# DHSR - Mental Health

MAY 1 1 2022

#### Plan of Correction

Please complete all requested information and email completed Plan of Correction form to:

Lic. & Cert. Section

Plans.Of.Correction@dhhs.nc.gov

Provider Name: Provider Contact Person for follow-up:	Excel Care Agency Inc. 919-395-5227 Rosemary Njoku	Phone: 910-676-8498 Fax: 910-500-0208		
r crson for follow-up:	Rosemary 14joku	Email:	il: rn.excelcareagency@ou	
Address:	1903 Bridger Street, Fayetteville NC 28301	Prov	ider#	MHL 026-978
Finding	Corrective Action Steps	Responsible Party		Time Line
10ANCAC 27G .0205 Assessment/Treatment/Rehabilitation Plan Facility failed to assure that treatment plans wer at least reviewed annually and signed written	Excel Care QP will complete assessment of client in partnership with the client and legal responsible person. Plan will be completed within 30 days of admission and will include date	Qualified Professional Staff/QP		Implementation Date: June 19th 2022
consent. Failed to develop and implement goal and strategies to address client need for three of the three audited.  No signed consent for PCP  No strategy address incontinent of balder  No annual review completed for April 2022	projected to achieve outcome. Which will be date of completion of goal. Also, evaluation to determine whether goal was achieved will be completed annually. PCP will be viewed annually in consultation with legal responsible person and client.  All PCP shall be signed by all parties that participated in developing PCP. Consent for treatment will be signed and attached to PCP. Treatment team will discuss special cases and QP will implement a plan to support client with managing incontinent of bladder.  PCP will indicate staff responsible for goal completion.			Projected Completion Date: June 19 <sup>th</sup> 2022
27G.0207 Emergency Plans and Supplies No documented fire and or disaster drills for the 1th quarter of 2021 No disaster drills documented for the 1st quarter of 2022.	Fire and disaster drills will be completed on each shift. Both drills will be completed at least three times within the quarter. By each shift	Qualified Professional/ Staff		Implementation Date: .fune 19 <sup>th</sup> 2022  Projected Completion Date:
27G.0209 ( C ) Medication Requirement. This rule is not met as evidenced by the facility failed to keep the MAR current. Affecting two of the three audited clients (#2 and #3. Signed medication orders revealed 4/16/22 for evothyroxine 112 meg take once daily evothyroxine 100 meg transcribed as dministered 4/17/22. Ativan Img take three times daily	Excel care Staff will ensure that medication are administered as prescription, any changes in dosage and routed will be effected immediately and show evidence of discontinuation of the discontinued medicine.  Excel Care will ensure that all medications administered are documented immediately after administrating medications.  QP will review medications record to ensure appropriate documentations  QP will contact pharmacy and obtained a copy of the prescription.  For verification.	QP/Staff		Implementation Date:  June Projected Completion Date June 19th  JUNE 19th 2022



### Appendix 1-B: Plan of Correction Form

#### Plan of Correction

## Please complete all requested information and email completed Plan of Correction form to:

Plans.Of.Correction@dhhs.nc.gov

Provider Name: Provider Contact	Excel Care Agency Inc. 919-395-5227 Rosemary Njoku	Phone: Fax:		76-8498 00-0208
Person for follow-up:		Email:	rn.ex	celcareagency@outlook.com
Address:	1903 Bridger Street, Fayetteville NC 28301	Prov	ider#	MHL 026-978
Finding	Corrective Action Steps	Responsible	e Party	Time Line
10ANCAC 27G .0205  Assessment/Treatment/Rehabilitation Plan Facility failed to assure that treatment plans were at least reviewed annually and signed written consent. Failed to develop and implement goals and strategies to address client need for three of the three audited. No signed consent for PCP No strategy address incontinent of balder No annual review completed for April 2022	projected to achieve outcome. Which will be date of completion of	Qualified P Staff/QP	- V	Implementation Date: June 19 <sup>th</sup> 2022  Projected Completion Date: June 19 <sup>th</sup> 2022
27G.0207 Emergency Plans and Supplies No documented fire and or disaster drills for the 4 <sup>th</sup> quarter of 2021 No disaster drills documented for the 1 <sup>st</sup> quarter of 2022.	Fire and disaster drills will be completed on each shift. Both drills will be completed at least three times within the quarter. By each shift	Qualified Professional/ Staff		Implementation Date: June 19th 2022  Projected Completion Date:
27G.0209 ( C ) Medication Requirement. This rule is not met as evidenced by the facility failed to keep the MAR current. Affecting two of the three audited clients (#2 and #3. Signed medication orders revealed 4/16/22 for levothyroxine 112 mcg take once daily Levothyroxine 100 mcg transcribed as administered 4/17/22 Ativan Img take three times daily	Excel care Staff will ensure that medication are administered as prescription, any changes in dosage and routed will be effected immediately and show evidence of discontinuation of the discontinued medicine.  Excel Care will ensure that all medications administered are documented immediately after administrating medications.  QP will review medications record to ensure appropriate documentations  QP will contact pharmacy and obtained a copy of the prescription.  For verification.	QP/Staff		Implementation Date:  June Projected Completion Date June 19 <sup>th</sup> JUNE 19th 2022

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Provider Name: Provider Contact Person for follow-up:		Phone: Fax:	910-676-8498 910-500-0208 rn.excelcareagency@outlook.com	
		Email:		
Address:	1903 Bridger Street, Fayetteville NC 28301	Pro	vider # MHL 026-978	

Findings	Corrective Action Steps	Responsible Party	Time Line
Ativan – No staff initials to indicate med administration on 3/4/22 and 3/5/22 at 2pm Metoprolol 25 mg Take three times daily Metoprolol – No staff initials indicated. Austedo 1mg take three times daily N staff initials to indicate med was administered on 4/1/22 and 4/3/22 Alphan 0.1% - revealed Administer one drop in each eye twice daily Alphagan 0.1% showed administered one drop in each eye once daily	Excel Care staff will initial MAR immediately upon administrating medication to ensure accuracy.  QP will review MAR to track documentations and avoid documentation omissions.  QP will continue to monitor MAR for accurate documentation QP will also contact pharmacy to ensure that printed MAR matches doctors prescriptions.	QPQPQP/Staff QP/ QP	To be implemented before or by June 19th 2022

27E.0108 Clients Right- Training on Alternate to Restrictive Intervention.  The facility failed to ensure that the staff and QP received annual training updates in alternative interventions No current updates in Alternate to Restrictive Interventions  QP record reveal National Crisis Intervention  Plus training expired March 2022	Excel Care will make sure that all staff hired receive alternate to Restrictive Intervention training and will subsequently receive refresher courses annually and as needed.  The QP will receive training on Alternate intervention. To ensure that training continues to be update by reviewing staff records and keep track of expiration dates.  QP will receive training on Alternate on Restrictive Intervention in order to use the same technique intervention with staff if there is a no for intervention	QP QP QP	Implementation Date: June 19th 2022  Projected Completion Date: June 19th 2022
27G.0303 (c) Facility and grounds  Maintenance 4 Mattresses on the fence. Pieces of furniture—were stored to the right of the	Excel Care ensured that the mattresses and furniture were removed on April 20 <sup>th</sup> the debris and all exterior of the facility was cleaned cut off weed on the fence on the April 20 <sup>th</sup> . Excel Care will	Excel Care Management	Implementation Date:  June 19th 2022



facility. Debris scattered on the ground beside the driveway weeds growing on the sides The wall underneath the dining room table had approximately baseball sized with patch area. Kitchen missing drawer Clients 1 and 3 bedrooms missing dresser handlers. The window sill has a layer of dust on the surfaces Client 2 bedroom window had a layer of dust on the surface. Client 4 bedroom a damaged wood portion near the wall, client 2 and 4 had one light bulb that did not work The activity room had one of three bulbs that work	ensure that the facility exterior is maintained  All interior was painted in August however, the identified area will be painted over and staff will ensure that the dining table does not rest against the wall. Sill surfaces has been dusted.  All bulbs will be replaced in all the rooms as identified.  Missing handles of the dressers will be replaced. Any damaged wood portion of the wall will be repaired as a maintenance person has been notified to fix the drawer and missing knobs of the dresser.	Excel Care Management	Time Line Implementation Date:     Already in progress. To be completed by June 19th 2022

Pullup 5/4/2022