

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL032-456</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>11/21/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SECURING RESOURCES FOR CONSUMERS, II</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>10 MEADOW CREST DRIVE DURHAM, NC 27703</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow-up survey was completed on October 19, 2021. 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>This facility is licensed for 5 and currently has a census of 4. The survey sample consisted of 3 current clients.</p>	V 000		
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></p> <p><b>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</b></p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</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 conduct fire and disaster drills under conditions that simulate emergencies quarterly and for each shift. The findings are:</p> <p>Review on 11/21/22 of the facility's fire drill log</p>	V 114		

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

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V 114	<p>Continued From page 1</p> <p>revealed:</p> <ul style="list-style-type: none"> <li>-7/13/22- 1st shift.</li> <li>-8/4/22- 2nd shift.</li> <li>-9/7/22- 3rd shift.</li> <li>-10/7/22- 1st shift.</li> </ul> <p>-There were no fire drills performed on the first, second or third shift for the first quarter of 2022.</p> <p>-There were no fire drills performed on the first, second or third shift for the second quarter of 2022.</p> <p>Review on 11/21/22 of the facility's Disaster drill log revealed:</p> <ul style="list-style-type: none"> <li>-1/22/22- 2nd shift.</li> <li>-2/22/22- 2nd shift.</li> <li>-3/8/22- 2nd shift.</li> <li>-4/7/22- 2nd shift.</li> <li>-4/22/22- 2nd shift.</li> <li>-5/7/22- Unknown Shift.</li> <li>-5/22/22- 2nd shift.</li> <li>-6/22/22- 2nd shift.</li> <li>-7/21/22- 1st shift.</li> <li>-7/22/22- 2nd shift.</li> <li>-8/11/22- 2nd shift.</li> <li>-8/22/22- 2nd shift.</li> <li>-9/8/22- 2nd shift.</li> <li>-9/24/22- 3rd shift.</li> <li>-10/11/22- 1st shift.</li> <li>-10/7/22- 2nd shift.</li> <li>-10/22/22- 2nd shift.</li> <li>-11/7/22- Unknown shift.</li> </ul> <p>-There were no disaster drills performed on the first or third shift for the first quarter of 2022.</p> <p>-There were no disaster drills performed on the first or third shift for the second quarter of 2022.</p> <p>Interview on 11/21/22 with the Supervisor revealed:</p> <ul style="list-style-type: none"> <li>-House operated mainly under two shifts.</li> <li>-The house was mostly empty during the day as</li> </ul>	V 114		

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V 114	Continued From page 2  clients were at their day programs and no staff were at home. -1st shift was from 8:00 am to 3:30 pm. -2nd shift was from 3:30 pm to 12:00 am. -3rd- shift was from 12:00 am to 8:00 am. -Only times that there were people at the home during the day was during the weekends. -He was unaware that mainly 2nd shift staff were conducting the drills. -He confirmed the facility failed to conduct fire and disaster drills under conditions that simulate emergencies quarterly and for each shift.	V 114		
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 reviews and interview the facility failed to obtain drug reviews every six months for one of three clients (#3) who received psychotropic drugs. The findings are:	V 121		

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V 121	Continued From page 3  Review on 11/21/22 of Client #3's record revealed: -Admission date of 1/9/12. -Diagnoses of Autism; Moderate Mental Retardation; Seizure Disorder; Hydrocele Right Testicle -Physician's order dated 8/2/22: -Alprazolam 1 milligram (mg), 1 tablet three times a day. -Chlorpromazine 200 mg, 1 tablet in the morning and 1 tablet at bedtime. -Aripiprazole 10 mg, 1 tablet twice a day. -Hydroxyzine 50 mg, 2 capsules at bedtime. -Lamotrigine 150 mg, 1 tablet twice a day. -Divalproex 500 mg, 4 tablets at bedtime. -Benzotropine 1 mg, 1 tablet twice a day. -The September, October and November 2022 Medication Administration Record (MAR) revealed Client #3 was administered the above medications daily. -There was no evidence of a psychotropic drug review for Client #3's medications in the last six months.  Interview on 11/21/22 with the Supervisor revealed: -Client #3 used a different pharmacy from the other residents. -He had called the pharmacy when he did not see a med review for Client #3 at the house and was informed pharmacy did not keep a copy of the last review. -He confirmed the six months psychotropic drug review for Client #3 was not completed.	V 121			
V 736	27G .0303(c) Facility and Grounds Maintenance  10A NCAC 27G .0303 LOCATION AND	V 736			

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V 736	<p>Continued From page 4</p> <p><b>EXTERIOR REQUIREMENTS</b></p> <p>(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 ensure facility grounds were maintained in a clean, safe and attractive manner. The findings are:</p> <p>Observation on 11/21/22 at about 1:20 pm of the Living area revealed: -The wall behind the couch needed to be painted over. -There were scratches made by chair rubbing against it.</p> <p>Observation on 11/21/22 at about 1:23 pm of the Kitchen revealed: -The cabinets needed to be replaced. They were worn out. -Bottom cabinets in the corner of the kitchen and next to kitchen range were broken. -Bottom of cabinets underneath the sink were broken/rotten.</p> <p>Observation on 11/21/22 at about 1:25 pm of the Entrance area revealed: -The paint on wall by entrance and next to Client #3's room was peeling off.</p> <p>Observation on 11/21/22 at about 1:27 pm of Client #3's Bedroom revealed: -The ceiling had stain from old water damage.</p>	V 736		

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V 736	<p>Continued From page 5</p> <p>Needed to be repainted. -The front door was dirty/stained.</p> <p>Observation on 11/21/22 at about 1:30 pm of the Hall to the Bedrooms revealed: -Light switch did not work. -Hall light did not turn on.</p> <p>Observation on 11/21/22 at about 1:33 pm of the Bathroom inside Client #4's Bedroom revealed: -The tub had a crack close to the wall. -There was water damage on the floor next to the tub. There was Mold/Mildew observed on area between the tub and the toilet.</p> <p>Observation on 11/21/22 at about 1:35 pm of the Main Bathroom revealed: -The toilet seat was soiled with urine. -Bottom of sink cabinet was rotten/broken. -Wall next to shower had several long scratches.</p> <p>Observation on 11/21/22 at about 1:45 pm of the Outside of the house revealed: -A siding by the entrance was broken. -Siding in front of the house was broken and had a large hole in it. -Wooden beams on corners of the house were rotten. -Old folding closet doors and other wood boards were leaning against the house on the left side.</p> <p>Interview on 11/21/22 with the Supervisor revealed: -He was aware of the things that needed to be replaced. -Handy person had been working on fixing some of the things around the house. -They also have had a hard time with the landlord fixing other things which he was responsible for</p>	V 736		

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V 736	Continued From page 6  replacing. -He confirmed the facility failed to ensure facility grounds were maintained in a safe, clean, attractive and orderly manner.  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 736		
V 738	27G .0303(d) Pest Control  10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (d) Buildings shall be kept free from insects and rodents.  This Rule is not met as evidenced by: Based on observations and interview the facility failed to keep the facility free of insects. The findings are:  Observation on 11/21/22 at approximately 1:23 pm of the dining area revealed: -Several bugs were observed flying around and landing on surveyor.  Observation on 11/21/22 at approximately 1:25 pm of the kitchen area revealed: -About 10 flying bugs were observed.  Observation on 11/21/22 at approximately 1:32 pm of the bathroom inside Client #4's room revealed: -About 10 flying bugs were observed.  Observation on 11/21/22 at approximately 1:35	V 738		

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V 738	<p>Continued From page 7</p> <p>pm of the main bathroom revealed: -About 15 flying bugs were observed.</p> <p>Interview on 11/21/22 with the Supervisor revealed: -Exterminator had been contacted and had already come to the house. -Reported that it was some kind of bug related to the fruit fly family. -Bugs were attracted to humid areas. They had been having some rotten areas which are also being addressed. -Moisture attracted the bugs. -Exterminator had laid out something to get rid of them, but the bugs needed to go to the poison to get killed. -He acknowledged facility failed to keep the facility free of insects.</p>	V 738		