STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL001-253	A. BUILDING: _____ B. WING _____	R 03/04/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUST IN TIME YOUTH SERVICES	432 WEST 5TH STREET BURLINGTON, NC 27215

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	INITIAL COMMENTS An annual and complaint survey was completed on the March 4, 2022. The complaint was substantiated (Intake #NC00185488). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 5600B Supervised Living for Minors with Developmental Disabilities. The facility is licensed for 4 beds and currently has a census of 3. The survey sample consisted of audits of 2 current clients and 1 former client.	V 000		
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 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	V 118		

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V 118	Continued From page 1 (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 observation, record review and interviews, the facility failed to keep the Medication Administration Record (MAR) current affecting one of three audited clients (client #2) and failed to ensure medications were available for administration affecting one of three audited clients (client #2). The findings are: The following is evidence the facility failed to keep the MAR current. Review on 3/1/22 of client #2's record revealed: -Admission date of 8/20/21. -Diagnoses of Mild Intellectual Developmental Disability, Epilepsy, Seizure Disorder, Fetal alcohol/drug exposure encephalogy with developmental delay, Possible organic effective and impulsive control, Post Traumatic Stress Disorder and Attention Deficit Hyperactivity Disorder- Combined Type. Review on 3/1/22 of physician orders for client #2 revealed: -Order dated 2/18/22 for Risperidone 2mg (address aggression) take one tablet every morning.	V 118		

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V 118	Continued From page 2 Observation on 3/1/22 at approximately 1:20pm of the medication area revealed: -The Risperidone 2mg was not available for client #2. Interview on 3/1/22 with the Qualified Professional revealed: -Client had an appointment with psychiatrist on February 18, 2022 and some medications were changed. -He is responsible for updating MARS for medication changes until printed next month on new MAR. - Confirmed the client had not received the medication since the change on February 18, 2022. Interview on 3/1/22 with the Director revealed: -Staff failed to keep the MAR's current for client #1. The following is evidence the facility staff failed to ensure was available for administration. Review on 3/1/22 of client #2's record revealed: -Admission date of 8/20/21. -Diagnoses of Mild Intellectual Developmental Disability, Epilepsy, Seizure Disorder, Fetal alcohol/drug exposure encephalogy with developmental delay, Possible organic effective and impulsive control, Post Traumatic Stress Disorder and Attention Deficit Hyperactivity Disorder- Combined Type. Review on 3/1/22 of physician orders for client #2 revealed: -Order dated 2/18/22 for Risperidone 2mg (address aggression) take one tablet every morning.	V 118		

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V 118	Continued From page 3 Observation on 3/1/22 at approximately 1:25pm of the medication area revealed: -The Risperidone 2mg was not available for client #2. Interview on 3/1/22 with the QP revealed: -Client had an appointment with psychiatrist on February 18, 2022 and some medications were changed. -He thought the pharmacy had repackaged the medication during recent medication change. -He contacted the pharmacy and they confirmed they did not include the medication when repackaged. -He confirmed the facility failed to ensure medication was available for administration. Interview on 3/1/22 with the Director revealed: -Facility staff failed to ensure medications were available for administration.	V 118		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility.	V 289		

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V 289	Continued From page 4 (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses; (4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses; (5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or (6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e)	V 289		

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V 289	Continued From page 5 (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as alternative family living or assisted family living (AFL). This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to coordinate care with other individuals and agencies within the client's system of care, affecting 2 of 3 audited clients (Client # and Client #3). The findings are: Review on 3/1/22 of Client #1 record revealed: -Admission date of 12/28/20. -Diagnoses of Mild Intellectual Disability Disorder, Autism Spectrum Disorder, Bipolar Conduct Disorder, Fetal Alcohol Syndrome and Reactive Attachment Disorder. Interview on 3/1/22 with Client #1 revealed: -He had his therapy session every Thursday at another group home. -The sessions were held online on the computer of the office area at the group home. -He did have privacy during his session in another office. Review on 3/1/22 of Client #2 record revealed: -Admission date of 8/20/21. -Diagnoses of Mild Intellectual Developmental Disability, Epilepsy, Seizure Disorder, Fetal alcohol/drug exposure encephalogy with developmental, Possible organic effective and impulsive control, Post Traumatic Stress Disorder and Attention Deficit Hyperactivity Disorder-Combined Type.	V 289		

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V 289	Continued From page 6 Interview on 3/1/22 with the Qualified Professional revealed: -The clients have virtual sessions with therapist weekly. -The sessions lasted no more than a hour per client. -The clients are provided privacy in the office during their session. -He confirmed clients from his home were combined at another group home location for therapy sessions. Interview on 2/25/22 with the Director revealed: -The therapy sessions are held virtually on the computer. -Clients do have therapy sessions at the home weekly. -Since the homes engage in social activities together, thought it was OK to have therapy sessions at same home as long as staff were with the clients.	V 289		