

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL091-117	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/03/2022
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NAME OF PROVIDER OR SUPPLIER ROANOKE AVENUE GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 264 S BECKFORD DRIVE HENDERSON, NC 27536
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on 6/3/22. Complaint Intake (NC#00188767) was substantiated and 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>The facility is licensed for five beds and currently has a census of five clients. The survey sample consisted of audits of three current clients.</p> <p>A sister facility was identified in this report as sister facility D.</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</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>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. (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 interviews the facility failed to ensure one of three audited staff's (#1) training in First Aid (FA) and Cardiopulmonary resuscitation (CPR) were current. The findings are:</p> <p>Review on 5/24/22 of staff #1's record revealed: -Hire date of 1/1/21 -FA/CPR dated 1/23/20 and expired 1/23/22.</p> <p>Interview on 5/25/22 staff#1 stated: -Worked alone on her shifts. -Was aware she was behind on one of her trainings, CPR/FA.</p> <p>Interview on 5/24/22 the Executive Director reported: -She went over a list of trainings in their monthly meetings. -Staff had missed some trainings due to lack of staffing. -It was hard to schedule staff training when there was not staff to work in their place to receive the training.</p>	V 108		

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V 108	Continued From page 2 -It's the house manager's responsibility to schedule trainings -There was no house manager currently at this facility. -They were starting to get the trainings done although some are late.	V 108		
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 psychotropic medications were completed every six months for three of three clients (#1, #3, #5). The findings are: A. Review on 5/25/22 of client #1's record revealed: -Admission date of 3/6/15 -Diagnoses of Traumatic Brain Injury, History of	V 121		

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V 121	<p>Continued From page 3</p> <p>Alcoholism and Anxiety</p> <p>Review on 5/25/22 of client #1's physician orders dated 3/11/22 and 4/4/22 for the following psychotropic medications revealed: -Bupropion XL 150 mg- one a day (anxiety) -Citalpram 40 mg- one a day (anxiety) -Clonazepam 1 mg- one a day (anxiety)</p> <p>B. Review on 5/25/22 of client #3's record revealed: -Admission date of 9/23/21 -Diagnoses of Moderate IDD, Intermittent Explosive Disorder, Attention Deficit Hyperactive Disorder (ADHD), Depressive Disorder</p> <p>Review on 5/25/22 of client #3's physician order dated 3/21/22 for the following psychotropic medications revealed: -Benzotropine .5 mg- twice a day- (movement disorder) -Depakote Sodium ER 250 mg-one a day (Bipolar Disorder) -Risperidone 4 mg-one at PM (Bi-polar Disorder) -Trazodone 100 mg-one at PM (anti depressant) -Clonazepam .5mg- twice a day as needed (anxiety)</p> <p>C. Review on 5/25/22 of client #5's record revealed: -Admission date of 11/22/21 -Diagnoses of Moderate IDD, Intermittent Explosive Disorder and Cerebral Palsy</p> <p>Review on 5/25/22 of client #5's physician order dated 11/4/21 for the following psychotropic medications revealed: -Depakote Sodium ER 500 mg-one AM and three bedtime (Bipolar Disorder) -Haloperidol 1 mg- one a day (antipsychotic)</p>	V 121		

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V 121	<p>Continued From page 4</p> <p>-Hydroxyzine HCL 25 mg- one evening and 1-2 additional times in needed (anxiety)</p> <p>Review on 5/25/22 of Drug Regimen reviews for client #1 and #3 from the pharmacist was dated 6/1/21. No Drug Regimen review was completed for client #5.</p> <p>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. -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.</p>	V 121		
V 289	<p>27G .5601 Supervised Living - Scope</p> <p>10A NCAC 27G .5601 SCOPE</p> <p>(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.</p> <p>(b) A supervised living facility shall be licensed if the facility serves either:</p> <p>(1) one or more minor clients; or</p> <p>(2) two or more adult clients.</p> <p>Minor and adult clients shall not reside in the same facility.</p> <p>(c) Each supervised living facility shall be licensed to serve a specific population as designated below:</p> <p>(1) "A" designation means a facility which serves adults whose primary diagnosis is mental</p>	V 289		

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V 289	Continued From page 5 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) (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).	V 289		

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V 289	<p>Continued From page 6</p> <p>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 one of one sister facility client (sister facility D1). The findings are:</p> <p>Observation on 5/25/22 at 1:30 PM of sister facility D1 present in the facility.</p> <p>Record review on 5/26/22 of sister facility D1's record revealed: -Admission date of 10/1/09 -Diagnoses of Moderate Intellectual Developmental Disability (IDD) and Seizure Disorder</p> <p>Interview on 5/24/22 the Executive Director stated: -Sister facility D1 had been going to the facility every day for the last two weeks. -Sister Facility D1's day program had closed and she was waiting on an authorization to begin a new day program. -Did not have enough staff to stay home with her during the day so they sent her to the facility where staff was present. -Been struggling over the last few months maintaining staff. -The sister facility D's home manager had left a few weeks ago and they had not filled that position. -Sister Facility D1 should start her day program in the next week or so.</p>	V 289		