

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-857	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 07/07/2022
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NAME OF PROVIDER OR SUPPLIER ELITE CARE SERVICES AT MIDDLE RD	STREET ADDRESS, CITY, STATE, ZIP CODE 711 MIDDLE ROAD FAYETTEVILLE, NC 28302
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on July 7, 2022. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current client.</p>	V 000		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.</p>	V 112		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure a treatment plan was developed for one of three clients (#3) The findings are:</p> <p>Review on 07/6/22 of client #3's record revealed: -28 year old male. -Admission date of 05/27/22. -Diagnoses of Schizoaffective Disorder and Intellectual Disability. -No treatment plan in the record.</p> <p>During interview on 07/08/22 the Qualified Professional revealed: -He was responsible for creating the treatment plans. -A treatment plan had not been developed for client #3. -He would ensure the treatment plan was created for client #3.</p>	V 112		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p>	V 114		

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V 114	<p>Continued From page 2</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure fire and disaster drills were held at least quarterly and repeated on each shift. The findings are:</p> <p>Reviews on 07/06/22 of the facility records from July 2021- July 2022 revealed: -No documented fire and disaster drills for January 2022-March 2022. -Only first shift fire and disaster drills had been documented for April 2022-June 2022 -No third shift fire and disaster drills had been documented for July 2021-September 2021. -No third shift fire and disaster drills had been documented for October 2021-December 2021.</p> <p>During interview on 07/06/22 staff #1 revealed: -She had documented fire and disaster drills on a calendar. -The facility had run out of forms to document the fire and disaster drills.</p> <p>During interview on 07/07/22 the Qualified Professional revealed: -He would ensure the fire and disaster drills were completed and documented on the correct forms.</p>	V 114		

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V 118	Continued From page 3	V 118		
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> <p>This Rule is not met as evidenced by:</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>Based on record reviews, observations and interviews, the facility failed to administer medications on the written order of a physician affecting one of three clients (#6) and failed to keep the MARs current affecting three of three clients(#3, #4 and #6). The findings are:</p> <p>Finding #1 Review on 07/06/22 of client #6's record revealed: -61 year old male. -Admission date of 12/31/09. -Diagnoses of Disorganized Schizophrenia, Post Traumatic Stress Disorder, Chronic obstructive pulmonary disease (COPD), Asthma, History of Gall Stones.</p> <p>Review on 07/06/22 of client #6's Physician orders revealed: 05/17/22 -Breztri Aero 160-9-4.8 Inhale 2 puffs by mouth daily for COPD. 12/27/21 -Levalbuterol 0.31 mg/3ml Inhale one vial by nebulization twice a day for COPD. 08/10/21 Symbicort 160/4.5 mcg Inhale 2 puffs by mouth twice daily.</p> <p>Review on 07/06/22 of client #6's July 2022 MAR revealed: -The medications Breztri Aero, Levalbuterol and Symbicort had initials from July 1-7 to indicate the medications had been administered.</p> <p>Observation on 07/06/22 of the medication cart and client #6's medication revealed: -Breztri Aero, Levalbuterol and Symbicort were not available to administer to client #6.</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>During interview on 07/06/22 client #6 was not able to identify his medications but stated he took his medications daily.</p> <p>During interview on 07/06/22 staff #1 revealed: -Client #6 did not take those medications any longer. -She did not know why initials were on the MAR that those medications had been administered.</p> <p>Finding #2 Review on 07/06/22 of client #3's record revealed: -28 year old male. -Admission date of 05/27/22. -Diagnoses of Schizoaffective Disorder and Intellectual Disability.</p> <p>Review on 07/07/22 of client #6's Physician orders revealed: 05/22/22 -Lithium Carbonate 300mg 1 tablet by mouth every morning. -Lithium Carbonate 600mg Take 2 capsule by mouth at bedtime -Aripiprazole 20mg-Take 1 tablet by mouth every day for Schizophrenia. -Hydroxyzine Pam 50mg-Take 1 capsule by mouth three times a day for anxiety. -Melatonin 5mg-Take 1 or 2 tablets by mouth at bedtime as needed for sleep.</p> <p>Review on 07/06/22 of client #3's record revealed: -No July 2022 MAR was present in the facility.</p> <p>During interview on 07/06/22 client #3 revealed: -He received his medication in the morning and at night every day.</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>During interview on 07/06/22 staff #1 revealed: -Client #3 received his medication daily but she did not have a MAR because he was a new client.</p> <p>During interview on 07/06/22 the House Manager revealed: -The pharmacy sent client #3's medication and MARs to the old facility he lived at. -The pharmacy is getting all his information switched over to them for his medications. -He did not have any more blank MARs to use for the month of July.</p> <p>During interview on 07/07/22 the Qualified Professional (QP) revealed: -He was not aware medications for client #3 were not being documented as being administered for July 2022. -Client #3 was a new admission and they were still trying to get all of his information.</p> <p>Finding #3 Review on 07/06/22 of client #4's record revealed: -32 year old male. -Admission date of 09/11/17. -Diagnoses of Schizoaffective Disorder and Major Depressive Disorder.</p> <p>Review on 07/07/22 of client #4's Physician orders revealed: 06/08/21 -Docusate Sodium 100mg (Constipation) Take 1 capsule by mouth twice daily. 05/16/22 -Bentropine 0.5mg Take 1 tablet by mouth twice a day. 02/16/22 -Buspirone 10mg Take 2 tablets by mouth twice a day.</p>	V 118		

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V 118	<p>Continued From page 7</p> <p>03/10/22 -Amitiza 24 mcg Take 1 capsule by mouth twice a day for constipation.</p> <p>Review on 07/07/22 of client #4's May and June 2022 MARs revealed the following blanks: -Docusate Sodium 100mg-05/01/22-05/2/22 at 8pm and 06/05/22 at 8pm. -Benzotropine 0.5mg-05/01/22-05/2/00 and 06/05/22 at 8pm. -Buspirone 10mg-05/01/22-05/02/22 and 06/05/22 at 8pm. -Amitiza 24 mcg-05/01/22-05/02/22 and 06/05/22 at 8pm.</p> <p>During interview on 07/06/22 client #4 revealed he received his medication daily.</p> <p>During interview on 07/07/22 the QP revealed: -He would inform the staff the importance of making sure the MARs are completed each time the medication is administered.</p>	V 118		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility was not maintained in a safe, clean, attractive</p>	V 736		

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V 736	<p>Continued From page 8</p> <p>and orderly manner. The findings are:</p> <p>Observation on 07/06/22 at approximately 10:50am revealed:</p> <ul style="list-style-type: none"> -A smoke detector was emitting a chirping sound. -The carpet throughout the entire facility was soiled and stained. -The kitchen light was not working properly and the light was flickering. -The casing at the bottom of the dishwasher was damaged and pulling away from the wall. -The kitchen ceiling had water stains. -The sheetrock was exposed above the dishwasher on the right side wall. -On top of the washing machine was a large dead roach. -Client #2 and client #3's bedroom door was dirty and a dresser was missing a bottom drawer. No doors on the closet in the bedroom. -Client #4's bedroom closet did not have any doors. The mattresses were on the floor with no frame. The walls were dirty throughout the room. -Client #6's bedroom did not have any closet doors. -Bedroom #4 had dirty walls throughout the room. -The facility had a musky smell. <p>During interview on 07/07/22 the Qualified Professional revealed:</p> <ul style="list-style-type: none"> -He would address the issues in the home. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		