STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL091-116	A. BUILDING: _____ B. WING _____	R 06/03/2022

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V 000	INITIAL COMMENTS An annual and complaint survey was completed on 6/3/22. Complaint Intake (NC#00188768) was substantiated and deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. The facility is licensed for five beds and currently has a census of four clients. The survey sample consisted of audits of three current clients. A sister facilities were identified in this report as sister facility E.	V 000		
V 121	27G .0209 (F) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (f) Medication review: (1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated. (2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable. This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure a drug regimen review for	V 121		

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V 121	Continued From page 1 psychotropic medications were completed every six months for two of three clients (#1, #4). The findings are: A. Review on 5/25/22 of client #1's record revealed: -Admission date of 1/10/98 -Severe Intellectual Development Disability (IDD), Epilepsy, Seizures and Speech Impairment Review on 5/25/22 of client #1's physician orders dated 3/22/21 for the following psychotropic medications revealed: -Fluoxetine 10 mg- one AM- (Depression) -Olanzapine 20 mg- one PM- (Antipsychotic) -Quetiapine 400 mg-twice a day (Bipolar) -Zyprexa 15 mg-one AM (Antipsychotic) -Trazodone 150 mg (Anxiety) -Fluoxetine-10 mg-one a day (Obsessive Compulsive Disorder) B. Review on 5/25/22 of client #4's record revealed: -Admission date of 6/18/01 -Diagnoses of Mild IDD, Major Depression, Seizure Disorder and Visually Impaired Review on 5/25/22 of client #4's physician order dated 5/21/21 for the following psychotropic medications revealed: -Bupropion XL 150 mg-one a day (Depression) Review on 5/26/22 of Drug Regimen reviews for client #1 and #4 from the pharmacist was dated 6/1/21. During interview on 6/3/22 the Executive Director stated: -During the last year they had not been able to get a pharmacist out to do the reviews.	V 121		

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V 121	Continued From page 2 -Had called last week to get someone to come out and complete them. -With all the short staff over the last year, it has been difficult to maintain those reviews.	V 121		
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. (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	V 289		

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V 289	Continued From page 3 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)(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 interview and observation the facility failed to maintain the home environment and provide services for four of four clients (#1, #2, #3 & #4) The findings are: Interview on 5/25/22 the Home Manager stated: -They had been short staff at other homes the last few months.	V 289		

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V 289	Continued From page 4 -Her home was currently fully staffed. -She had to go work at other homes to help cover on her days off. -Had clients from sister facility E come to the facility two to three times in the last few months. -Sister facility E had four clients come over while she had her four clients too. -She was the only staff working at that time. -The sister facility E clients only stayed between four to six hours. -The clients never stayed overnight. -No issues with sister facility E clients while in her facility. Interview on 5/24/22 the Executive Director stated: -They had been struggling with staffing for the last few months. -Had to move clients and staff around for coverage. -Aware that some clients had received services at other homes during that time. -Working on hiring new staff, but having difficulty as they can't pay anymore and people are frustrated.	V 289		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for	V 291		

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V 291	Continued From page 5 treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that no more than six clients were served with mental illness or developmental disabilities for four of four current clients (#1, #2, #3, #4) and four of four clients from sister facility E. The findings are: Interview on 5/25/22 the Home Manager stated: -They had been short staff at other homes the last few months. -Her home was currently fully staffed. -She had to go work at other homes to help cover on her days off. -Had clients from sister facility E come to the facility two to three times in the last few months. -Sister facility E had four clients come over while she had her four clients too.	V 291		

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V 291	Continued From page 6 -She was the only staff working at that time. -The sister facility E clients only stayed between four to six hours. -The clients never stayed overnight. -No issues with sister facility E clients while in her facility. Interview on 5/24/22 the Executive Director stated: -They had been struggling with staffing for the last few months. -Had to move clients and staff around for coverage. -Aware that some clients had received services at other homes during that time. -Working on hiring new staff, but having difficulty as they can't pay anymore and people are frustrated.	V 291		