

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL049-145	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/31/2023
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NAME OF PROVIDER OR SUPPLIER THE GROVE	STREET ADDRESS, CITY, STATE, ZIP CODE 247 CHESTNUT GROVE ROAD STATESVILLE, NC 28625
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V 000	<p>INITIAL COMMENTS</p> <p>An annual, complaint and follow up and complaint survey was completed on January 31, 2023. The complaints were substantiated (Intake #NC00197427 and Intake #NC00197608). Deficiencies were cited.</p> <p>This facility is licensed for the following survey category: 10A NCAC 27G .5600B Supervised Living for Minors with Developmental Disability.</p> <p>This facility is licensed for 4 and currently has a census of 4. 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 conduct fire and disaster drills once per shift per quarter. The findings are:</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>Review on 1/27/23 of the facility's fire drills revealed: Review on 1/27/23 of the facility's fire and disaster drills from January 1, 2022 to January 27, 2023 revealed: -A stack of fire drill documentation was given to this surveyor -On the front of the documentation was a sticky note which read "missing June, July, September, November, December."</p> <p>Further review on 1/27/23 of the fire drills revealed: -No documentation of fire drills conducted in the months of June, July, September, November, or December of 2022 -5/13/22: no documented time of the fire drill</p> <p>Review on 1/27/23 of the facility's disaster drills revealed: -No documentation of disaster drills conducted in the months of May, June, September, November, or December of 2022</p> <p>Interview on 1/26/23 with staff #2 revealed: -Had not conducted any fire or disaster drills on her shifts</p> <p>Interview on 1/30/23 with the Qualified Professional revealed: -"They (fire and disaster drills) are to be done once a month. Each home and staff should do the documentation and clients should know what to do and where to go. We are to do the fire and disaster drills separately. I wasn't aware until recently, the drills were completed. I will start with an in-service training. I will put out a calendar outlining when they are to be done, January to December, once per shift per quarter."</p>	V 114		

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V 114	Continued From page 2 Interview on 1/27/23 with the Vice President of Operations revealed: -There was no additional documentation for fire or disaster drills -"Some of the drills were not completed. I will address this with staff."	V 114		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (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. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (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. (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: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation	V 118		

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V 118	<p>Continued From page 3</p> <p>with a physician.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility staff failed to follow the physician's written orders for 1 of 3 clients (#3). The findings are:</p> <p>Review on 1/26/23 of client #3's MARs revealed: -Physician's orders dated 8/9/22 for Propranolol 20 milligrams once by mouth three times per day. -"Check blood pressure 3 times daily prior to giving Inderal. If blood pressure is less than 90/60 or pulse less than 60, hold and call nursing." -No documentation of an 8pm blood pressure check or pulse checks on 1/16/23, 1/17/23, 1/21/23 or 1/25/23 -No documentation of an 4pmg blood pressure check or pulse checks on 1/21/23 and 1/25/23 -No documentation on these dates of client #3 being out of the facility or on home visits.</p> <p>Interview on 1/26/23 with staff #2 revealed: -Had not worked at the facility at 4pm or 8pm on those dates -"Someone is not doing their job."</p> <p>Interview on 1/30/23 with the Qualified Professional revealed: -"I was vaguely aware but wasn't sure how many times for his blood pressure and pulse checks. I will review his MARs, review the information with nursing and set up training by the nurses. I will find out who is not documenting, and they will receive corrective action."</p>	V 118		

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V 118	Continued From page 4 This is a recited deficiency and must be corrected within 30 days.	V 118		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (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. (b) A supervised living facility shall be licensed if the facility serves either: (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;	V 289		

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V 289	<p>Continued From page 5</p> <p>(5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or</p> <p>(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)&(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) (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 reviews and interviews, the facility failed to ensure that services were only provided to minors affecting 1 of 4 clients (#3) The findings are:</p> <p>Review on 1/26/23 of the facility's Division of Health Service Regulation licensure documents revealed: -The facility had obtained waivers in the past in</p>	V 289		

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V 289	<p>Continued From page 6</p> <p>order to provide time-limited services to clients older than 18.</p> <p>-There were no current waivers for client #3 to receive services at the facility after they reached the age of 18.</p> <p>Review on 1/26/23 of client #3 's record revealed:</p> <p>-An admission date of 4/1/20</p> <p>-Diagnoses of Autism, Mild Intellectual Developmental Disability, Cerebral Palsy, Strabismus with Right Esotropia (eye pointed inward), Right Esotropia, Severe Cerebellar Atrophy (affects the nerves in the back of the brain), Gastrostomy Tube (feeding tube) and Stroke</p> <p>-Age: 20</p> <p>Interview on 11/17/2021 with client #3's Guardian revealed:</p> <p>"I am assuming the administration has the waiver. Are you kidding me? They haven't done one? He's been there several years ..." and have that under control."</p> <p>Interview on 1/30/23 with the Qualified Professional (QP) revealed:</p> <p>"[Client #3] is 21 years old and we are licensed for minors. I will contact the care coordinator for [client #3], inform her of the need for a waiver and partner with her to work on getting the waiver completed and send it to your section chief. I will schedule it, so it is completed annually."</p> <p>Interview on 1/27/23 with the Vice President of Operations revealed:</p> <p>-The Agency had been without an Administrator since December 2022</p> <p>-Was aware a waiver needed to be requested annually</p>	V 289		

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V 289	Continued From page 7 -"I will work on that immediately." This is a recited deficiency and must be corrected within 30 days.	V 289		
V 736	27G .0303(c) Facility and Grounds Maintenance 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. This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a clean, safe, attractive, or orderly manner. The findings are: Observations on 1/26/23 at 9:12am of the facility revealed: -Client #1's bedroom had a four-foot x two-foot area on the wall next to the window where the drywall was peeled. -The bottom left panel of the closet door was cracked approximately two inches -A one inch x one inch hole in the upper right panel of the bedroom door -Dresser drawers would not close properly -Three areas on the wall in client #2's bedroom had missing paint and were not patched -In client #3's bedroom, there was a four inch by three-inch patch of exposed sheet rock to the right of the light switch -An indentation in the hallway's wall a four inch by	V 736		

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V 736	<p>Continued From page 8</p> <p>half inch crack below it -The wall also had exposed sheet rock and was missing paint</p> <p>Interview on 1/26/23 with staff #1 revealed: -Had worked at the facility for 4 weeks -The walls, the holes, and the dresser in client #1's room "have been like that since I started here. They need to make repairs."</p> <p>Interview on 1/30/23 with the Qualified Professional revealed: -"I will put in work orders with maintenance to address the holes in the walls. I will follow up with them to see how timely it can be repaired and what tools he will need. I will look to see if the drawers can be repaired in a safe manner. If they can't, I will find newer and more functional dressers."</p>	V 736		