STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL053-041	A. BUILDING: _____ B. WING _____	R 11/15/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LEE COUNTY GROUP HOME II	2412 KNOLLWOOD DRIVE SANFORD, NC 27330

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on November 15, 2023. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 6 and currently has a census of 4. The survey sample consisted of audits of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure fire and disaster drills were conducted quarterly on each shift. The findings are: Review on 11/9/23 of the facility's fire and	V 114		

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V 114	Continued From page 1 disaster drill logs dated 3/16/23 to 10/16/23 revealed: -There were no fire or disaster drills conducted on 2nd or 3rd shift for the 2nd quarter (April, May, June) of 2023. -There were no fire or disaster drills conducted on 3rd shift for the 3rd quarter (July, August, September) of 2023. Interview on 11/9/23 with Client #1 revealed: -He completed fire drills every month. -The facility did not complete any disaster drills. -"The last one was probably last year" for disaster drills. Interview on 11/9/23 with Client #3 revealed: -The facility completed fire drills. -The facility did not complete disaster drills. Interviews on 11/9/23 and 11/15/23 with the Executive Director revealed: -The facility operated under three shifts. -First shift was from 8:00am to 4:00pm. -Second shift was from 4:00pm to 12:00am. -Third shift was from 12:00am to 8:00am. -"We complete fire and disaster drills once a month." -When asked about the missing fire and disaster drills he replied "No comment." -He was aware that fire and disaster were to be completed quarterly on all three shifts at the facility. This deficiency has been cited 3 times since the original cite on 5/27/22 and must be corrected within 30 days.	V 114		
V 118	27G .0209 (C) Medication Requirements	V 118		

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V 118	Continued From page 2 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 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 observation, record reviews and interviews, the facility failed to keep the MARs	V 118		

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V 118	Continued From page 3 current affecting three of three audited clients (#1, #2 and #3). The findings are: a. Review on 11/13/23 of client #1's record revealed: -Admission date of 10/28/06. -Diagnoses of Mild Intellectual Disability, Schizophrenia-Paranoid type, Diabetes Type II, Chronic Kidney Disease (CKD), High Blood Pressure, High Cholesterol, Lipid Disorder, Gastroesophageal Reflux Disease and Gastroparesis. Observation on 11/13/23 at approximately 10:50 am of client #1's medication revealed: -A medication packet that contained Cinacalcet 60 milligrams (mg) (CKD). Review on 11/13/23 of a physician's order dated 8/23/23 revealed: -Cinacalcet 60 mg, one tablet with every meal. Review on 11/13/23 of client #1's November 2023 MAR revealed: -The Cinacalcet was listed as 90 mg, one tablet with every meal. -Staff were initialing they were administering 90 mg of Cinacalcet 11/1 thru 11/12 for all 3 meals and 11/13 for breakfast. b. Review on 11/8/23 of client #2's record revealed: -Admission date of 6/30/89. -Diagnoses of Moderate Intellectual Disability, Seizure Disorder, Hypertension and Hyperlipidemia. Review on 11/9/23 of client #2's physician's orders dated 3/27/23 revealed: - Sertraline 100 mg (Depression), one tablet daily.	V 118		

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V 118	Continued From page 4 - Fish Oil 1200 mg (Hypertriglyceridemia), 2 capsules twice daily. -Tegretol Extended Release (ER) 400 mg (Seizure Disorder), one tablet twice daily. - Depakote Delayed Release (DR) 500 mg (Seizure Disorder), one tablet twice daily. Review on 11/9/23 of the September 2023 MAR for client #2 revealed: No staff initials as administered for the following medications: Sertraline 100 mg on 9/30 Fish Oil 1200 mg on 9/8, 9/10, 9/24 and 9/30 pm doses Tegretol ER 400 mg on 9/30 am dose Depakote DR 500 mg on 9/8, 9/10, 9/24 and 9/30 pm doses c. Review on 11/8/23 of client #3's record revealed: -Admission date of 2/4/17. -Diagnoses of Moderate Intellectual Disability, Autism, Attention Deficit Hyperactivity Disorder and History of Seizure Disorder. Review on 11/9/23 of client #3's physician's orders dated 3/23/23 revealed: -Quetiapine ER 200 mg (Schizophrenia), one tablet every evening. -Hydroxyzine HCL 50 mg (Anxiety), one tablet at bedtime. Review on 11/9/23 of the September 2023 MAR for client #3 revealed: No staff initials as administered for the following medications: -Quetiapine ER 200 mg on 9/8, 9/10 and 9/24	V 118		

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V 118	Continued From page 5 -Hydroxyzine HCL 50 mg on 9/30 Interviews on 11/9/23 and 11/13/23 with the Executive Director revealed: -The Cinacalet was prescribed to client #1 through the Dialysis Center. -He didn't realize the order and what was written on the MAR did not match. -Clients got their medications daily. -Staff were possibly not signing off to indicate the medication was given. -"I have no explanation for the reason staff did not sign off on those days for [client #2] or [client #3]." -He confirmed the MARs were not kept current for clients #1, #2 and #3. This deficiency has been cited 3 times since the original cite on 5/27/22 and must be corrected within 30 days.	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 facility was not maintained in a safe, clean, attractive and orderly manner. The findings are: Observation of the facility on 11/9/23 at approximately 12:20pm revealed: -The bottom panel of the refrigerator was missing. -Exposed wires under the refrigerator were	V 736		

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V 736	Continued From page 6 covered in grey dust. -Bathroom #2 's exhaust vent had 3 rust marks approximately 2 inches in length. -Bathroom #2's sink was slow to drain when running the water continuously. -Peeling paint towards the bottom of the wall the floorboard approximately 8 inches in length. -Bathroom #1's toilet basin had 3 circular nickel sized brown stains. Interview on 11/15/23 with the Executive Director revealed: -A contractor completed maintenance requests for the facility. -Met once a month with the contractor to go over maintenance of the facility. -He was aware of the maintenance issues in the facility. This deficiency has been cited 3 time(s) since the original cite on 5/27/22 and must be corrected within 30 days.	V 736		