

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-902 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED R-C 04/18/2022 |
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| NAME OF PROVIDER OR SUPPLIER RUSMED 1 | STREET ADDRESS, CITY, STATE, ZIP CODE 2104 WINNIE PLACE RALEIGH, NC 27603 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on 4/18/22. The complaint was substantiated Intake #NC00184867. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 clients.</p> | V 000 | | |
| V 108 | <p>27G .0202 (F-I) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <p>(1) general organizational orientation;</p> <p>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</p> <p>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</p> <p>(4) training in infectious diseases and bloodborne pathogens.</p> <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their</p> | V 108 | | |

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

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| V 108 | <p>Continued From page 1</p> <p>equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to provide training for 1 of 1 audited staff (#1) to meet the mh/dd needs of the client as specified in the treatment plan. The findings are:</p> <p>Review on 4/18/22 of staff #1's record revealed:</p> <ul style="list-style-type: none"> - hire date of 1/5/22 - no documented training for clients with Autism <p>Review on 4/12/22 of client #2's record revealed:</p> <ul style="list-style-type: none"> - admitted 10/31/14 - diagnoses of Autism, Attention Deficit Hyperactivity Disorder <p>Review on 4/12/22 of client #3's record revealed:</p> <ul style="list-style-type: none"> - admitted 10/6/21 - diagnoses of Severe Intellectual Developmental Disorder, Autism, Type II Diabetes and Obstructed Sleep Apnea <p>Observation on 4/12/22 between 1:27pm & 4:05pm revealed:</p> <ul style="list-style-type: none"> - 1:27pm client #3 would act as if he cried and then immediately stop the cry..."I (client #3) need to stop so I get reward"...would start to whine | V 108 | | |

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| V 108 | <p>Continued From page 2</p> <p>again...</p> <ul style="list-style-type: none"> - 3:02pm: client #1 in the living room area ...hollered for House Manager (HM#1) & state he (client #2) hitting me. HM#1 requested client #1 to go to his bedroom to keep from being hit by client #2. HM #1 requested client #2 to come to him. Client #2 hit HM#1 with closed fist Client #2 was requested to go to his bedroom. Client #2 does not move. Staff #1 and HM#1 escorted him upstairs and 10 minutes later, client #1 came downstairs and state "he (client #2) hit me." - 4:05pm - client #2 came into the kitchen area and hit surveyor with closed fist on the shoulder. 3 staff were in the kitchen at the time. Staff #1 sat at a desk, staff #2 assisted the surveyor with paper work and HM#1 looked in file cabinet in the kitchen area <p>During interview on 4/14/22 staff #1 reported:</p> <ul style="list-style-type: none"> - had Autism training with a gentlemen but do not recall name or title - had worked with Autism clients in the past - Autism clients will make noises, yell, scream and hit - client #3 may have 1 good day out of the week - behaviors: will put holes in the wall, may hit himself or others & had broke 3 beds since January 2022 - she had to do a lot of verbal prompting <p>During interview on 4/14/22 staff #3 reported:</p> <ul style="list-style-type: none"> - started at the facility February 2022 - Autism training was provided at the day program - Autism clients would steal, some nonverbal & some verbal - client #3 had put several holes in the walls <p>During interview on 4/14/22 House Manager #2</p> | V 108 | | |

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| V 108 | Continued From page 3 reported: - client #3 had put several holes in walls - broke a door on the transportation van - would give verbal prompting & allow them to calm down - client #2 & client #3 fed off each others behaviors - Autism training was provided in January 2022 by facility During interview on 4/18/22 the Human Resource Operational Manager reported: - aware of client #3's behaviors of hitting, stomping and holes in the walls - in March 2022 an email went out to staff for online training in Autism provided by a psychiatrist - some staff completed the training and some still have not - the Licensee would be notified once everyone completed the Autism training - she also located an Autism training at a nearby college & planned to sign staff up for the training - videos and discussion of Autism were provided to staff but not documented | V 108 | | |
| V 118 | 27G .0209 (C) Medication Requirements 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 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 | V 118 | | |

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| V 118 | <p>Continued From page 4</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to administer medication on the written order of a physician for 2 of 3 audited clients (#2 & #3). The findings are:</p> <p>A. Review on 4/12/22 of client #2's record revealed: - admitted 10/31/14 - diagnoses of Autism, Attention Deficit Hyperactivity Disorder - FL2 dated 12/5/19: Divalproex 500mg (milligram) twice a day (can treat bipolar)</p> | V 118 | | |

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| V 118 | <p>Continued From page 5</p> <p>Review on 4/12/22 of an April 2022 MAR revealed:</p> <ul style="list-style-type: none"> - no staff initials documented at bedtime on 4/11/22 <p>B. Review on 4/12/22 of client #3's record revealed:</p> <ul style="list-style-type: none"> - admitted 10/6/21 - diagnoses of Severe Intellectual Developmental Disorder, Autism, Type II Diabetes and Obstructed Sleep Apnea - no physician orders for the following medications: Quetiapine 400mg twice (BID) a day (treat bipolar), Metformin 1000mg BID (diabetes), Olanzapine 20mg morning & bedtime (mental disorders), Lorazepam 1mg BID (anxiety) and Adderal 20mg twice a day (ADHD) <p>Review on 4/12/22 of client #3's April 2022 MAR revealed no staff initials for the following:</p> <ul style="list-style-type: none"> - Metformin - 4/1/22 - 4/2/22 and no initials on 4/3/22 in am - Lorazepam - 4/1/22 - 4/2/22 & 4/11/22 <p>During interview on 4/14/22 House Manager #2 reported:</p> <ul style="list-style-type: none"> - she and the HM #1 reviewed MARs for accuracy - last reviewed MARs Sunday (4/10/22) when she worked - HM #2 made her aware she forgot to sign MARs on 4/11/22 - client #3 had behaviors and she forgot to sign MAR <p>During interview on 4/18/22 the Human Resource Operational Manager reported:</p> <ul style="list-style-type: none"> - client #3's FL2 had been requested several times from medical records & had not been received | V 118 | | |

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| V 118 | Continued From page 6 - planned to hire a Registered Nurse to review medications & MARs for accuracy Due to the failure to accurately document medication administration, it could not be determined if clients received their medications as ordered by the physician. This deficiency constitutes a recited deficiency and must be corrected within 30 days. | V 118 | | |
| 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 failed to maintain the facility in a safe, clean, attractive and orderly manner. The findings are: Observation on 4/12/22 of the tour of the facility given by House Manager (HM#1) at 1:16pm revealed: all client bedrooms were upstairs client #1's bedroom revealed: hole in the bedroom door size of a baseball client #2's bedroom revealed: no door knob | V 736 | | |

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| V 736 | <p>Continued From page 7</p> <p>client #3's bedroom revealed the following:</p> <ul style="list-style-type: none"> - had a mattress on his bedroom floor & only a dresser - the mattress was sunken in the middle - bedroom wall had several putty places - no curtain or blinds on the window - upstairs bathroom door in the hallway had several holes ranging from quarter size to baseball size holes - kitchen ceiling had several holes throughout the sheet rock - client #3 sat on a mattress covered with a sheet & bed spread in the living floor <p>During interview on 4/12/22 the HM#1 reported:</p> <ul style="list-style-type: none"> - client #3 jumped up and down on his bed which caused the mattress to collapse - putty on client #3's bedroom walls were from holes he put in the wall - only a dresser in client #3's bedroom because anything he could pick up, he would throw - client #3 put the holes in the bathroom door and client #1's bedroom door - new doors for the clients' bedrooms were ordered and should be in this week - client #2 broke the door knob off from his bedroom door - the holes in the kitchen ceiling was from when client #3 jumped up and down in his bedroom, it knocked the bolts out the kitchen ceiling - repairs at the facility were done on a continuous basis due to client #3 <p>During interview on 4/14/22 the House Manager #2 reported:</p> <ul style="list-style-type: none"> - weighed 220 pounds & jumped up and down in his bedroom upstairs | V 736 | | |

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| V 736 | Continued From page 8 - when he jumped it knocked out the bolts in the kitchen ceiling that held up the sheet rock ceiling During interview on 4/14/22 a Team Leader with Construction reported: - a surveyor with construction would make a visit to the facility to access repairs During interview on 4/18/22 the Human Resources Operational Manager reported: - aware of the repairs needed at the facility - someone supposed to come this week to complete the repairs This deficiency constitutes a recited deficiency and must be corrected within 30 days. | V 736 | | |
| V 774 | 27G .0304(d)(7) Minimum Furnishings 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements: (7) Minimum furnishings for client bedrooms shall include a separate bed, bedding, pillow, bedside table, and storage for personal belongings for each client. | V 774 | | |

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| V 774 | <p>Continued From page 9</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to ensure 2 of 3 clients (#2 & #3) clients' bedrooms had minimum furnishings. The findings are:</p> <p>Observation on 4/12/22 of the tour of the facility at 1:16pm revealed:</p> <ul style="list-style-type: none"> - client #1 & #3's bedroom did not have a night stand - client #3's bedroom also did not have the following: frame or headboard only a mattress on the floor that sagged in the middle <p>During interview on 4/12/22 House Manager #1 reported:</p> <ul style="list-style-type: none"> - anything he could pick up he would throw - kept limited furniture in client #3's bedroom. | V 774 | | |
| V 784 | <p>27G .0304(d)(12) Therapeutic and Habilitative Areas</p> <p>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT</p> <p>(d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements:</p> <p>(12) The area in which therapeutic and habilitative activities are routinely conducted shall be separate from sleeping area(s).</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility</p> | V 784 | | |

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| V 784 | <p>Continued From page 10</p> <p>failed to ensure therapeutic and habilitative activities are routinely conducted shall be separate from sleeping areas for 1 of 3 clients (#3). The findings are:</p> <p>Observation on 4/12/22 of the tour of the facility given by House Manager (HM#1) at 1:16pm revealed:</p> <ul style="list-style-type: none"> - client #3 sat on a mattress in the living floor - the mattress had sheets and a comforter <p>During interview on 4/12/22 client #1 reported:</p> <ul style="list-style-type: none"> - the mattress on the living room floor belonged to client #3 - "he slept there" <p>During interview on 4/14/22 the House Manager #2 reported:</p> <ul style="list-style-type: none"> - client #3's mattress was on the downstairs living room floor due to his behaviors - weighed 220 pounds & jumped up and down in his bedroom upstairs - when he jumped it knocked out the bolts in the kitchen ceiling that held up the sheet rock ceiling <p>During interview on 4/18/22 the Human Resources Operational Manager reported:</p> <ul style="list-style-type: none"> - was aware client #3 jumped upstairs in his bedroom that knocked bolts out kitchen ceiling - for his safety his mattress was placed in the living room during the day - she was not aware he slept on the mattress during the night - was informed the mattress had been taken back to his bedroom | V 784 | | |