STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL091-118	A. BUILDING: _____ B. WING _____	R 02/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VANCE ADULT GROUP HOME	941 HWY 158 BY PASS HENDERSON, NC 27536

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on 2/7/24. 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 5 and currently has a census of 5. The survey sample consisted of audits of 3 current clients.	V 000		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.	V 112		

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V 112	Continued From page 1	V 112		

This Rule is not met as evidenced by:
Based on record review and interview the facility failed to implement 1 of 3 audited clients (#2) treatment plans. The findings are:

Review on 2/7/24 of client #2's record revealed:
- admitted 3/1/10
- diagnoses: Moderate Intellectual Developmental Disorder, Congestive Heart Failure, Obesity & Sleep Apnea
- a treatment plan dated 7/20/23: will follow a 1500 calorie diet as order by her doctor
- Goal data sheet for month of January 2024: regarding 1500 calorie diet: "goal: will select healthy foods over regular food choices... (intervention): staff allow her to pick out healthy foods when packing her lunch ..."

During interview on 2/7/24 the Team Leader reported:
- there was no physician order for client #2 to be on a 1500 calorie diet
- she monitored client #2's food intake by portion sizes
- she exercised with all the clients

During interview on 2/7/24 the Residential Manager II reported:
- she attended treatment team meetings for client #2
- was not aware client #2 was on a 1500 calorie diet

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V 112	Continued From page 2 - she reached out to the facility's nurse today & was informed there was not a physician's order for a 1500 calorie diet - was not sure how staff meet the goal of a 1500 calorie diet for client #2 - there was not a 1500 calorie diet menu at the facility - the treatment team will revisit the 1500 calorie diet goal During interview on 2/7/24 the Qualified Professional (QP) reported: - had been the QP for the facility since 2014 - the 1500 calorie diet goal had always been in client #2's treatment plan - would not incorporate the goal into the treatment plan, if not instructed by a nurse or a physician's order - staff should be following a 1500 calorie diet menu for client #2 - plan to follow up with staff regarding the 1500 calorie diet	V 112		
V 117	27G .0209 (B) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (b) Medication packaging and labeling: (1) Non-prescription drug containers not dispensed by a pharmacist shall retain the manufacturer's label with expiration dates clearly visible; (2) Prescription medications, whether purchased or obtained as samples, shall be dispensed in tamper-resistant packaging that will minimize the risk of accidental ingestion by children. Such packaging includes plastic or glass bottles/vials with tamper-resistant caps, or in the case of unit-of-use packaged drugs, a zip-lock plastic bag	V 117		

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V 117	Continued From page 3 may be adequate; (3) The packaging label of each prescription drug dispensed must include the following: (A) the client's name; (B) the prescriber's name; (C) the current dispensing date; (D) clear directions for self-administration; (E) the name, strength, quantity, and expiration date of the prescribed drug; and (F) the name, address, and phone number of the pharmacy or dispensing location (e.g., mh/dd/sa center), and the name of the dispensing practitioner. This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure 3 of 3 current clients' (#1, #2 & #5) medications had packaging labels. The findings are: Review on 2/7/24 of client #1's record revealed: - admitted 5/11/22 - diagnoses: Epilepsy, Hypertension, Diabetes, Moderate Intellectual Developmental Disability (IDD) & Morbid Obesity - a FL2 dated 5/24/23 listed the following medications: - Metformin 500mg (milligrams) twice a day - Potassium 10mg daily - Dilantin 100mg morning 400mg bedtime (qhs) - Lisinopril 20mg daily Review on 2/7/24 of client #2's record revealed:	V 117		

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V 117	Continued From page 4 - admitted 3/1/10 - diagnoses: Moderate IDD, Congestive Heart Failure, Obesity & Sleep Apnea - a FL2 dated 2/6/24 listed the following medications: - Furosemide 40mg daily - Aspirin 81mg daily - Diltiazem 120mg daily - Potassium 20mg 3 daily Review on 2/7/24 of client #5's record revealed: - admitted 4/12/19 - diagnoses: Depressive Episodes & IDD - a FL2 dated 2/6/24 listed the following medications: - Lamotrigine 100mg am & 1.5mg bedtime - Trazadone 50mg 2 bedtime qhs - Melatonin 5mg qhs - Loratadine 10mg qhs - Bupropion 300mg daily Observation on 2/7/24 between 10:30am - 12pm of client #1, #2 & #5's medication bin revealed: - pre-packaged pills of different sizes & colors in individualized blister packs on a pill roll - the pill roll was in a white box without the following information: - the client's name - prescriber's name - current dispense date - name, strength, quantity, and expiration date of the prescribed drug - name, address, and phone number of the pharmacy or dispensing location and the name of the dispensing practitioner During interview on 2/7/24 the Residential Manager II reported: - the pharmacy was contacted today - pharmacy agreed to place medication labels	V 117		

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V 117	Continued From page 5 on the white box that included the pill roll During interview on 2/7/24 the Executive Director reported: - staff worked with the pharmacy to get medication labels on the white box of the pre-packaged pills	V 117		
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 and interview the facility failed to maintain water temperatures between 100-116 degrees Fahrenheit. The findings are: Observation on 2/7/24 at 10:16am & 1:46pm revealed the following: - at 10:16am: the kitchen sink water temperature was 90 degrees - at 1:46pm: the kitchen sink was 90 degrees Fahrenheit (F) - the clients' bathroom water temperature was 85 degrees F - bathroom sink in staff's office was 116 degrees F During interview on 2/7/24 the Team Leader	V 752		

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V 752	Continued From page 6 reported: - she checked water daily - water temperatures were between 100 - 101 During interview on 2/7/24 the Residential Manager II reported: - maintenance plan to check the water temperatures on 2/8/24	V 752		