STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL092-862	A. BUILDING: _____ B. WING _____	R 02/20/2023

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HEAVENLY PLACE 2	3120 TUCKLAND DRIVE RALEIGH, NC 27610

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V 000	INITIAL COMMENTS An annual, complaint and follow up survey was completed on 2/20/23. The complaint was substantiated (Intake #00196777). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness This facility is licensed for six and currently has a census of five. The survey sample consisted of audits of three current clients.	V 000		
V 113	27G .0206 Client Records 10A NCAC 27G .0206 CLIENT RECORDS (a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to: (1) an identification face sheet which includes: (A) name (last, first, middle, maiden); (B) client record number; (C) date of birth; (D) race, gender and marital status; (E) admission date; (F) discharge date; (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV; (3) documentation of the screening and assessment; (4) treatment/habilitation or service plan; (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; (6) a signed statement from the client or legally	V 113		

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V 113	Continued From page 1 responsible person granting permission to seek 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. This Rule is not met as evidenced by: Based on record review and interview the facility failed to have documentation of progress toward outcomes for 3 of 3 audited clients. The findings are: Review on 2/15/23 of client #1's record revealed: -Admission date of 3/23/22 -Diagnoses of Impulse Control Disorder, Bipolar and Moderate Intellectual Developmental Disability (IDD). Review on 2/15/23 of client #2's record revealed: -Admission date of 11/7/22 -Diagnoses of Schizoaffective Disorder, Bipolar Disorder, Moderate IDD	V 113		

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V 113	Continued From page 2 Review on 2/15/23 of client #3's record revealed: -Admission date of 4/18/22 -Borderline IDD and Schizophrenia Review on 2/15/23 of the above client records did not reveal any documentation present from staff or the Qualified Professional (QP)regarding their progress toward outcomes. Interview on 2/15/23 the QP stated: -Had completed some progress notes but not sure how many. -Had not printed the off and placed them in the records. -Had some on his computer. -Staff will document behaviors, not sure where those are located. [This deficiency constitutes a re-cited deficiency and must be corrected within 30 days]	V 113		
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	V 118		

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V 118	Continued From page 3 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 with a physician. This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure medications were administered on the written order of a physician for one of three (#2) clients. The findings are: Review on 2/15/23 of client #2's record revealed: -Admission date of 11/7/22 -Diagnoses of Schizoaffective Disorder, Bipolar Disorder, Moderate IDD A. Review of client #2's physician order dated 11/8/22 for Albuterol Hfa 90 mg twice a day. Review of client #2's medications revealed no Albuterol Hfa 90 mg present. B. Review of client #2's MAR revealed Melatonin 5 mg listed and initialed everyday from	V 118		

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V 118	Continued From page 4 2/1/23-2/15/23 as given. Review of client #2's medications revealed no melatonin present. Interview on 2/15/23 staff #1 stated: -Not sure when the Albuterol ran out, will call and get a refill. -Client #1 had a zoom appointment last week and some of her medications were discontinued, but she did not get the paperwork for them. -Client #2's melatonin was discontinued last month and no longer takes the melatonin. -Not sure why she was still initialing the melatonin.	V 118		
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 observation and interview the facilty failed to maintain the home in a safe and attractive manner. The findings are: Observation on 2/15/23 at 11:30 AM -The outside of the house was lined with brown cardboard boxes. -A broken metal bed and desk chair sitting on back concrete patio.	V 736		

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V 736	Continued From page 5 -Couch in living room missing one leg. -Kitchen cabinet with broken door. -Kitchen floor rolled and uneven. -Kitchen refrigerator had missing drawer and shelves. -Carpet in living with frayed edges and strings hanging across the floor. -Bathroom baseboards with black substance on them. -Client #1 & #2's room had broken dressers where drawers were not present and clients had clothes laying on top. -Client #4's room had no dresser, and dirt and hair all over the floor. -Client #5's room had a chirping smoke detector. Interview on 2/15/23 staff #1 stated: -The boxes and broken items outside the home had been there for about a year. -Had told management about the boxes and they had not moved them. -The refrigerator had been broke for a while and had showed the Licensee. -The client's dressers have been broken for a long time and they have no where to put their clothes. -Cleaned the home, some of the baseboards are stained. -Client #4 does not like to clean her room and she tends to pull her hair out, which is why it is always on the floor. Interview on 2/15/23 the Qualified Professional stated: -Was not aware of all the repairs the home needed. -Would call the company repair guy to come out tomorrow and take off all the broken furniture and boxes. -Will have their repair guy look at the repairs	V 736		

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V 736	Continued From page 6 needed in the home.	V 736		