

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL074-230	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 01/05/2023
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NAME OF PROVIDER OR SUPPLIER CAMELOT SUPERVISED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 108 GUINEVERE LANE GREENVILLE, NC 27858
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V 000	<p>INITIAL COMMENTS</p> <p>An annual, complaint and follow up survey was completed on January 5, 2023. The complaint was unsubstantiated (intake # NC00196040). 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 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</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 reviews and interviews the facility failed to ensure fire and disaster drills were held quarterly and repeated on each shift. The findings are:</p>	V 114		

Division of Health Service Regulation 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>Reviews on 1/03/23 and 1/04/23 of the facility's fire and disaster drill documentation January 2022 - December 2022 revealed:</p> <ul style="list-style-type: none"> - Shift hours were identified as weekdays 6:00 am - 2:00 pm, 2:00 pm - 10:00 pm, 10:00 pm - 6:00 am; and Saturday and Sunday 8:00 am - 8:00 pm, and 8:00 pm - 8:00 am. - No fire or disaster drills documented for 8:00 am - 8:00 pm weekend shift for entire year. - No fire or disaster drills documented for 8:00 pm - 8:00 am weekend shift for the second quarter (April - June) or the third quarter (July - September). - No fire or disaster drills documented for 6:00 am - 2:00 pm weekday shift for the fourth quarter (October - December). <p>During interview on 1/03/23 staff #5 stated fire and disaster drills were conducted monthly.</p> <p>During interviews on 12/21/22 and 1/04/23 the Director stated:</p> <ul style="list-style-type: none"> - The facility's shifts were: Monday through Friday, 8:00 am - 4:00 pm, 4:00 pm - 12:00 midnight; and 12:00 midnight - 8:00 am; and Saturday and Sunday 8:00 am - 8:00 pm, and 8:00pm - 8:00 am. -The same staff worked both the weekday shifts and the weekend shifts. <p>During interview on 1/04/23 the Licensee's Quality Management Director stated:</p> <ul style="list-style-type: none"> - Drills were not required for the weekend 12 hour shifts because the same staff worked the weekend and weekday shifts. - Shift hours as defined by policy were 6:00 am - 2:00 pm; 2:00 pm - 10:00 pm; and 10:00 pm - 6:00 am. 	V 114		

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V 118	Continued From page 2	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>	V 118		

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V 118	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure medications administered were recorded on each client's Mar immediately after administration affecting 3 of 3 current clients (#1, #2, and #3). The findings are:</p> <p>Review on 12/21/22 of client #1's record revealed:</p> <ul style="list-style-type: none"> - 32 year old male admitted 5/01/20. - Diagnoses included Intellectual/Developmental Disability, moderate; Autism Spectrum Disorder; Tourette's Syndrome; Intermittent Explosive Disorder; hypertension; and Diabetes. - Physician's orders signed and dated 6/12/19 and 9/09/22: benazepril (high blood pressure) 20 mg (milligrams) 1 tablet twice daily; Folic Acid (dietary supplement) 1 mg 1 tablet every morning; guanfacine (high blood pressure and attention deficit hyperactivity disorder) 4 mg one tablet every morning; hydrochlorothiazide (high blood pressure) 12.5 mg 1 capsule twice daily; Metformin (diabetes) 1000 mg 1 tablet twice daily; paliperidone (anti-psychotic) 9 mg 1 tablet every morning; sertraline (anti-depressant) 100 mg 1 tablet at bedtime. - Physician's order signed and dated 9/24/21 and 9/09/22: check blood sugar once daily prior to breakfast. <p>Review on 12/21/22 of client #1's MARs for October - December 2022 revealed:</p> <ul style="list-style-type: none"> - Transcriptions for medications as ordered. - The following blanks: benazepril 8:00 pm 10/12/22 and 7:00 am 10/23/22. blood sugar check 10/23/22 Folic Acid 10/23/22 guanfacine 10/23/22 hydrochlorothiazide 8:00 pm 10/12/22, 7:00 am 	V 118		

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V 118	<p>Continued From page 4</p> <p>10/23/22 Metformin 8:00 pm 10/12/22, 7:00 am 10/23/22 paliperidone 10/23/22 sertraline 10/12/22 - No documented explanation for the blanks.</p> <p>During interview on 1/04/23 client #1 stated he took his medication every day with staff assistance, in the morning and at night, and had never missed any doses.</p> <p>Review on 12/21/22 of client #2's record revealed: - 25 year old male admitted 5/01/19. - Diagnoses included Intellectual/Developmental Disability, profound; Autism Spectrum Disorder with language impairment; Other Persistent Mood (affective) Disorder. - Physician's order signed and dated 4/01/22 and 9/09/22: montelukast (asthma) 10 mg 1 tablet every evening. - Physician's orders signed 4/04/22 and 9/09/22: clonidine (high blood pressure) 0.2 mg 1 tablet at bedtime; Latuda (anti-psychotic) 120 mg 1 tablet every morning with food; quetiapine (anti-psychotic) 100 mg 1.5 tablet (150 mg) every morning. - Physician's orders signed and dated 5/01/19 and 9/09/22: lamotrigine (mood stabilizer) 100 mg 3 tablets (300 mg) every morning; lamotrigine 100 mg 4 tablets (400 mg) at bedtime; and levetiracetam (seizures) 750 mg 1 tablet twice daily.</p> <p>Review on 12/21/22 of client #2's MARs for October - December 2022 revealed: - Transcriptions for medications as ordered. - The following blanks: clonidine 10/12/22 lamotrigine 300 mg 10/23/22</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>lamotrigine 400 mg 10/12/22 Latuda 10/23/22 levetiracetam 8:00 pm 10/12/22 and 7:00 am 10/23/22 montelukast 10/12/22 quetiapine 10/12/22 sertraline 10/23/22 - No documented explanation for the blanks.</p> <p>Client #2 was non-verbal and unable to meaningfully participate in an interview.</p> <p>Review on 12/21/22 of client #3's record revealed: - 45 year old male admitted 6/15/10. - Diagnoses included Autism Spectrum Disorder with language impairment; Intellectual/Developmental Disability, profound. - Physician's order signed and dated 3/03/22 for trazodone (anti-depressant) 50 mg 1/2 tablet every evening. - Physician's orders signed and dated 3/13/19 and 9/19/22 for buspirone (anti-anxiety) 5 mg 1 tablet twice daily.</p> <p>Review on 12/21/22 of client #3's MARs for October - December 2022 revealed: - Transcriptions for medications as ordered. - The following blanks: buspirone 8:00 pm 10/12/22 trazodone 10/12/22 - No documented explanation for the blanks.</p> <p>Client #3 was non-verbal and unable to meaningfully participate in an interview.</p> <p>During interview on 1/04/23 staff #4 stated she administered medications on weekends when she filled in for residential staff; medications were always available.</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>During interview on 1/03/23 staff #5 stated she administered medications on weekends and they were always available.</p> <p>During interview on 1/06/23 staff #6 stated she administered medications and they were always available.</p> <p>During interview on 12/21/22 the Director stated: - Client #1's glucometer "was not working" one day in November and they were able to get a new one from the pharmacy. - The facility used an electronic MAR platform. - She could not explain the blanks on the October MARs.</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 observations and interview the facility was not maintained in safe, clean, attractive and orderly manner. The findings are:</p> <p>Observations on 12/21/22 at approximately 11:27 am revealed: - A nail sticking through the upholstery on the dining room chair closest to the front window.</p>	V 736		

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V 736	<p>Continued From page 7</p> <ul style="list-style-type: none"> - The stove exhaust hood was rusty and there was no light bulb in the socket. - The lower right side of the dishwasher was rusty. - There was no cover on the kitchen ceiling light fixture. - A pronounced dip in the floor from the kitchen into the hallway. - The air return grate under the stairs was heavily dusty. - Client #3's bathroom had damage to the baseboard by the shower stall. - Organic matter in client #2's ceiling light fixture. - The blind in the front window of client #2's bedroom had broken slats. - Smudges on the wall beside client #2's bed. - Client #2's bedroom door was broken at the top corner. - Client #1's front window blind was broken. - Damage to client #1's bedroom door frame. - Client #1's bedroom ceiling fan had no blades. - There was no knob on client #'s closet door. - The fixtures in the second floor hall bath tub were not flush to the tub wall. - A pronounced dip in the floor at the bathtub in the second floor hall bath. - The second floor hall bath toilet tank lid did not properly fit the tank. - The vinyl finish on the loveseat and sofa in the living room was peeling. - Particulate matter and small brown stains on the stairs. <p>During interviews on 12/21/22 and 1/04/23 the Director stated repairs to the facility were ongoing; the floor was being replaced. She would ensure the items cited were addressed.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		

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V 752	<p>27G .0304(b)(4) Hot Water Temperatures</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observations and interview the facility failed to maintain water temperatures between 100 and 116 degrees Fahrenheit in areas where clients were exposed to hot water. The findings are:</p> <p>Observations between 11:27 am and 11:45 am 12/21/22 revealed: - Hot water in the second floor hall bath tub was 124 degrees Fahrenheit; hot water temperature in the second floor hall bath sink was 122 degrees Fahrenheit. - Hot water in client #3's bathroom was 122 degrees Fahrenheit in the sink and 120 degrees Fahrenheit in the shower.</p> <p>During interview on 1/04/23 the Director stated the water temperature was adjusted at the water heater on 12/21/22.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 752		