

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL025-221	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/11/2024
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NAME OF PROVIDER OR SUPPLIER BLESSED HAVEN	STREET ADDRESS, CITY, STATE, ZIP CODE 1025 PLYMOUTH DRIVE NEW BERN, NC 28562
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on April 11, 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 Disabilities.</p> <p>This facility is licensed for 3 and currently has a census of 1. The survey sample consisted of audits of 1 current client.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</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> </p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to have disaster drills held at least quarterly and repeated on each shift. The findings are:</p> <p> </p> <p>Review on 04/10/24 of facility records revealed:</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> <ul style="list-style-type: none"> - No disaster drills completed at the facility since client #1's admission on 12/27/23. <p>Interview on 04/10/24 staff #1 stated:</p> <ul style="list-style-type: none"> - She began working at the facility in December 2023. - She was the only staff that currently stayed with client #1 at the facility. - She had completed a fire drill at the facility since she started working. - She had not completed a disaster drill at the facility. <p>Interview on 04/10/24 the Licensee stated:</p> <ul style="list-style-type: none"> - She readmitted client #1 on 12/27/23. - She understood disaster drills had to be completed at least quarterly and repeated on each shift. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</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 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>	V 118		

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V 118	<p>Continued From page 2</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>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to maintain an accurate MAR affecting of 1 clients (#1). The findings are:</p> <p>Review on 04/10/24 of client #1's record revealed: -59 year old male. -Admission date of 12/27/24. -Diagnoses of Chronic Obstructive Pulmonary Disease, Seizure Disorder, Hypertension, Schizo affective Disorder, Bipolar Type and Mild Intellectual Developmental Disability.</p> <p>Review on 04/10/24 of client #1's Physician order dated 02/08/24 revealed: -Polyethylene Glycol 3350 Powder (Constipation) Mix 17 grams in 4-8 ounces of fluid and give by</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>mouth every day.</p> <p>Review on 04/10/24 of client #1's April 2024 MAR revealed: -Polyethylene Glycol was not transcribed on the April MAR and no initials to indicate the medication had been administered.</p> <p>During interview on 04/10/24 client #1 revealed: -He received his medication daily.</p> <p>During interview on 04/10/24 staff #1 revealed: -The pharmacy did not add the medication to the MAR. -She did not notice the medication was not on the MAR but client #1 had received the medication.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility</p>	V 131		

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V 131	<p>Continued From page 4</p> <p>failed to access the Health Care Personnel Registry (HCPR) prior to employment for 2 of 2 staff (#1 and Qualified Professional (QP)). The findings are:</p> <p>Review on 04/10/24 of staff #1's record revealed: - Date of hire: 12/27/23. - HCPR check completed 12/30/23.</p> <p>Review on 04/10/23 of the QP's record revealed: - Date of hire: 12/27/23. - HCPR check completed 12/30/23.</p> <p>Interview on 04/10/24 the Licensee stated: - She readmitted client #1 on 12/27/23. - She understood all staff are required to have a HCPR check completed prior to hire.</p>	V 131		
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: Based on observation and interview the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation on 04/10/24 at approximately 1:30pm revealed: - A bathroom in a vacant client bathroom had one of two lights that worked. The toilet paper holder had one side missing. The wall paper near the ceiling was pulled away from the wall.. There were water stains on the ceiling.</p>	V 736		

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V 736	<p>Continued From page 5</p> <ul style="list-style-type: none"> - The air return vent was pulled away from the ceiling. - The door frame of the upstairs pantry was cracked. - Areas of paint had rubbed off the upstairs hand rail. - The left blind in the front sitting rooms was damaged. <p>Interview 04/10/24 staff #1 stated:</p> <ul style="list-style-type: none"> - The Division of Health Service Regulation (DHSR) construction section surveyor had recently been to the facility. - There had been several issues identified for repair. <p>Interview on 04/10/24 the Licensee stated:</p> <ul style="list-style-type: none"> - DHSR construction section had recently been to the facility. - She understood items identified for repair. 	V 736		