

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL064-167	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/27/2024
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NAME OF PROVIDER OR SUPPLIER KOODY HEALTH CARE SERVICES, INC 4	STREET ADDRESS, CITY, STATE, ZIP CODE 2709 GARY ROAD ROCKY MOUNT, NC 27803
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on March 27, 2024. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>The facility is licensed for 5 and currently has a census of 4. 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		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (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 observation, record review and interview the facility failed to ensure medications were administered on a physician's order and MARs were kept current for 1 of 3 audited clients (#3). The findings are:</p> <p>Review on 3/25/24 of client #3's record revealed:</p> <ul style="list-style-type: none"> - admitted 10/1/23 - diagnoses: Mild Intellectual Developmental Disability, Blind Left Eye, Chronic Obstruction Pulmonary, Hyperlipidemia, Mild Seizures & Hypertension - a FL2 dated 2/6/24: - Triamcinolone 1% ointment (skin condition) - Fluoxetine 20mg (milligrams) daily (depression) - Doxycycline 100mg twice day (Rosacea) <p>A. Observation on 3/25/24 at 2:17pm of client #3's medication box revealed:</p> <ul style="list-style-type: none"> - No Doxycycline <p>Review on 3/25/24 of client #3's March 2024 MAR revealed:</p> <ul style="list-style-type: none"> - Highlighted in yellow: "order finished" for the Doxycycline - MAR signed by staff twice a day from March 1 - March 25 	V 118		

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V 118	<p>Continued From page 2</p> <p>During interview on 3/25/24 staff #1 reported:</p> <ul style="list-style-type: none"> - He called the pharmacy 4 days ago to refill the Doxycycline - The pharmacist said the physician had to be contacted - He gave the last pill this morning (3/25/24) <p>During interview on 3/25/24 the pharmacist reported:</p> <ul style="list-style-type: none"> - Doxycycline was filled on 1/26/24 for 30 day supply - The physician ordered a 7 day supply on 2/26/24 - She (pharmacist) reached out to the physician's office and had not heard back - The Doxycycline should have ran out around 3/11/24 <p>During interview on 3/25/24 & 3/27/24 the House Manager (HM) reported:</p> <ul style="list-style-type: none"> - She was not aware the medication was out - Staff were supposed to contact the pharmacy when client was down to 6 pills - If the pharmacy does not fill the medication, staff needed to reach out to her (HM) <p>During interview on 3/27/24 the Licensee reported:</p> <ul style="list-style-type: none"> - She visited the facility 2 - 3 times a week - Was not aware the Doxycycline ran out <p>B. Review on 3/25/24 of client #3's February 2024 MAR revealed:</p> <ul style="list-style-type: none"> - Fluoxetine: was not signed from 2/25/24 - 2/29/24 - Triamcinolone: not signed from 2/25/24 - 2/29/24 <p>During interview on 3/25/24 the HM reported:</p>	V 118		

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V 118	Continued From page 3 - Reviewed MARs twice a month - Had not found any documentation errors on the MARs During interview on 3/27/24 the Licensee reported: - The Home Manager reviewed MARs for errors - She (Licensee) last reviewed client #3's MAR the first of March and found no errors - client #3 had a skin rash	V 118		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices,	V 291		

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V 291	<p>Continued From page 4</p> <p>needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to coordinate with other qualified professionals (QP) who are responsible for the treatment/habilitation for 2 of 3 audited clients (#1 & #3). The findings are:</p> <p>A. Review on 3/25/24 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admitted 10/1/23 - Diagnoses: Mild Intellectual Developmental Disorder, Schizophrenia, Hypertension Paranoid Schizophrenia & Diabetes Type 2 - FL2 dated 2/5/24: check weight monthly <p>Review on 3/25/24 of client #1's January, February & March 2024 MAR for client #1 revealed:</p> <ul style="list-style-type: none"> - No weight checks for the month of January & March 2024 - February's weight: 204 <p>Observation at 4pm revealed:</p> <ul style="list-style-type: none"> - The Licensee brought a weight scale into the kitchen <p>During interview on 3/25/24 staff #1 reported:</p> <ul style="list-style-type: none"> - initially, there was not a weight scale at the facility - Later reported it was a weight scale, but it did not work 	V 291		

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V 291	<p>Continued From page 5</p> <ul style="list-style-type: none"> - He documented the February 2024 weight from a physician's summary <p>During interview on 3/25/24 the Home Manager reported:</p> <ul style="list-style-type: none"> - She filled out the FL2 and the physician signed it - She added the weight checks to the FL2 per the Licensee's request - Clients visited their physician's office every 3 months <p>During interview on 3/25/24 the QP reported:</p> <ul style="list-style-type: none"> - She informed staff not to add weight checks to the FL2 if not ordered by a physician <p>During interview on the Licensee reported:</p> <ul style="list-style-type: none"> - the facility had a weight scale that worked - was unsure why staff #1 was not aware the weight scale worked <p>B. Observation on 3/25/24 at 2:17pm of client #3's medication box revealed:</p> <ul style="list-style-type: none"> - No Doxycycline <p>During interview on 3/25/24 staff #1 reported:</p> <ul style="list-style-type: none"> - He called the pharmacy 4 days ago to refill the Doxycycline - The pharmacist said the physician had to be contacted <p>During interview on 3/25/24 the pharmacist reported:</p> <ul style="list-style-type: none"> - She (pharmacist) reached out to the physician's office several times and had not heard back - The Doxycycline should have ran out around 3/11/24 <p>During interview on 3/25/24 & 3/27/24 the House</p>	V 291		

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V 291	Continued From page 6 Manager (HM) reported: - She was not aware the medication was out - would reach out to client #3's physician During interview on 3/27/24 the Licensee reported: - She visited the facility 2 - 3 times a week - Was not aware the Doxycycline ran out - client #3 had a skin rash	V 291		
V 768	27G .0304(d)(4) Non-Client Accommodations 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements: (4) In facilities with overnight accommodations for persons other than clients, such accommodations shall be separate from client bedrooms. This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure overnight accommodations for persons other than clients, were separate from client bedrooms. The findings are: Observation on 3/25/24 at 2:13pm revealed: - an empty bedroom for client accommodation - a hat was on the dresser - other miscellaneous items on the dresser - a pair of shoes near the bed - no staff bedroom was observed	V 768		

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V 768	<p>Continued From page 7</p> <p>During interview on 3/26/24 a client reported:</p> <ul style="list-style-type: none"> - staff slept in the empty bedroom <p>During interview on 3/26/24 staff #1 reported:</p> <ul style="list-style-type: none"> - he worked 2 weeks on and 1 week off - he slept on the couch in the living room - later sent a text "it's a office I sleep in" <p>An attempted call to staff #2 on 3/26/24 & 3/27/24</p> <p>During interview on 3/27/24 the Home Manager reported:</p> <ul style="list-style-type: none"> - staff had a room to sleep in - she was not aware she had to show where the staff slept - staff #1's items were in the empty bedroom - was unsure why staff #1's items were in the bedroom accommodated for a client <p>During interview on 3/27/24 the Qualified Professional reported:</p> <ul style="list-style-type: none"> - she noticed a pair of shoes & a hat in the empty bedroom on 3/25/24 - she was showed a bedroom on 3/25/24 with a mattress against the wall - there was no bed frame for the mattress - initially staff #1 said he slept in the room with the mattress but later said he slept on the couch in the living room <p>During interview on 3/27/24 the Licensee reported:</p> <ul style="list-style-type: none"> - staff had a bedroom to sleep in - the bed frame broke 2 weeks ago in the staff's bedroom - since the bed frame broke, she was unsure where overnight staff slept 	V 768		