

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-243	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/20/2022
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NAME OF PROVIDER OR SUPPLIER HOUSE OF CARE, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 5800 LAKE ELTON ROAD DURHAM, NC 27713
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on December 20, 2022. The complaint was substantiated (Intake #NC00195556). 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>The facility is licensed for 3 beds and currently has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 113	<p>27G .0206 Client Records</p> <p>10A NCAC 27G .0206 CLIENT RECORDS</p> <p>(a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to:</p> <p>(1) an identification face sheet which includes:</p> <p>(A) name (last, first, middle, maiden);</p> <p>(B) client record number;</p> <p>(C) date of birth;</p> <p>(D) race, gender and marital status;</p> <p>(E) admission date;</p> <p>(F) discharge date;</p> <p>(2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV;</p> <p>(3) documentation of the screening and assessment;</p> <p>(4) treatment/habilitation or service plan;</p> <p>(5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician;</p> <p>(6) a signed statement from the client or legally responsible person granting permission to seek</p>	V 113	See page #3.	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

[Redacted Signature]

TITLE

Director / GP

(X6) DATE

1/13/2023

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V 113	<p>Continued From page 1</p> <p>emergency care from a hospital or physician; (7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to ensure records were completed and up to date for three of three audited clients (#1, #2 and #3). The findings are:</p> <p>Review on 12/20/22 of Client #1's record revealed: -Admission date of 10/2022. -Diagnoses of Mild Mental Retardation; Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder, Chromosomal Translocation, Seasonal Allergies, Mild Acne, History of Asthma , History of Staph infections and Methicillin-resistant Staphylococcus aureus (MRSA). -Treatment plan dated 11/1/22. -There was no daily documentation of progress</p>	V 113	<p>See page #3.</p> <p>See page #3.</p>	
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V 113	<p>Continued From page 2</p> <p>toward outcomes (Grid notes) from 12/16/22 to 12/20/22.</p> <p>Review on 12/20/22 of Client #2's record revealed: -Admission date of 3/15/21. -Diagnoses of Severe Intellectual and Developmental Disabilities; Cerebral Palsy; Neurogenic Bladder; Osteoporosis; Hand Contractures. -Treatment Plan dated 1/1/22. -There was no daily documentation of progress toward outcomes (Grid notes) from 12/16/22 to 12/20/22.</p> <p>Review on 12/20/22 of Client #3's record revealed: -Admission date of 2003. -Diagnoses of Mixed Hyperlipidemia; Hype 2 Diabetes Mellitus; Autism; Hyperoxaluria; Iron Deficiency Anemia. -Treatment Plan dated -There was no daily documentation of progress toward outcomes (Grid notes) from 12/16/22 to 12/20/22.</p> <p>Interview on 12/20/22 with Staff #4 revealed: -He had been at the house for about a month. -He had completed the progress notes for the clients. -He had not done any notes for the clients since 12/15/22.</p> <p>Interview on 12/20/22 with the Owner revealed: -She had taken paperwork from the home to bring to the office and had not brought in the forms after 12/15/22. -She acknowledged there were no Grid notes or any other kind of progress notes toward Clients #1, #2 and #3's goal outcomes (Grid notes) from</p>	V 113	<p>Client #1, #2, and #3, progress toward outcomes, (grid notes) was completed, via paper grid and was documented as a late entry.</p> <p>The QP/Director, provided Staff at the group home, with updated grids for Client #1, #2, and #3 to be completed and documented as a late entry.</p> <p>The QP of House of Care, Inc. will ensure that the grids are placed in the Client's file to enable Staff to complete daily documentation.</p> <p>The QP of House of Care, Inc. will re-train Staff to ensure that they understand the importance of daily documentation of services.</p> <p>The QP will monitor all service documentation to ensure compliance at the group home.</p>	<p>On going</p> <p>12-21-22</p> <p>On going</p> <p>1-18-23</p> <p>On going</p>

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V 113	Continued From page 3 12/16/22 to 12/20/22.	V 113	See page #5	
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	See page #5	

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V 118	<p>Continued From page 4</p> <p>This Rule is not met as evidenced by: Based on record review, observation, and interview the facility failed to: A) Ensure medication was available according to the physician order for one of three audited clients (#1 and #3); B) Ensure the Medication Administration Record (MAR) was kept current affecting three of three audited clients (#1, #2 and #3); C) to have updated physician orders for administered medications affecting one of three audited clients (#1.) and D) Ensure medications were being 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 affecting two of three clients (#1 and #2.) The findings are:</p> <p>Review on 12/20/22 of Client #1's record revealed: -Admission date of 10/2022. -Diagnoses of Mild Mental Retardation; Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder, Chromosomal Translocation, Seasonal Allergies, Mild Acne, History of Asthma , History of Staph infections and Methicillin-resistant Staphylococcus aureus (MRSA).</p> <p>Review on 12/20/22 of Client #1's physician's orders dated 10/20/22 revealed: -Aripiprazole 30 milligrams (mg), one tablet daily. -Divalproex Sodium 500 mg, one tablet daily in the morning. -Hydroxyzine 50 mg, one tablet in the morning, 1 tablet @ 2pm and 1 tablet in the evening (4 pm).</p>	V 118	<p>The QP of House of Care, Inc. shall request for all physician orders to be placed in the MAR book and make sure it is updated in conjunction with the pharmacy. Staff will document on all administered medications for all Clients.</p> <p>House of Care, Inc. contracted a Registered Nurse (RN) to provide Staff #4, Medication Management Training. All Staff at Lake Elton received Medication Management Training.</p> <p>The QP will audit the MAR in conjunction with the pharmacy to ensure compliance.</p>	<p>12-21-22</p> <p>12-22-22</p> <p>On going</p>

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V 118	<p>Continued From page 5</p> <p>-Benztropine 1 mg, one tablet twice a day. -Haloperidol 2 mg, one tablet in the morning, one tablet at 4 pm. Take 2 tablets at noon as needed for agitation. There were no orders available for the following medications: -Loratadine 10 mg, one tablet daily. -Losartan 25 mg, one tablet daily. -Montelukast 10 mg, one tablet daily.</p> <p>Observation on 12/20/22 at 10:40 am of Client #1's medications revealed: -Aripiprazole 30 (mg)- medication as available. -Divalproex Sodium 500 mg- medication was available. -Hydroxyzine 50 mg- medication was available. -Benztropine 1 mg- medication was available. -Haloperidol 2 mg- medication was available. -Loratadine 10 mg- medication was not available. -Losartan 25 mg- medication was not available. -Montelukast 10 mg- medication was not available.</p> <p>Review on 12/20/22 of Client #1's MARs for October 2022 through December 2022 revealed blanks on the following dates: -Aripiprazole 30 (mg)- 12/20. -Divalproex Sodium 500 mg- 12/20. -Hydroxyzine 50 mg- 12/20 at 8:00 am. -Benztropine 1 mg- 12/20 at 8:00 am. -Haloperidol 2 mg- 12/20 at 8:00 am. -Loratadine 10 mg- 12/20. -Losartan 25 mg- 12/20. -Montelukast 10 mg- 12/20.</p> <p>Review on 12/20/22 of Client #2's record revealed: -Admission date of 3/15/21. -Diagnoses of Severe Intellectual and Developmental Disabilities; Cerebral Palsy;</p>	V 118	<p>See page #5.</p> <p>House of Care, Inc. has trained all Staff with Medication Management Training from a contracted Registered Nurse (RN). Staff was also trained to ensure that administered medication to Clients will be documented correctly on the MAR, per the physicians order.</p>	12-22-22
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V 118	<p>Continued From page 6</p> <p>Neurogenic Bladder; Osteoporosis; Hand Contractures.</p> <p>Review on 12/20/22 of Client #2's physician's orders revealed: Orders dated 4/20/22: -Omeprazole 20 mg, one capsule daily. Orders dated 7/18/22: -Fluticasone 50 mcg, Place two sprays in each nostril daily. -Meloxicam 15 mg, one tablet daily -Tamsulosin 0.4 mg, one capsule daily. -Gabapentin 300 mg, one capsule in the evening. -Tizanidine 4 mg, one tablet in the evening.</p> <p>Observation on 12/20/22 at 9:40 am of Client #2's medications revealed: -Omeprazole 20 mg, was available. -Fluticasone 50 mcg, was available. -Meloxicam 15 mg, was available. -Tamsulosin 0.4 mg, was available. -Gabapentin 300 mg, was available. -Tizanidine 4 mg, was available.</p> <p>Review on 12/20/22 of Client #2's MARs for October 2022 through December 2022 revealed blanks on the following dates: -Omeprazole 20 mg- 12/17, 12/18, 12/20. -Fluticasone 50 mcg- 12/17, 12/18, 12/20. -Meloxicam 15 mg- 12/17, 12/18, 12/20. -Tamsulosin 0.4 mg- 12/17, 12/18, 12/20. -Gabapentin 300 mg- 12/17, 12/18. -Tizanidine 4 mg- 12/17, 12/18.</p> <p>Review on 12/20/22 of Client #3's record revealed: -Admission date of 2003. -Diagnoses of Mixed Hyperlipidemia; Hype 2 Diabetes Mellitus; Autism; Hyperoxaluria; Iron</p>	V 118	See page #5	
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V 118	<p>Continued From page 7</p> <p>Deficiency Anemia. -Physician's note informing that Client #3 was able to self administer his medications.</p> <p>Review on 12/20/22 of Client #3's physician's order dated 7/29/22 revealed: -Rosavastatin 10 mg, one tablet daily with evening meal. -Amlodipine Besylate 10 mg, one tablet daily. -Ferrous Sulfate 45 mg, one tablet daily.</p> <p>Observation on 12/20/22 at 10:10 am of Client #3's medications revealed: -Rosavastatin 10 mg, bottle was empty. -Amlodipine Besylate 10 mg, bottle was empty. -Ferrous Sulfate 45 mg, there were none available.</p> <p>Review on 12/20/22 of Staff #4's personal record revealed: -Date of hire was 12/1/22. -He was hired as a Paraprofessional. -He did not have a certificate of completing and passing the medication administration training.</p> <p>Interview on 12/20/22 with Staff #4 revealed: -He had been working at the house close to a month. -Staff reported that he had given all medications to the clients. -He had not logged in the MAR for today yet.</p> <p>Interview on 12/19/22 with the House Manager revealed: -He was in charge of administrating the client's medications. -Client #3 was able to self administer his medications. -Denied placing false information on the client's records.</p>	V 118	<p>See page #5</p> <p>House of Care, Inc. has trained all Staff with Medication Management Training from a contracted Registered Nurse (RN). Staff was also trained to ensure that administered medication to Clients will be documented correctly on the MAR, per the physicians order.</p> <p>12-22-22</p>

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V 118	Continued From page 8 Interview on 12/20/22 with the Owner/Director revealed: -Regarding blanks on the MAR: she was not aware that there were blanks on the MAR until she presented them to the surveyor. -She would review information with the house manager as he was responsible for making sure that the MARs were completed properly. -She had assigned the house manager to only administer the medications due to the high staff turn over and always having to train the staff. -House manager lived a few blocks away from the group home and was able to come in daily to administer the medications. -Regarding the administration of medications by an untrained staff: Staff #4 had been registered to attend Medication Administration class. He had not attended it yet. -He only attended pre-service training class from staff at the program. Class was not administered by a nurse or a pharmacist. -She was not aware that he had administered medication for the clients today in the morning. -She acknowledged that facility failed to: A) Ensure medication was available according to the physician order for one of three audited clients (#1 and #3); B) Ensure the Medication Administration Record (MAR) was kept current affecting three of three audited clients (#1, #2 and #3); C) to have updated physician orders for administered medications affecting one of three audited clients (#1.) and D) Ensure medications were being 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 affecting two of three clients (#1 and #2.)	V 118	Staff #4, recieved Medication Management Training by a contracted Registered Nurse (RN) The Director of House of Care, Inc. provided Staff with all grids for the Clients in the group home. The Director and the QP will ensure that all Doctor's orders will be updated and placed in the MAR binder.	12-22-22 12-21-22 On going