

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-864	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 08/31/2023
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NAME OF PROVIDER OR SUPPLIER TERRY'S SAFE HAVEN	STREET ADDRESS, CITY, STATE, ZIP CODE 2720 CASHLIN DRIVE RALEIGH, NC 27616
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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
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on August 31, 2023. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living.</p> <p>This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 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



Director TITLE

9/21/2023 (X6) DATE

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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 and interview, the facility failed to have a written physician's order for 2 of 3 clients (#1 & #2) to administer their own medication. The findings are:</p> <p>Review on 8/31/23 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admitted 7/7/22 - Diagnoses of Mild Intellectual Developmental Disability (IDD), Schizoaffective Disorder, unspecified, Blindness, both eyes, Hearing Loss, bilateral, Genetic Susceptibility to Other Disease, and Diabetes Mellitus with Other Specified Complications - Physician's order dated 8/28/23: <ul style="list-style-type: none"> - Lantus Solostar 100 units (U) inject 14U subcutaneously at bedtime (Diabetes) - Novolog Flexpen Syringe inject 4U subcutaneously three times daily before meals. Use correlation scale 1U per 50 over 200 for elevated pre-meal glucose readings (Diabetes) - No physician's order to self-administer insulin injections <p>During interview on 8/30/23 client #1 reported:</p> <ul style="list-style-type: none"> - She was a diabetic and she was prescribed insulin - She self-administered her insulin injections 	V 118	<p>Doctor's orders for Clients #1 obtained and attached.</p>	9/12/2023

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V 118	<p>Continued From page 2</p> <p>Review on 8/31/23 of client #2's record revealed:</p> <ul style="list-style-type: none"> - Admitted 9/1/15 - Diagnoses of Mild IDD, Major Depressive Disorder, Mature-Onset Diabetes of the Young Type 5, and Recurrent Episode with Psychotic Features - Physician's order dated 1/30/23: Lantus Solostar 100U inject 10U subcutaneously once daily (Diabetes) - Physician's order dated 2/9/23: Novolog Flexpen Syringe inject subcutaneously three times daily before meals per sliding scales (100-150=2U, 151-200=3U, 201-250=4U, 251-300=5U, > (greater than) 300=6U) (Diabetes) - No physician's order to self-administer insulin injections <p>During interview on 8/30/23 client #2 reported:</p> <ul style="list-style-type: none"> - She was a diabetic and she was prescribed insulin - She self-administered her insulin injection in the stomach everyday - Staff monitored her while she administered the injections <p>During interview on 8/30/23 staff #1 reported:</p> <ul style="list-style-type: none"> - Clients #1 and #2 were diabetics and were prescribed insulin - Neither client had a physician's order to self-administer their injections - She "dialed" the dosage of clients #1 and #2's insulin pen and she monitored the clients while they self-administered the injections - Both client #1 and #2 were capable to administer their own injections and they had been injecting themselves since they were admitted into the facility - Neither client had any problems with administering their own injections - She was not "certified" to administer any 	V 118	<p>Doctor's orders for Client #2 is obtained and attached.</p> <p>AFL staff is retrained and educated on Medication Policy. AFL staff is retrained on Insulin Flex pens. Proof of training is attached.</p>	<p>9/11/2023</p> <p>9/2/2023</p>
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V 118	<p>Continued From page 3</p> <p>injections, including insulin, because she learned in her orientation training that only nurses or the clients could administer injections</p> <p>During interview on 8/30/23 the Licensee reported:</p> <ul style="list-style-type: none"> - Insulin injections could be administered by staff or clients - Client #1 and #2's insulin was "pre-dosed" and "dialed" - Neither client #1 nor #2 had a physician's order to self-administer their insulin injections - "It (clients injecting themselves with insulin) is not a self-administer because they (clients) are not measuring the dosage" - Clients that gave themselves "pre-dosed" injections were "just like staff putting medicine in a medicine cup and the client putting the medicine in their mouth" - She planned to revise their medication policy if it was determined that clients injecting themselves with insulin was considered self-administration 	V 118	<p>Both clients will continue to administer injections themselves as their own choice. ALF staff is reeducated and trained in case of any changes.</p>	9/21/2023

Courses for to [REDACTED]

0
To Do

56
Completed

Active Criteria:

Course Name	Progress	Score	Completed
<input type="checkbox"/> <u>Flex Pen Inject Training</u>	Completed	100.00	09-02-2023



Letter Details



DukeHealth

Duke Endocrinology
30 DUKE MEDICINE CIRCLE CLINIC 1A
DURHAM NC 27710-3000
Phone: 919-684-3000
Fax: 919-684-6743

9/12/2023

Regarding:



To whom it may concern:

[Redacted] has type 1 diabetes and is educated on checking her fingerstick glucose levels and injecting insulin with supervision. [Redacted] should be able to check her blood glucose level with glucometer, and inject insulin with supervision as needed. Please ensure this is under supervision.

If you have any questions please do not hesitate to ask.

Sincerely,



RE:



Page 1 of 1

This letter was digitally viewed by Leifia McCrimmon on 9/19/2023 3:10 PM.



DukeHealth

Brier Creek Endocrine
10201 CERNY STREET
RALEIGH NC 27617-1310
Phone: 919-286-5555
Fax: 919-286-5201

9/11/2023



Patient [redacted] can inject insulin by herself but under supervision.

If you have any questions, please call us at 919-668-5360.
For after hours urgent questions please call 919-684-8111 and ask for the diabetes
doctor on call.

Sincerely,





United Support Services, Inc.

"The works of many coming together for the good of One"

September 21, 2023

Mental Health Licensure and Certification Section
NC Division of Health Service Regulation
2718 Mail Service Center
Raleigh, NC 27699-2718

March 15, 2016

RE: Review of Corrective Action Plan MHL 092-864 Terry's Safe Haven

Please find enclosed documentation pertaining to our written Corrective Action Plan addressing the deficiencies noted during the annual survey at Terry's Safe Haven.

We appreciate your efforts in assisting us with our quality assurance, quality improvement and helping us to improve the quality of services United Support Services, Inc. provides to its members.

United Support Services, Inc. is committed to continually improving the quality of our services through processes such as these. Your review and recommendations are invaluable to us as we continue to refine our current policies and procedures. It is our hope the corrective action we have taken will directly benefit our Shining Stars.

You may reach me at any time to discuss the documentation we have included for our Corrective Action Plan.

Sincerely,

Victoria Garland
Director