

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL081-087</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/25/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>KELLY'S CARE 6</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>156 US HWY-122-A FOREST CITY, NC 28043</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual, follow-up and complaint survey was completed on August 25, 2022. The complaint was unsubstantiated (Intake # NC00190394). Deficiencies were cited.</p> <p>This 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 and 1 former client.</p>	V 000		
V 119	<p><b>27G .0209 (D) Medication Requirements</b></p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return</p>	V 119		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 119	<p>Continued From page 1</p> <p>to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge.</p> <p>This Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to dispose of prescription medications in a manner that guards against diversion or accidental ingestion affecting one of three current clients (Client #3) and one of one former client (FC #4). The findings are:</p> <p>Observation on 8/8/22 at approximately 3:01 p.m. revealed: -An unlocked closet door that was labeled "Medicine Cabinet." -The closet was located in the hallway that led to Client #1, #3, #4 and #6's bedrooms. -On the top shelf of the closet, a bubble pack with FC #4's name - Reguloid (constipation) Capsule- 2 capsules a day. -Second shelf - medication bubble packs with Client #3's name in a plastic grocery bag tied at the top but ripped open on one side: -Dispensed 1/3/22 - Haloperidol LA (antipsychotic) Injection 5 milligrams/millimeter (mg/ml) - 10 vials - all loose at the bottom of the bag; -Dispensed 1/14/22 - Docusate sodium (laxative) capsule 200 mg; Docusate sodium capsule 100 mg; Vitamin D3 (fat-soluble secosteroids) 50 micrograms (mcg); -Dispensed 1/17/22 - Vitamin B-12 (metabolism) tablet (tab) 1000 mg; Magnesium oxide (low magnesium) tab 400 mg and Bisacodyl (laxative)</p>	V 119		

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V 119	<p>Continued From page 2</p> <p>tab 5 mg; -Dispensed 3/10/22 - Trihexyphen (antispasmodic) tab 5 mg; Benzatropine Mesylate (anticholinergic) tab 1 mg; -Dispensed 3/12/22 - Haloperidol Decanoate (antipsychotic) Injection - 100 mg every 4 weeks; -Dispensed 3/13/22 - Vitamin B 12 - 1000 mcg; Aspirin Low Dose (pain reliever) chew 81 mg; -Dispensed 3/18/22 - Melatonin (herb/supplement) tab 5 mg; Omeprazole (proton-pump inhibitor) 40 mg; Lubiprostone (constipation) capsule 24 mcg; -Risperidone (antipsychotic) Odt (orally disintegrating tablet) 2 mg - dissolve 1 tab on tongue daily after breakfast - 37 tablets; Haloperidol 5 mg - 8 tablets; -Dispensed 3/31/22 -Risperidone 2 mg - two plastic bags on top of shelf in labeled baggie - 1 tab left in one baggie; 4 tabs left in other baggie; -unlabeled bubble pack - 8 large yellowish capsules; - Ipratropium Bromide nasal spray .06% (allergic and nonallergic rhinitis)- no label - expires May 2023.</p> <p>Review on 8/9/22 of Client #3's record revealed: -Admitted 3/31/22. -Diagnoses of Intellectual Developmental Disorder (IDD), Schizophrenia, Schizo-Affective Type, Depressed, Constipation, Gastro-Esophageal Reflux Disease (GERD), Urinary Incontinence, Tardive Dyskinesia, Chronic Anemia, Seizure Disorder, Allergic Rhinitis, Glaucoma, B12 Deficiency, Vitamin D Deficiency, Hyperlipidemia, Hypomagnesemia, and Insomnia.</p> <p>Review on 8/10/22 of Client #3's physician orders revealed: -4/7/22 -Haloperidol LA Injection; -Docusate sodium;</p>	V 119		

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V 119	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-Vitamin B-12;</li> <li>-Magnesium Oxide;</li> <li>-Bisacodyl EC (Enteric Coated);</li> <li>-Trihexyphen;</li> <li>-Benzatropine Mesylate;</li> <li>-Haloperidol Decanoate Injection;</li> <li>-Aspirin Low dose chew;</li> <li>-Melatonin;</li> <li>-Omeprazole;</li> <li>-Vitamin D3;</li> <li>-Risperidone OdT.</li> </ul> <p>-6/12/22 -Benzatropine Mesylate - discontinued. -7/6/22 -Haloperidol; -Ipratropium Bromide nasal spray; -Lubiprostone.</p> <p>Review on 8/10/22 of FC #4's record revealed: -Admitted 7/15/17. -Discharged 6/15/22. -Diagnoses of Autism Spectrum Disorder, IDD, moderate, Personality Disorder, Pedophilia, Vitamin B12 Deficiency, Schizoaffective Disorder, Bipolar Type, Mood Disorder Not Otherwise Specified (NOS), Psychotic Disorder, Sleep Disorder NOS, Tremors, Hyperlipidemia, Asthma, Attention-Deficit Hyperactivity Disorder, Seasonal Allergies, GERD, and Irritable Bowel Syndrome.</p> <p>Observation and interview on 8/8/22 at approximately 3:38 p.m. with the Supervisor revealed: -When asked about the Medication Cabinet door in the hallway, she and surveyor walked towards the door. -When arrived, the Supervisor opened the unlocked door. -This was where medications that had to go back to the pharmacy were kept. -The pharmacy came to the facility once a month, or as needed if there was a medication change.</p>	V 119		

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V 119	<p>Continued From page 4</p> <p>-The medications in the closet were still there as it was "...just a matter of staff not telling the pharmacy we have meds (medications) to take back...."</p> <p>Interview on 8/10/22 with the Director of Operations/Qualified Professional revealed: -He was notified by the Supervisor about the medications observed by surveyor that same afternoon (8/8/22). -He had the Supervisor bring them to the office for pick up by the pharmacy. -The medications were from a previous facility Client #3 lived in and they "...usually don't use outside meds...." -"Typically the pharmacy picks up the unused medications pretty quickly." -They would not have logged them in, or conducted a medication count, because they "...weren't going to use them and typically they would have been sent back within a week...."</p> <p>This deficiency is cross referenced into 10A NCAC 27G.0209 Medication Requirements (V120) for a Type B rule violation and must be corrected within 45 days.</p>	V 119		
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications</p>	V 120		

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V 120	<p>Continued From page 5</p> <p>shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure medications were stored securely affecting one of three current clients (Client #3) and one of one former client (FC #4). The findings are:</p> <p>Cross Reference: 10A NCAC 27G.0209 Medication Requirements (V120). Based on observation, interview and record review, the facility failed to dispose of prescription medications in a manner that guards against diversion or accidental ingestion affecting one of three current clients (Client #3) and one of one former client (FC #4).</p> <p>Observation on 8/8/22 at approximately 3:01 p.m. revealed: -An unlocked closet door that was labeled "Medicine Cabinet." -The closet was located in the hallway that led to Client #1, #3, #4 and #6's bedrooms. -On the top shelf of the closet, a bubble pack with FC #4's name - Reguloid (constipation) Capsule-</p>	V 120		

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V 120	<p>Continued From page 6</p> <p>2 capsules a day.</p> <p>-Second shelf - medication bubble packs with Client #3's name in a plastic grocery bag tied at the top but ripped open on one side:</p> <p>-Dispensed 1/3/22 - Haloperidol LA (antipsychotic) Injection 5 milligrams/millimeter (mg/ml) - 10 vials - all loose at the bottom of the bag;</p> <p>-Dispensed 1/14/22 - Docusate sodium (laxative) capsule 200 mg; Docusate sodium capsule 100 mg; Vitamin D3 (fat-soluble secosteroids) 50 micrograms (mcg);</p> <p>-Dispensed 1/17/22 - Vitamin B-12 (metabolism) tablet (tab) 1000 mg; Magnesium oxide (low magnesium) tab 400 mg and Bisacodyl (laxative) tab 5 mg;</p> <p>-Dispensed 3/10/22 - Trihexyphen (antispasmodic) tab 5 mg; Benzatropine Mesylate (anticholinergic) tab 1 mg;</p> <p>-Dispensed 3/12/22 - Haloperidol Decanoate (antipsychotic) Injection - 100 mg every 4 weeks;</p> <p>-Dispensed 3/13/22 - Vitamin B 12 - 1000 mcg; Aspirin Low Dose (pain reliever) chew 81 mg;</p> <p>-Dispensed 3/18/22 - -Melatonin (herb/supplement) tab 5 mg; Omeprazole (proton-pump inhibitor) 40 mg; Lubiprostone (constipation) capsule 24 mcg; -Risperidone (antipsychotic) Odt (orally disintegrating tablet) 2 mg - dissolve 1 tab on tongue daily after breakfast - 37 tablets; Haloperidol 5 mg - 8 tablets;</p> <p>-Dispensed 3/31/22 -Risperidone 2 mg - two plastic bags on top of shelf in labeled baggie - 1 tab left in one baggie; 4 tabs left in other baggie;</p> <p>-unlabeled bubble pack - 8 large yellowish capsules;</p> <p>- Ipratropium Bromide nasal spray .06% (allergic and nonallergic rhinitis)- no label - expires May 2023.</p>	V 120		

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V 120	<p>Continued From page 7</p> <p>Interview on 8/8/22 with Staff #1 revealed: -The hall Medication Cabinet door was "...to be kept locked at all times..." -When surveyor notified her it was observed unlocked this afternoon, she replied "I was in it earlier."</p> <p>Observation and interview on 8/8/22 at approximately 3:38 p.m. with the Supervisor revealed: -When asked about the Medication Cabinet door in the hallway, she and surveyor walked towards the door. -When arrived, the Supervisor opened the unlocked door. -Asked if the door was usually unlocked, she replied "Was it? It shouldn't be...."</p> <p>Interview on 8/10/22 with the Director of Operations/Qualified Professional revealed: -He was notified by the Supervisor about the medications observed by surveyor that same afternoon (8/8/22). -He had the Supervisor bring them to the office for pick up by the pharmacy. -The "...closet historically is locked...assuming new lady (Staff #1) unlocked it looking to see what's in there and didn't lock it back up..."</p> <p>Review on 8/10/22 of the Plan of Protection dated 8/10/22 written by the Director of Operations/Qualified Professional revealed: -"What immediate action will the facility take to ensure the safety of the consumers in your care? All medications have been removed from closet and door has been locked. Key to the closet will be removed from the home and kept at the office. Only supervisors or qp's (Qualified Professionals) will have access to the closet.... -Describe your plans to make sure the above</p>	V 120		

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V 120	<p>Continued From page 8</p> <p>happens. [Name], Director of Operations, will be responsible for monitoring access to the key and ensuring that only supervisors or qp's have access to the key and sign the key in and out when needed for permissible uses. A qp or supervisor will be present at all intakes to make sure any outside medications brought into the home are logged in appropriately and brought to the office to be properly disposed of if not needed in the home. A qp or supervisor will be present at medication change over or when meds are dc'd (discontinued) to make sure they are logged in and brought to the office to be properly disposed of. Pharmacy will pick up unused, unneeded, or dc'd medications for disposal at least twice per month."</p> <p>The facility served clients with Intellectual Developmental Disabilities as well as mental health diagnoses to include Paranoid Schizophrenia Disorder, Antisocial Personality Disorder, Depression, Personality Disorder, Bipolar Disorder, Attention-Deficit Hyperactivity Disorder and Autism Spectrum Disorder. Unsecured medications which included antipsychotic medications placed all clients at risk of accidental ingestion and/or diversion. It was unable to be determined if any of the medications were missing as the facility had no inventory of what was observed in the unlocked medication closet. This deficiency constitutes a Type B rule violation which is detrimental to the health, safety and welfare of the clients. If the violation is not corrected within 45 days, an administrative penalty of \$200.00 per day will be imposed for each day the facility is out of compliance beyond the 45th day.</p>	V 120		

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V 736 V 736	<p>Continued From page 9</p> <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 failed to be maintained in a safe, clean, attractive, orderly manner and kept free from offensive odor. The findings are:</p> <p>Observation and interview on 8/8/22 from approximately 2:52 p.m. to 3:00 p.m. revealed: -The kitchen table had dinner plates with remains of pancakes on them as well as condiments from the previous meal. -The kitchen floor was sticky as the surveyor's shoes were sticking to the floor. -At that time Staff #1 said the client's had pancakes for lunch and syrup must have gotten on the floor. -The Supervisor, whose shoes were also sticking on the floor, asked Staff #1 to mop the floor.</p> <p>Observation on 8/8/22 at approximately 3:28 p.m. of Client #1 and #6's shared room revealed: -The blind on the right side window had a few slats broken. -An electrical strip on top of the dresser was strewn from right to left across the whole dresser (approximately 4 feet long). -The windows were painted shut and could not be</p>	V 736 V 736		

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V 736	<p>Continued From page 10</p> <p>opened.</p> <ul style="list-style-type: none"> <li>-A door on the side of the room that led to a smaller room and an exit to the back of the facility had a door knob missing.</li> <li>-The smaller room had a broken blind laying in the middle of the floor.</li> <li>-The door leading outside was able to be locked, however it would not latch and was able to be opened with the knob in the locked position.</li> <li>-The shared bathroom had two windows, one window had a blind with some missing slats and the other was covered with a blanket.</li> <li>-Client 4's bed was against the window and had some broken slats in the blinds.</li> <li>-The wall around the light switch was brown with what appeared to be dirt stains.</li> <li>-The hall bathroom had discolored grout on the wall and around the tub; it appeared old and cracked.</li> </ul> <p>Interview on 8/8/22 with Client #1 revealed:</p> <ul style="list-style-type: none"> <li>-That was his blanket covering the window in the shared bathroom.</li> <li>-He "...didn't want no one looking in on us while using the bathroom."</li> </ul> <p>Observation and interview on 8/8/22 at 4:32 p.m. with Client #2 in his bedroom revealed:</p> <ul style="list-style-type: none"> <li>-His bed was by a window that was not able to be opened.</li> <li>-As trying to look outside the blind fell down; he said it had fallen on him in the night as he was sleeping one time.</li> <li>-The door that lead to the outside deck would not latch and able to be opened with the handle in the locked position.</li> </ul> <p>Observation and interview on 8/10/22 at approximately 11:06 a.m. of Client #3's bedroom revealed:</p>	V 736		

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V 736	<p>Continued From page 11</p> <ul style="list-style-type: none"> <li>-A strong smell of urine.</li> <li>-Asked Staff #2 to come to the room.</li> <li>-As she walked by Client #3 who was in the living room, she asked him if he emptied his bedside commode this morning, he shook his head no.</li> <li>-The bedside commode in the client's room was almost full with dark amber urine.</li> </ul> <p>Interview on 8/10/22 with the Director of Operations/Qualified Professional revealed:</p> <ul style="list-style-type: none"> <li>-They were currently working on Kelly's #1 giving it a "full rehab...some houses need more work than others."</li> <li>-That was "...not to excuse regular maintenance...honestly [name of maintenance staff] needs help.</li> <li>-He just measured all the houses for new blinds last Friday.</li> <li>-He was not aware of the doors not latching.</li> </ul> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		