

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>mhl043-039</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>08/25/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SIERRA'S RESIDENTIAL SERVICES GROUP H</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>21 LANEXA LANE</b> <b>SPRING LAKE, NC 28390</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on August 25, 2023. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children and Adolescents.</p> <p>This facility is licensed for 4 and currently has a census of 4. The survey sample consisted of audits of 4 current clients.</p>	V 000		
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></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		

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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>During interview on 8/24/23 the Qualified Professional/House Manager (QP/HM) stated the facility ran with 3 shifts: 1st shift 8:00 am - 4:00 pm; 2nd shift 4:00 pm - 12:00 midnight; 3rd shift 12:00 midnight - 8:00 am.</p> <p>Review on 8/25/23 of the facility ' s fire and disaster drill documentation revealed:</p> <ul style="list-style-type: none"> <li>- No documented fire or disaster drill for 3rd shift for the third quarter (July - September) or the fourth quarter (October - December) 2022.</li> <li>- No documented fire drill for the 3rd shift for the first quarter (January - March) 2023.</li> <li>- No documented fire drill for the 1st shift and no documented fire or disaster drill for the 3rd shift for the second quarter (April - June) 2022.</li> </ul> <p>During interview on 8/24/23 staff #1 stated fire and disaster drills were done "once a month at the beginning of the month;" third shift drills were done "early in the morning" due to clients ' sleep patterns.</p> <p>During interview on 8/24/23 staff #5 stated fire and disaster drills were done monthly.</p> <p>During interview on 8/24/23 the QP/HM stated drills were done monthly on each shift. He would ensure drills were held and documented as required.</p>	V 114		
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</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>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> <p> </p> <p>This Rule is not met as evidenced by: Based on record reviews, observations and interviews the facility failed to keep the MARs current affecting 3 of 4 current clients (#1, #2, and #4). The findings are:</p> <p>Review on 8/24/23 of client #1 's record revealed:</p> <ul style="list-style-type: none"> <li>- 15 year old male admitted 11/10/21.</li> <li>- Diagnoses included Conduct Disorder and</li> </ul>	V 118		

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V 118	<p>Continued From page 3</p> <p>Attention Deficit Hyperactivity Disorder (ADHD). - Physician 's orders signed as follows: 6/28/23 Vyvanse (ADHD) 70 mg (milligrams) 1 capsule daily in the morning, effective 7/26/23. 8/01/23 Vyvanse "Take 1 capsule (40 mg) by mouth daily in the morning with 30 mg capsule; Take 1 capsule (30 mg) by mouth daily in the morning with 40 mg capsule."</p> <p>Review on 8/23/23 of client #1 's MAR for June - August 2023 revealed: - August 2023 MAR with printed transcription for Vyvanse 70 mg 1 capsule daily at 8:00 am and handwritten note "instructions on administering medication changed picked up on 8/3 started 8/4." - August 2023 MAR with handwritten transcriptions "Take 1 capsule (30 mg) by mouth daily in the morning with 40 mg cap (capsule)" 8:00 am and "Take 1 capsule (40 mg) by mouth daily in the morning with 30 mg cap" 8:00 am with no medication name documented on either transcription.</p> <p>Observation on 8/23/23 at 11:58 am of client #1 's medications on hand revealed: - Vyvanse 30 mg 1 capsule daily in the morning with 40 mg capsule dispensed 8/02/23. - Vyvanse 40 mg 1 capsule daily in the morning with 30 mg capsule dispensed 8/02/23.</p> <p>During interview on 8/24/23 client #1 stated he took his medications daily and had never missed any.</p> <p>Review on 8/24/23 of client #2 's record revealed: - 14 year old male admitted 2/03/23. - Diagnoses included Major Depression and ADHD. - Physician 's orders signed 7/25/23 for Fiber</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>Gummies for Children (nutritional supplement) chew and swallow 1 gummy twice daily.</p> <p>Review on 8/23/23 of client #2 's MARs for June - August 2023 revealed: - No transcription or documentation of administration of Fiber Gummies chew and swallow 1 gummy twice daily on the July 2023 MAR.</p> <p>Observation on 8/23/23 at 12:04 pm of client #2 's medications on hand revealed Fiber Gummies for Children chew and swallow 1 gummy twice daily dispensed 7/25/23.</p> <p>During interview on 8/24/23 client #2 stated he took his medications every day and had never missed any.</p> <p>Review on 8/24/23 of client #4 's record revealed: - 12 year old male admitted 3/03/23. - Diagnoses included ADHD, Oppositional Defiant Disorder, and Intermittent Explosive Disorder. - Physician 's order signed 8/22/23 for Prednisone (allergic reactions) 20 mg 3 tablets daily for 3 days; 2 tablets once daily for 3 days, then 1 tablet once daily for 3 days.</p> <p>Review on 8/23/23 of client #4 's MARs for June - August 2023 revealed: - August 2023 MAR with handwritten transcription "Take 3 tab (tablets) by mouth once a day for 3 days, then 2 tab PO (by mouth) once a day for 3 days, then 1 tab PO once a day for 3 days" 8:00 am with no medication name documented.</p> <p>Observation on 8/23/23 at 12:15 pm of client #4 's medications on hand revealed Prednisone 20 mg 3 tablets daily for 3 days, 2 tablets daily for 3 days, then 1 tablet daily for 3 days.</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>During interview on 8/24/23 client #4 stated:</p> <ul style="list-style-type: none"> <li>- He had a rash the Physician said was poison ivy.</li> <li>- He took his medications every day and had not missed any.</li> </ul> <p>During interview on 8/24/23 Staff #1 stated:</p> <ul style="list-style-type: none"> <li>- She was the lead staff for the facility.</li> <li>- One of her responsibilities was to ensure the MARs and pharmacy labels accurately reflected the Physicians ' orders.</li> <li>- She made changes on the MARs if the Physician made a medication change.</li> <li>- She did not write the names of the medications of client #1 's Vyvanse or client #4 's Prednisone when she transcribed the new orders on the August MARs.</li> <li>- Client #4's Prednisone was prescribed for a rash the Physicaian thought was poison ivy.</li> <li>- She understood the requirement for the name, strength and quantity of the medication to be included on the MAR.</li> </ul>	V 118		
V 295	<p>27G .1703 Residential Tx. Child/Adol - Req. for A P</p> <p>10A NCAC 27G .1703 REQUIREMENTS FOR ASSOCIATE PROFESSIONALS</p> <p>(a) In addition to the qualified professional specified in Rule .1702 of this Section, each facility shall have at least one full-time direct care staff who meets or exceeds the requirements of an associate professional as set forth in 10A NCAC 27G .0104(1).</p> <p>(b) The governing body responsible for each facility shall develop and implement written policies that specify the responsibilities of its associate professional(s). At a minimum these</p>	V 295		

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V 295	<p>Continued From page 6</p> <p>policies shall address the following:</p> <ul style="list-style-type: none"> <li>(1) management of the day to day day-to-day operations of the facility;</li> <li>(2) supervision of paraprofessionals regarding responsibilities related to the implementation of each child or adolescent's treatment plan; and</li> <li>(3) participation in service planning meetings.</li> </ul> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to employ an Associate Professional (AP) who provided services to the group home on a full time basis. The findings are:</p> <p>Review on 8/23/23 of the "Division of Health Service Regulation . . . Client and Staff Census" form completed by the Qualified Professional/House Manager (QP/HM) revealed no AP listed.</p> <p>During interview on 8/23/23 the QP/HM stated the facility did not have an AP.</p> <p>During interview on 8/25/23 the Office Manager stated:</p> <ul style="list-style-type: none"> <li>- There was not an AP employed at the facility.</li> <li>- AP's "come and go, but we don't have one right now."</li> <li>- "We know it's required and we are looking."</li> </ul>	V 295		
V 367	<p>27G .0604 Incident Reporting Requirements</p> <p>10A NCAC 27G .0604 INCIDENT</p>	V 367		

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V 367	<p>Continued From page 7</p> <p><b>REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS</b></p> <p>(a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information:</p> <ol style="list-style-type: none"> <li>(1) reporting provider contact and identification information;</li> <li>(2) client identification information;</li> <li>(3) type of incident;</li> <li>(4) description of incident;</li> <li>(5) status of the effort to determine the cause of the incident; and</li> <li>(6) other individuals or authorities notified or responding.</li> </ol> <p>(b) Category A and B providers shall explain any missing or incomplete information. The provider shall submit an updated report to all required report recipients by the end of the next business day whenever:</p> <ol style="list-style-type: none"> <li>(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or</li> <li>(2) the provider obtains information required on the incident form that was previously unavailable.</li> </ol> <p>(c) Category A and B providers shall submit, upon request by the LME, other information</p>	V 367		



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V 367	<p>Continued From page 8</p> <p>obtained regarding the incident, including:</p> <p>(1) hospital records including confidential information;</p> <p>(2) reports by other authorities; and</p> <p>(3) the provider's response to the incident.</p> <p>(d) Category A and B providers shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18).</p> <p>(e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary via electronic means and shall include summary information as follows:</p> <p>(1) medication errors that do not meet the definition of a level II or level III incident;</p> <p>(2) restrictive interventions that do not meet the definition of a level II or level III incident;</p> <p>(3) searches of a client or his living area;</p> <p>(4) seizures of client property or property in the possession of a client;</p> <p>(5) the total number of level II and level III incidents that occurred; and</p> <p>(6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph.</p>	V 367		

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V 367	<p>Continued From page 9</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed ensure a critical incident was reported within 72 hours as required. The findings are:</p> <p>Review on 8/22/23 of a facility survey completed 9/13/22 revealed an allegation of client abuse by a staff member was not reported via the North Carolina Incident Response Improvement System (IRIS) within 72 hours as required.</p> <p>During interview on 8/25/23 the Office Manager stated the allegation of client abuse was not entered into IRIS following the survey completed 9/13/22. It was her understanding that all allegations would be reported "going forward."</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 367		
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:</p>	V 736		

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V 736	<p>Continued From page 10</p> <p>Based on observations and interviews the facility was not maintained in a safe, clean, attractive, and orderly manner. The findings are:</p> <p>Observations on 8/23/23 at 1:30 pm revealed:</p> <ul style="list-style-type: none"> <li>- The gutter downspout by the front door was bent.</li> <li>- Ripped sandbags in front of the garage door.</li> <li>- A wooden chair in the corner of the dining room had a broken back support.</li> <li>- 6 glue insect traps with dead insects in the kitchen.</li> <li>- The finish on the kitchen cabinets was scratched; the face of kitchen drawer near the sink was separated from the drawer box; the surfaces inside the lower kitchen cabinets were dirty.</li> <li>- Client #1 ' s bedroom had a ceiling fan with a missing blade and an electric outlet lifted away from the wall; decorative muntins in the half-round window were broken and missing.</li> <li>- Client #2 ' s bedroom had a cracked closet door; a broken ceiling light fixture globe; and the ceiling fan was dirty.</li> <li>- Client #3 and #4 ' s shared bedroom had a ceiling fan with a missing blade; large dents in the wall by one bed; an unlocked attic access in the closet.</li> <li>- Client #3 and #4 ' s bathroom door had a crack at the handle; the bathtub water control was loose and moved around when manipulated; the bathroom mirror had desilvering around the edges; the face board of the vanity was loose and separated from the cabinet box; the vinyl floor covering had discoloration consistent with water damage; the light fixture over the sink had no cover over the bulb; the ceiling air vent was rusty.</li> <li>- The light fixture above the hall bathroom sink had no cover over the bulb; the sink fixtures were not properly installed and moved when</li> </ul>	V 736		

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V 736	<p>Continued From page 11</p> <p>manipulated; there was organic matter in the ceiling light fixture globe; there was no water control handle in the bathtub; the vinyl floor covering had discoloration consistent with water damage.</p> <ul style="list-style-type: none"> <li>- The air register grate in the hallway was dusty.</li> <li>- Decorative muntins on the back door in the living room were broken and missing; the blind on the back door had broken slats; the vinyl upholstery on the sofa was peeling.</li> <li>- There was no knob on the game room door; the game room sofa was missing an armrest; the vinyl upholstery on chairs in the game room was cracked and peeling; a red office chair was missing 2 wheels; a burned area in the vinyl floor covering; the ceiling air register was rusty and had a coating of dust.</li> <li>- Walls throughout the facility had scuffs and unfinished repairs to previous damage.</li> </ul> <p>During interview on 8/23/23 the Qualified Professional/Group Home Manager stated:</p> <ul style="list-style-type: none"> <li>- A contracted exterminator placed the insect glue traps in the facility earlier in the week.</li> <li>- He would request repairs be made.</li> </ul> <p>This deficiency has been cited 3 times since the original cite on 11/23/21 and must be corrected within 30 days.</p>	V 736		