

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL013-025</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/20/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>AREY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>495 TRIPOLIS STREET CONCORD, NC 28025</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on 5/20/22. Deficiencies were cited.</p> <p>The facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>The facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 108	<p><b>27G .0202 (F-I) Personnel Requirements</b></p> <p><b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b></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> <ol style="list-style-type: none"> <li>(1) general organizational orientation;</li> <li>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</li> <li>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</li> <li>(4) training in infectious diseases and bloodborne pathogens.</li> </ol> <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 equivalence for relieving airway obstruction.</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>(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 record review and interview the facility failed to ensure staff had current training in cardiopulmonary resuscitation (CPR) and First Aid affecting 1 of 4 staff (House Manager). The findings are:</p> <p>Review on 5/19/22 of the House Manager's personnel record revealed: - Date of Hire 4/13/20; - No current CPR or First Aid certification; - The most recent CPR and First Aid certification expired 4/30/22.</p> <p>Interview on 5/19/22 with the House Manager revealed: - Knew her CPR and First Aid training were expired; - Human Resources is responsible for scheduling trainings.</p> <p>Interview on 5/19/22 with the Qualified Professional revealed: - Had no knowledge that the training had expired; - Learned on 5/19/22 that the training had expired; - Human Resources is responsible for scheduling trainings; - Human Resources notified the House Manager</p>	V 108		

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V 108	Continued From page 2 of training expiration.	V 108		
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, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(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> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <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>	V 118		

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V 118	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interviews, the facility failed to ensure medications were administered as ordered and failed to ensure a MAR of all drugs administered to each client was kept current and failed to ensure self-administration orders affecting 1 of 3 clients (client #1). The findings are:</p> <p>Record review on 5/19/22 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- Admission date 7/17/01;</li> <li>- Diagnoses Mild Intellectual Developmental Disorder, Gastroesophageal Reflux Disease(GERD), Dyspepsia, Rhinitis, Hypertension;</li> <li>- Resupply Request form dated 4/10/22 for Olopatadine(eye drops) 0.2%, Instill 1 drop in both eyes once daily;</li> <li>- No authorization to self-administer medications signed by the client's physician;</li> <li>- No physician's orders for the medications;</li> </ul> <p>Observations on 5/17/22 at 2:17pm of client #1 medications revealed:</p> <ul style="list-style-type: none"> <li>- Atenolol (beta blocker) 50 milligram (mg), Take 1 tablet (tab) by mouth once daily;</li> <li>- Fexofenadine(antihistamine) 180mg Take 1 tab by mouth once daily;</li> <li>- Fish oil (supplement)120mg, Take 1 capsule (cap) by mouth once daily;</li> <li>- Omeprazole(GERD) 20mg, Take 1 cap by mouth once daily;</li> <li>- Soluble Fiber powder(slowing digestion), Dissolve one tablespoon in water or juice every day;</li> <li>- Vitamin E (supplement) 400 unit cap, Take 1</li> </ul>	V 118		

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V 118	<p>Continued From page 4</p> <p>cap by mouth once daily;</p> <ul style="list-style-type: none"> <li>- Bupropion(anti depressant) SR 150mg tab Take 1 tab by mouth twice a day,</li> <li>- Simvastatin(high cholesterol) 20mg, Take 1 tab by mouth at bedtime;</li> <li>- Therapeutic(scalp treatment) 0.5% shampoo, Wash scalp every other day;</li> <li>- The following medications were not available for review at the facility:               <ul style="list-style-type: none"> <li>- Nystatin(Fungal ointment) 100,000 PRN (as needed), Apply to nail and cuticle area every 12 hours as needed;</li> <li>- Clobetasol(eczema) 0.05 ointment; Apply to affected area 2 times a day for 4 weeks as needed for flare;</li> <li>- Olopatadine 0.2% , Instill 1 drop in both eyes once daily.</li> </ul> </li> </ul> <p>Observations on 5/19/22 at 1:20pm of client #1's medication revealed:</p> <ul style="list-style-type: none"> <li>- Nystatin 100,000 PRN (as needed), Apply to nail and cuticle area every 12 hours as needed;</li> </ul> <p>Observations on 5/20/22 at 11:25am of client #1's medication revealed:</p> <ul style="list-style-type: none"> <li>- Olopatadine 0.2% Instill 1 drop in both eyes once daily.</li> </ul> <p>Review on 5/17/22 of client #1's MAR from February 2022- May 17, 2022 revealed all above listed medications documented as administered with no physician's order.</p> <p>Review on 5/17/22 of client #1's MAR from February 25, 2022- May 17, 2022 revealed:</p> <ul style="list-style-type: none"> <li>- Olopatadine 0.2% disposed on February 25, 2022 due to being expired;</li> <li>- Note on the back of the February MAR "eye drop/1 drop in each eye ...its old ... order more."</li> </ul>	V 118		

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V 118	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>- March and April's MAR noted "Eye drop haven't came- no eye drops ... on order".</li> </ul> <p>Interview on 5/19/22 with client #1 revealed:</p> <ul style="list-style-type: none"> <li>- Self-administered medications daily with supervision of staff;</li> <li>- Have not received Olopatadine in months;</li> <li>- "Old eye doctor prescribed the eye drops for my dry eyes."</li> <li>- "Old eye doctor did not refill the prescription.";</li> <li>- "I have a new eye doctor now, and he didn't prescribe any eye drops."</li> <li>- "My last eye exam was November 2021 with my new eye doctor.";</li> <li>- Client #1 doesn't believe he needs the Olopatadine.</li> <li>- Client #1 had not used the Nystatin and Clobetasol ointment "for a while."</li> </ul> <p>Interview on 5/19/22 with the House Manager revealed:</p> <ul style="list-style-type: none"> <li>- Responsible for the MAR;</li> <li>- Discarded the Olopatadine when realized it was expired;</li> <li>- Ordered a refill for Olopatadine with the pharmacy;</li> <li>- Did not understand what was taking so long for the Olopatadine to be refilled;</li> <li>- Client #1's guardian transported him to his medical appointments;</li> <li>- Client #1's guardian does not always report back to the facility about the medical appointments;</li> <li>- Client #1's guardian has been given forms for the physician to fill out but client #1 returns without completed forms from the physician;</li> <li>- Client #1 "doesn't have his Clobetasol because his insurance will not pay for it" and client's guardian, "stated it cost too much."</li> <li>- Unaware client #1 needing an authorization</li> </ul>	V 118		

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V 118	Continued From page 6  form signed by a physician to administer his own medications; - "He was administering his own medication when I started."  Observation at 4:15pm and Interview on 5/19/22 with the Qualified Professional (QP) revealed: - Responsible for MAR along with the House Manager; - Checked the MAR weekly; - Did not compare the physician order and MAR; - Client #1 doesn't have physician's orders because his guardian transports him to medical appointments; - Unaware about client #1 needing a signed physician's order to administer medications; - Client #1 "was already administering medications when I became the QP."; - QP contacted client # 1's guardian on speaker phone during the interview to ask about the eye drops and was informed by client's 1's guardian she was not aware of any eye drops for client #1.	V 118		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int.  10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse	V 536		

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V 536	<p>Continued From page 7</p> <p>or injury to a person with disabilities or others or property damage is prevented.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <ol style="list-style-type: none"> <li>(1) knowledge and understanding of the people being served;</li> <li>(2) recognizing and interpreting human behavior;</li> <li>(3) recognizing the effect of internal and external stressors that may affect people with disabilities;</li> <li>(4) strategies for building positive relationships with persons with disabilities;</li> <li>(5) recognizing cultural, environmental and organizational factors that may affect people with disabilities;</li> <li>(6) recognizing the importance of and assisting in the person's involvement in making decisions about their life;</li> <li>(7) skills in assessing individual risk for escalating behavior;</li> <li>(8) communication strategies for defusing</li> </ol>	V 536		

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V 536	<p>Continued From page 8</p> <p>and de-escalating potentially dangerous behavior; and</p> <p>(9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe).</p> <p>(h) Service providers shall maintain documentation of initial and refresher training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where they attended; and</p> <p>(C) instructor's name;</p> <p>(2) The Division of MH/DD/SAS may review/request this documentation at any time.</p> <p>(i) Instructor Qualifications and Training Requirements:</p> <p>(1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions.</p> <p>(2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the</p>	V 536		

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V 536	<p>Continued From page 9</p> <p>course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p> <p>(2) The Division of MH/DD/SAS may request and review this documentation any time.</p> <p>(k) Qualifications of Coaches:</p> <p>(1) Coaches shall meet all preparation requirements as a trainer.</p> <p>(2) Coaches shall teach at least three times the course which is being coached.</p> <p>(3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.</p> <p>(l) Documentation shall be the same preparation as for trainers.</p>	V 536		

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V 536	<p>Continued From page 10</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure staff completed annual refresher training in alternatives for restrictive interventions affecting 2 of 4 staff (Staff #2 and House Manager). The findings are:</p> <p>Review on 5/19/22 of the staff #2's personnel record revealed: - Date of Hire 2/3/14; - Job Title Paraprofessional; - Documentation of training on alternatives to restrictive interventions had expired on 9/26/20;</p> <p>Review on 5/19/22 of the House Manager's personnel record revealed: - Date of Hire 4/13/20; - Documentation of training on alternatives to restrictive interventions had expired on 3/23/22;</p> <p>Interview on 5/19/22 with staff #2 revealed: - Was not aware training expired; - Human Resources would send out an email stating what training needed to be completed; - Needed to check email for training updates.</p> <p>Interview on 5/19/22 with the House Manager revealed: - Knew alternatives to restrictive interventions was expired; - Human Resources was responsible for scheduling trainings.</p> <p>Interview on 5/19/22 with the Qualified Professional revealed: - Had no knowledge that the training had expired;</p>	V 536		

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V 536	Continued From page 11  - Learned on 5/19/22 that the training had expired; - Human Resources was responsible for scheduling trainings;	V 536		