FI2.
-Medication was an "as needed" medication.

Interview on 3/10/22 with the Administrator revealed:
-She was not aware that Client #1's new Ativan package was not at the facility.
-She telephoned pharmacist and was informed that the Ativan was packaged and sent on 2/11/22.
-New pharmacy renewed all the client's medications for the first month by just looking at the MAR from previous pharmacy.
-New pharmacy was only going to do this for one month as they would need physician orders for the next month.
-Staff at the house were responsible for completing the MAR correctly and for checking for errors.
-Staff at the house were responsible for signing off and checking the client's medications whenever it arrived from the pharmacy.
-She acknowledged that the facility failed to ensure medication was available according to the physician order for one of three audited clients (#1);
-She acknowledged the facility failed to ensure the Medication Administration Record (MAR) was kept current for client #2
-She acknowledged the facility failed to have updated physician orders for administered medications affecting one of three audited clients (#2.)

This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.

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| V 736 | Continued From page 8 | V 736 | | |
| V 736 | 27G .0303(c) Facility and Grounds Maintenance<br><br>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS<br>(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.<br><br>This Rule is not met as evidenced by:<br>Based on observation and interview, the facility failed to ensure facility grounds were maintained in a clean, safe and attractive manner. The findings are:<br><br>Observation on 3/10/22 at 12:35 PM of the Living Room revealed:<br>-Front entrance door was dirty/stained both inside and outside.<br>-Closet door next to entrance door had patch up work that was unfinished and was cracked. Needed to be refinished and painted.<br>-There were holes on top of the windows from previous curtain racks.<br>-The carpet at the facility was old, worn down and stained.<br><br>Observation on 3/10/22 at 12:38 PM of the Hall Bathroom revealed:<br>-Mica from side of the sink cabinet was missing and exposing the compressed wood.<br>-The bottom hinge from door underneath the sink cabinet was rusted and broken.<br>-Bottom of the sink cabinet had water damage and wood was rotten.<br>-Bathroom door frame was dirty/stained. | V 736 | | |

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| V 736 | Continued From page 9<br>-Inside of the bathroom door had parts of the wood panel stripped off.<br><br>Observation on 3/10/22 at 12:43 PM of Clients #1 and #2's bedroom revealed:<br>-Top of dresser was worn down exposing the compressed wood.<br>-Air conditioning vent on top of the ceiling was lose and hanging from one side.<br><br>Observation on 3/10/22 at 12:45 PM of the Bathroom inside Clients #1 and #2's bedroom revealed:<br>-Vent extractor fan was rubbing and significantly loud.<br>-Side mica from sink cabinet was bubbled out exposing compressed wood.<br>-Bathroom door had a hole where handle was supposed to be (handle was missing.)<br>-Door was dirty/stained.<br><br>Observation on 3/10/22 at 12:50 PM of the Outside of the house revealed:<br>-Storm door leading to the back porch was missing its handle.<br>-Several items on the back porch that needed to be thrown away (old medication cart, fax machine, vacuum, Floor buffing machine).<br>-Several items on yard needed to be thrown out (Microwave oven, table frame.)<br>-There were two parked vehicles on the back of the yard.<br><br>Interview on 3/2/22 with Staff #1 revealed:<br>-Facility was responsible for making necessary repairs.<br>-He was aware that the carpet needed to be changed. He had informed management about it.<br>-He was aware that the sink cabinets in the bathrooms were damaged. | V 736 | | |

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| V 736 | Continued From page 10<br>-He was aware of things on the back porch that needed to be thrown away.<br>-Two vehicles parked in the back belonged to him and he would have them towed out of the facility.<br>-He confirmed facility failed to ensure grounds were maintained in a clean, safe and attractive manner.<br><br>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days. | V 736 | | |