

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL031-079	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 11/17/2022
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NAME OF PROVIDER OR SUPPLIER PEACE HEALTHCARE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 223 ROBERT F HARGROVE ROAD MOUNT OLIVE, NC 28365
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on November 17, 2022. The complaint was unsubstantiated (Intake # NC00192647). 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 3. The survey sample consisted of audits of 3 clients.</p>	V 000		
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 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>	V 120		

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

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V 120	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to keep internal and external medications stored separately affecting 1 of 3 clients (client #1). The findings are</p> <p>Review on 10/28/22 of client #1's record revealed: -Admitted 4/06/20 -Diagnoses included schizophrenia - paranoid Type, vitamin-D deficiency, hyperlipidemia, and gastroesophageal reflux disease -No order for Flonase 50 micrograms (mcg)</p> <p>Observation on 10/28/22 at approximately 1:40pm of client #1's medications on hand revealed: -A bottle of Flonase (50 mcg) was mixed with oral medications in a plastic bag marked "8am & 8pm." -There was no pharmacy label with the prescriber's name, pharmacy dispense date, directions for administration, or pharmacy information and the bottle had no box.</p> <p>Interview on 10/28/22 with staff #1 revealed: -She had been off prior to that day and had not had a chance to reconcile the medications for the prior week.</p>	V 120		
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</p>	V 736		

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V 736	<p>Continued From page 2</p> <p>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 manner. The findings are:</p> <p>Observation of the facility and it's grounds on 10/28/22 at approximately 11:15am revealed:</p> <ul style="list-style-type: none"> -There were brown stains of varying sizes on the ceiling in the living room -There was a tennis ball sized hole in the drywall behind the bathroom door, approximately 36" from the floor. There was damage to the baseboard at the foot of the shower/tub where the baseboard appeared to be rotting and the drywall at the bottom left corner of the bathroom floor behind the toilet was soft and spongy to the touch. Paint over the toilet was peeling, approximately 18 - 24" in width and dead bugs were stuck to the top of the same wall. The handle to flush the toilet had broken off and the toilet could not be flushed. The hot water knob to the bathroom sink was not functioning allowing for only cold water access at the sink. A rusty vent was in the floor by the tub. -There were broken window blind slats in client #1's bedroom. The door handle was loose and broken. The only window in the room was sealed shut and unable to be opened by staff. There were no nails or screws preventing the window from opening. -The toilet had no cover and a toilet seat that was loose in bathroom #2. The paint was peeling over the top of the toilet and the popcorn ceiling was peeling away. 	V 736		

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V 736	<p>Continued From page 3</p> <ul style="list-style-type: none"> -There were flies throughout the kitchen. -The air return grill in the hallway was rusty. -The paint on the ceiling was peeling away in several places throughout the facility. <p>Interview on 10/28/22 client #1 stated:</p> <ul style="list-style-type: none"> -The "window won't open. You can't get it open. It's been stuck." -She was uncertain how long the window had been "stuck." <p>Interview on 10/28/22 and 11/1/22 staff #1 stated:</p> <ul style="list-style-type: none"> -She was unaware the window could not be opened and was uncertain how long the window had been stuck. -She contacted maintenance and had the window fixed on 10/29/22. <p>Interview on 11/1/22 the Qualified Professional (QP) stated:</p> <ul style="list-style-type: none"> -Maintenance had been notified to repair window -Moving forward, she would ensure staff made daily checks to ensure window remained operational. -She would have maintenance address areas that needed to be fixed. <p>Review on 11/17/22 of the Plan of Protection dated 11/15/22 completed by the QP revealed:</p> <ul style="list-style-type: none"> -"What immediate action will the facility take to ensure the safety of the consumers in your care? The window is now able to be opened. The client is able to exit through the window in the event of an emergency." -"Describe your plans to make sure the above happens. The staff will check the window daily. If the staff finds that the window is not functional/inoperable they will notify the administrator immediately. The client will be assigned to another room until the window is 	V 736		

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V 736	Continued From page 4 operable and safe for client to exit." Client #1 had her own bedroom with one window available as an emergency exit. The bedroom window could not be opened. The facility's failure to have a window that could not be opened in client #1's bedroom placed client #1 in an unsafe environment. This deficiency constitutes a Type A2 rule violation for substantial risk of serious harm and must be corrected within 23 days. An administrative penalty of \$1000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.	V 736		
V 752	27G .0304(b)(4) Hot Water Temperatures 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (4) In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit. This Rule is not met as evidenced by: Based on observation and interview, the facility water temperatures were not maintained between 100-116 degrees Fahrenheit in areas where clients were exposed to hot water. The findings are: Observation on 10/28/22 at approximately 11:15am revealed:	V 752		

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V 752	<p>Continued From page 5</p> <p>-The hot water temperature in bathroom #1 was 65 degrees Fahrenheit at the sink. -The hot water temperature at the kitchen sink was 120 degrees Fahrenheit.</p> <p>Interviews on 10/28/22 client #1, client #2, and client #3 stated that they had not observed any problems with water temperature.</p> <p>Interview on 10/28/22 staff #1 stated: -She was unaware the hot water knob was not working in bathroom #1.</p> <p>Interview on 11/01/22 the Qualified Professional stated: -She would follow up to ensure the proper range of water temperature was maintained.</p> <p>This deficiency has been cited 2 times since the original cite on 7/29/21 and must be corrected within 30 days.</p>	V 752		