

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL098-204</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/18/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>KYSEEM'S UNITY GROUP HOME, LLC #5</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>304 CLYDE AVEUE NORTH WILSON, NC 27893</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on November 18, 2022. Deficiencies were cited.</p> <p>This facility is licensed for the following category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for 3 and has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 108	<p><b>27G .0202 (F-I) Personnel Requirements</b></p> <p><b>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</b></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> <ul style="list-style-type: none"> <li>(1) general organizational orientation;</li> <li>(2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B;</li> <li>(3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and</li> <li>(4) training in infectious diseases and bloodborne pathogens.</li> </ul> <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 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.</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>(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 reviews, observations and interviews, the facility failed to provide training to meet the needs of the clients for 3 of 3 direct care staff audited (Staff #1, Staff #3 and staff #4). The findings are:</p> <p>Review on 11/17/22 of client #2's record revealed: -24 year old male -Admission date 2/10/22 -Diagnoses included Autism, Attention Deficit Hyperactivity Disorder, Moderate Intellectual Developmental Disability, Seizure Disorder, Pervasive Developmental Disorder, Mood Disorder, Sleep Apnea, gastroesophageal reflux disease (GERD). -Continuous positive airway pressure (CPAP) machine used at as indicated in risk needs support assessment 2/21/22.</p> <p>Review on 11/17/22/ of staff #1's personnel file revealed: -Hire date, 10/8/21 -No documentation of training on CPAP, or the CPAP cleaner and sanitizer machine.</p> <p>Review on 11/17/22 of staff #3's personnel file revealed: -Hire date, 8/24/19</p>	V 108		

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V 108	<p>Continued From page 2</p> <p>-No documentation of training on CPAP, or the CPAP cleaner and sanitizer machine.</p> <p>Review on 11/17/22 of staff #4's personnel file revealed: -Hire date, 3/5/17 -No documentation of training on CPAP, or the CPAP cleaner and sanitizer machine.</p> <p>Interview on 11/18/22 the Licensee stated: -Client #2 had the CPAP machine prior to being admitted and already knew how to use and clean it. -He would ensure staff received training on the CPAP machine. -There had been no adverse incidents with the use of the CPAP machine with client #2.</p>	V 108		
V 111	<p>27G .0205 (A-B) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to:</p> <ol style="list-style-type: none"> <li>(1) the client's presenting problem;</li> <li>(2) the client's needs and strengths;</li> <li>(3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission;</li> <li>(4) a pertinent social, family, and medical history; and</li> <li>(5) evaluations or assessments, such as</li> </ol>	V 111		

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V 111	<p>Continued From page 3</p> <p>psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs. (b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter referred to as the "plan," strategies to address the client's presenting problem shall be documented.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to complete an admission assessment for 1 of 3 audited clients (#1). The findings are:</p> <p>Review on 11/17/22 of client #1's record revealed: - 22 year old female admitted 11/13/21. - Diagnoses included Autism Spectrum Disorder, Mild Intellectual Developmental Disabilities - No completed admission assessment identifying a primary diagnosis of a developmental disability.</p> <p>During interviews on 11/17/22 Licensee stated: - There were no admission assessments for clients #1. - He has set an appointment for client #1 to get an assessment completed. .</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 111		

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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> <ol style="list-style-type: none"> <li>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</li> <li>(2) strategies;</li> <li>(3) staff responsible;</li> <li>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</li> <li>(5) basis for evaluation or assessment of outcome achievement; and</li> <li>(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.</li> </ol> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to develop and implement goals and strategies to address client needs for one of three</p>	V 112		

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V 112	<p>Continued From page 5</p> <p>audited clients (#2). The findings are:</p> <p>Review on 11/17/22 of client #2's record revealed: -24 year old male -Admission date 2/10/22 -Diagnoses included Autism, Attention Deficit Hyperactivity Disorder, Moderate Intellectual Developmental Disability, Seizure Disorder, Pervasive Developmental Disorder, Mood Disorder, Sleep Apnea, gastroesophageal reflux disease (GERD). -Continuous positive airway pressure (CPAP) machine used at as indicated in risk needs support assessment. -No goals or strategies to address client #2's use of the CPAP machine.</p> <p>Interview on 11/18/22 client #2 stated: -He used his CPAP machine nightly. -He knew how to clean his CPAP machine.</p> <p>Interview on 11/17/22 staff #4 stated: -He cleaned client #2 CPAP machine weekly.</p> <p>Interview on 11/18/22 the Licensee stated: -Staff #4 cleaned client #2' CPAP machine weekly. -He would ensure client #2's treatment plan was updated to include the CPAP machine. -The facility purchased water that was used in client #2's CPAP machine.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 112		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p>	V 114		

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V 114	<p>Continued From page 6</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 interviews the facility failed to ensure fire and disaster drills were held at least quarterly and repeated on each shift under conditions that simulate fire emergencies. The findings are:</p> <p>Review on 11/17/22 of facility records for October 2021 thru October 2022 revealed: Fire Drills: -Only one fire drill (8:00pm) for the October 2021 - December 2021 quarter was documented. -No fire drills prior to 1:00pm or after 5:00pm for the January 2022 - March 2022 quarter were documented. -No fire drills prior to 5:30pm or after 6:00pm for the April 2022 - June 2022 quarter were documented. -No fire drills prior to 3:00pm or after 4:30pm for July 2022 - October 2022 were documented.</p> <p>Disaster Drills: -No disaster drills for before or after 6:00pm were</p>	V 114		

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V 114	<p>Continued From page 7</p> <p>documented for the January 2022 - March 2022 quarter.</p> <p>-No disaster drills documented for the April 2022 - June 2022 quarter.</p> <p>-Only one disaster drill (3:30pm) completed from July 2022 - October 2022.</p> <p>Interview on 11/17/22 staff #4 stated:</p> <p>- He had been in a vehicular accident and there were some fire drill forms in his vehicle that had not been filed.</p> <p>-All other fire and disaster drill documentation had been provided for the surveyors review.</p> <p>Interview on 11/17/22 the Licensee stated:</p> <p>-Shifts at the facility were Monday - Friday 4:30pm - 7:00am and Weekend shifts were 7:00am - 7:00pm and 7:00pm - 7:00am.</p> <p>-He understood the requirement that fire and disaster drills were to be completed at least quarterly and repeated on each shift under conditions that simulate fire emergencies.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114		
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>	V 289		



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V 289	<p>Continued From page 8</p> <p>(1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental 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)&amp;(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)</p>	V 289		

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V 289	<p>Continued From page 9</p> <p>(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).</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to meet the scope of the license by admitting an individual without a primary diagnosis of a developmental disability. The findings are:</p> <p>Review on 11/16/22 of the facility's license revealed it was licensed as a 10A NCAC 27G .5600C Supervised Living for Adults With Developmental Disabilities.</p> <p>Review on 11/17/22 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- 22 year old female admitted 11/13/21.</li> <li>- Diagnoses included Autism Spectrum Disorder, Mild Intellectual Developmental Disabilities.</li> <li>- No completed admission assessment identifying a primary diagnosis of a developmental disability.</li> </ul> <p>During interviews on 11/17/22 Licensee stated:</p> <ul style="list-style-type: none"> <li>- There were no admission assessments for clients #1.</li> <li>- He has set an appointment for client #1 to get an assessment completed.</li> </ul> <p>This deficiency constitutes a re-cited deficiency</p>	V 289		

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V 289	Continued From page 10 and must be corrected within 30 days.	V 289		
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 observations and interviews, the facility was not maintained in a clean, attractive and orderly manner. The findings are:</p> <p>Observations on 11/17/22 between 10:30 am and 11:00am of the facility revealed:</p> <ul style="list-style-type: none"> <li>-The kitchen light over the stove was not working.</li> <li>-The linoleum on the floor on the left side of the stove was torn.</li> <li>-Brown stains on the floor beside the stove.</li> <li>-Blind over kitchen sink had broken slats.</li> <li>-Dead bugs in freezer.</li> <li>-Microwave had rust spots inside it.</li> <li>-Approximately 2 inch hole in the front side of the door leading into the kitchen; door was also cracked on the side.</li> <li>-Heavy dust on ceiling vent in the hallway.</li> <li>-Client #1 had heavy dust on his nightstand.</li> <li>-Client # 3's 5 drawer dresser had 1 knob missing on the first drawer on the right side.</li> <li>-The cabinet door was missing in the hall bathroom; linoleum was torn around the bathtub; molding missing around bathtub and wall; shower</li> </ul>	V 736		

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V 736	<p>Continued From page 11</p> <p>head was loose from wall. Client #1's window sill was dirty.</p> <p>Interview on 11/22/22 the Group Home Manager stated: -He understood the facility was required to be maintained in a clean, attractive and orderly manner.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		