

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL064-161	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/31/2023
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NAME OF PROVIDER OR SUPPLIER KOODY HEALTHCARE SERVICES, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 601 COLBY COURT ROCKY MOUNT, NC 27803
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 1/31/23. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness</p> <p>This facility is licensed for five and currently has a census of four. The survey sample consisted of audits of three current clients.</p>	V 000		
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>	V 118		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Division of Health Service Regulation

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V 118	<p>Continued From page 1</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> <p>This Rule is not met as evidenced by: Based on record review, observation and interview the facility failed to ensure medications were administered by the written order of a physician for one of three audited clients (#1) and one of three audited clients (#2)'s MAR was kept current. The findings are:</p> <p>A. Review on 1/30/23 of client #1's record revealed: -Admission date of 2/4/22 -Diagnoses of Mild Intellectual Developmental Disorder (IDD) and Schizophrenia -Physician order dated 1/6/23 revealed "Depakote (Bi-polar) Sod 500 miligram (mg) 1 at AM and 1 at PM"</p> <p>Further review on 1/30/23 of client #1's MAR revealed Depakote 500 mg given at 8:00 AM and 2:00 PM.</p> <p>Observation on 1/30/223 at 10:25 AM revealed client #1 walked in the kitchen and asked staff for his medication. Staff #1 gave him his medication at that time.</p> <p>Interview on 1/30/23 client #1 stated: -He did not take his morning medications today because he slept late.</p>	V 118		

Division of Health Service Regulation

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V 118	<p>Continued From page 2</p> <ul style="list-style-type: none"> -Sometimes when he slept late, he did not take it until he woke. -Had not missed any medications in the mornings. -Only took one medication in the mornings. <p>B. Review on 1/30/23 of client #2's record revealed</p> <ul style="list-style-type: none"> -Admission date of 2/4/22 -Diagnoses of Schizoaffective Unspecified, Coronary Hyperlipidemia, Hypertension and Diabetes Type II <p>Review on 1/30/23 of client #2's medications revealed:</p> <ul style="list-style-type: none"> -Haloperidol (Schizophrenia) 10 mg twice a day and Lithium Carbonate (Bi-polar) ER (extended Release) 450 mg once a day were present in a bubble pack with other medications. <p>Review on 1/30/23 of client #2's January 2023 MAR revealed no Haloperidol or Lithium Carbonate listed. MAR's for October and December 2022 had Haloperidol and Lithium Carbonate listed and initialed as administered.</p> <p>Further review on 1/20/23 of client #2's record revealed no physician orders present for any of client #2's current medications present in the facility.</p> <p>Interview on 1/30/23 the Licensee stated:</p> <ul style="list-style-type: none"> -Client #1 often refused to take his morning medications. -Staff would prompt him to take it, "but he does what he wants." -She was a Nurse Practitioner and trained the staff on medication administration. -She reviewed all medications as they arrive in the facility. 	V 118		

Division of Health Service Regulation

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V 118	Continued From page 3 -Checked MAR's weekly along with medications and had not noticed client #2's MAR's not having all of his medications listed. -The pharmacy sends them the MARs monthly. -Did not always get the client's physician orders when they leave an appointment.	V 118		
V 752	27G .0304(b)(4) Hot Water Temperatures 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. This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to ensure hot water temperatures were maintained between 100 - 116 degrees Fahrenheit. The findings are: Review on 1/30/23 of client #1's record revealed: -Admission date of 2/4/22 -Diagnoses of Mild Intellectual Developmental Disorder (IDD) and Schizophrenia Review on 1/30/23 of client #2's record revealed: -Admission date of 2/4/22 -Diagnoses of Schizoaffective Unspecified, Coronary Hyperlipidemia, Hypertension and Diabetes Type II Review on 1/30/23 of client #3's record revealed:	V 752		

Division of Health Service Regulation

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V 752	<p>Continued From page 4</p> <ul style="list-style-type: none"> -Admission date of 9/26/22 -Diagnoses of Traumatic Brain Injury (TBI), left Hemiparesis, Hyperlipidemia, Schizoaffective disorder-Bipolar type and Seizure disorder. <p>Review on 1/30/23 of the facility's "Hot Water Temperature Record" revealed:</p> <ul style="list-style-type: none"> -From September 15, 2022-January 15, 2023 for the monthly checks, the water temperatures ranged from 101-111 degrees Fahrenheit in the kitchen and two client bathrooms. <p>Observation on 1/30/23 at 12:40 PM revealed the following:</p> <ul style="list-style-type: none"> -The kitchen sink water temperature was 138 degrees Fahrenheit. -Client #1 and #2's bathroom sink and shower water temperature was 140 degrees Fahrenheit. -Client #3's bathroom sink and shower water temperature was 140 degrees Fahrenheit. <p>Interview on 1/30/23 the Licensee stated:</p> <ul style="list-style-type: none"> -She checked the water temperatures monthly. -Had not noticed the water to be over 111 or 112 degrees. -Will have the water heater turned down. -Clients had not complained of water temperature being too hot. <p>Review on 1/30/23 of the Plan of Protection dated 1/30/23 completed by the Qualified Professional revealed:</p> <ul style="list-style-type: none"> -"What immediate action will the facility take to ensure the safety of the consumers in your care? Group Home Administrator (Licensee) will review current thermometer, as previous hot water documented temperature reading are ranging from 101-111. A new thermometer will be purchased if deemed necessary and Group Home Administrator and other Koody Healthcare 	V 752		

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V 752	<p>Continued From page 5</p> <p>staff will be trained on how to properly use a thermometer.</p> <p>-Describe your plans to make sure the above happens Group Home Administrator will make a check list to ensure the proper/above steps are completed. Group Home Administrator will document and maintain trainings."</p> <p>Clients with diagnoses of Schizophrenia, Schizoaffective Disorder, TBI and Mild IDD. The facility had two bathrooms with the sink and showers each with water temperatures of 140 degrees Fahrenheit. The kitchen sink had a temperature of 138 degrees Fahrenheit. This deficiency constitutes a Type A2 rule violation for substantial risk of serious harm and must be corrected within 23 days. No administrative penalty has been assessed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.</p>	V 752		