

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-579	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/18/2024
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NAME OF PROVIDER OR SUPPLIER THE EMMANUEL HOME III	STREET ADDRESS, CITY, STATE, ZIP CODE 5212 SWEETBRIAR DRIVE RALEIGH, NC 27609
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 4/18/24. 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>This facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.</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>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure fire and disaster drills were held at least quarterly and repeated for each shift. The findings are:</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> <p>Review on 4/17/24 of the facility's fire drill log revealed:</p> <ul style="list-style-type: none"> - fire drills: <ul style="list-style-type: none"> - 4/12/24 no time - 2/15/24 no time - 1/15/24 no time - 10/15/23 6 but no AM or PM listed - 5/23/23 no time - no fire or disaster drills documented from January 2023 - April 2023 as being completed <p>Interview on 4/17/24 client #3 reported:</p> <ul style="list-style-type: none"> - been residing in this facility for under a year - had not done a fire or disaster drill since being here <p>Interview on 4/17/24 staff #1 reported:</p> <ul style="list-style-type: none"> - been employed about 6 or 7 months - primary shift was 9pm- 9am - didn't really do fire and disaster drills on his shift - fire and disaster drills were conducted during the day - didn't know where they would meet for disaster drills <p>Interview on 4/18/24 the Licensee reported:</p> <ul style="list-style-type: none"> - they had 3 shifts: 7am - 3pm, 3pm - 11pm, & 11pm - 7am - "I guess I'm ultimately responsible for checking fire and disaster drills" - had a lot of things going on and hadn't been checking to make sure fire and disaster drills were being completed and paperwork filled out properly 	V 114		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>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> <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> </p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to administer medications on a physician's order for 3 of 3 audited clients (#1, #3 & #5) &</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>failed to keep the MAR current for 2 of 3 audited clients (#1, #5). The findings are:</p> <p>A. Review on 4/17/24 of client #1's record revealed:</p> <ul style="list-style-type: none"> - admitted: 4/10/20 - diagnoses: Autism Spectrum Disorder, Moderate Intellectual Delay, and Unspecified Depressive Disorder with Mixed Features - physician's order dated 12/26/23 revealed: <ul style="list-style-type: none"> - Lantus Solostar 100units, inject 10 units subcutaneously at bedtime (diabetes) - Losartan Potassium 25mg (milligram) tablet (tab), 1 tab daily (high blood pressure) <p>Review on 4/17/24 of client #1's March 2024's MAR revealed:</p> <ul style="list-style-type: none"> - Losartan Potassium being initialed by staff for the month as being administered <p>Observation on 4/17/24 at approximately 12:40pm of client #1's medication box revealed:</p> <ul style="list-style-type: none"> - Solostar U100, inject 15 units subcutaneously at bedtime - No Losartan Potassium <p>Observation on 4/17/24 at approximately 12:45pm revealed:</p> <ul style="list-style-type: none"> - The facility's consultant removing all of the insulin that read 15 units subcutaneously at bedtime from out of the refrigerator <p>Interview on 4/17/24 staff #3 reported:</p> <ul style="list-style-type: none"> - 10 units of insulin was in the refrigerator for client #1 - Insulin remained in the refrigerator but once it was used, it could be kept in the medication box until it was empty then they would get a "fresh one" out of the refrigerator 	V 118		

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V 118	<p>Continued From page 4</p> <p>Interview on 4/17/24 the Facility's Consultant reported:</p> <ul style="list-style-type: none"> - the staff was giving client #1 10 units of insulin as prescribed by the doctor - "how do you know he (staff) was giving the 15" - "you weren't here to see him give the med (medication)" - "he signed off on the 10 so that's what he gave him" - client #1's Losartan was a short term prescription from the hospital and his primary doctor wouldn't override it and discontinue the medication - she thought that the last time he took the Losartan was around the end of February 2024 - staff should not have initialed for March if the medication was not in the facility <p>B. Review on 4/17/24 of client #3's record revealed:</p> <ul style="list-style-type: none"> - diagnoses: Bipolar, Autism & Attention Deficit Hyperactivity Disorder (ADHD) - A FL2 dated 9/15/23: - Seroquel 25mg as needed (Bipolar) - Hydroxyzine 25mg bedtime (anxiety) <p>During interview on 4/17/24 the facility's consultant reported:</p> <ul style="list-style-type: none"> - Client #3's father took him to his physician's appointments - He does not always give the facility's staff the physician's orders - Client #3's parents were supposed to get the Seroquel refilled - Parents were the guardians and the physician's office waiting for their approval - The physician that prescribed the Hydroxyzine, office closed permanently - The current physician said he could not 	V 118		

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V 118	<p>Continued From page 5</p> <p>discontinue the Hydroxyzine because he did not prescribe it</p> <ul style="list-style-type: none"> - They (facility's management) have reached out to the parents and waiting to hear back <p>C. Review on 4/17/24 of client #5's record revealed:</p> <ul style="list-style-type: none"> - Admitted 6/6/23 - Diagnoses: Autism, ADHD, Moderate Intellectual Developmental Disorder & Seizures - A physician's order dated 10/5/23: Miralax 17gram everyday <p>Observation on 4/17/24 at 1:03pm of client #5's medications revealed:</p> <ul style="list-style-type: none"> - No Miralax <p>Observation on 4/17/24 at 4:17pm revealed:</p> <ul style="list-style-type: none"> - the facility's consultant hand staff #2 a medication bag - staff #2 looked in the medication bag and stated "its the Miralax" <p>Review on 4/17/24 of the April 2024 MARs revealed:</p> <ul style="list-style-type: none"> - Miralax was initialed by staff the entire month of April <p>During interview on 4/17/24 staff #2 reported:</p> <ul style="list-style-type: none"> - client #5's Miralax had been out for a week - was not sure why staff initialed the MAR for the Miralax <p>During interview on 4/18/24 the facility's Consultant reported:</p> <ul style="list-style-type: none"> - was not aware the Miralax was out for a week - had requested the pharmacy to put the Miralax on hold due to the facility had "2 big bottles" of Miralax - the pharmacy was contacted yesterday & the 	V 118		

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V 118	Continued From page 6 Miralax arrived 4/17/24 Due to the failure to accurately document medication administration, it could not be determined if clients received their medications as ordered by the physician.	V 118		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification 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. This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure Health Care Personnel Registry (HCPR) was completed for 2 of 3 staff (Qualified Professional (QP) & #1). The findings are: Review on 4/17/24 of staff #1's record revealed: - employed since Jan. 2019 - no documentation of the HCPR check being completed around his hire date Review on 4/17/24 of the QP's personnel record revealed: - no signed job description - no documentation of the HCPR check being	V 131		

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V 131	Continued From page 7 completed around her hire date During interview on 4/18/24 the QP reported: - started at the facility 2 1/2 years ago - management was responsible for completion of the HCPR - confirmed she did not have a copy of the HCPR check During interview on 4/18/24 the Licensee reported: - moved from their facility's office - the HCPR checks may have been in storage but they had 5 storage units - they had some boxes at home that the HCPR checks could be in but she was not sure	V 131		
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 & attractive manner. The findings are: Observation on 4/15/24 at 1:32pm of the facility revealed: - several pieces of tile from the kitchen floor was missing in front of the kitchen sink - the kitchen floor was uneven in front of the kitchen sink During interview on 4/15/24 staff #1 reported:	V 736		

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V 736	<p>Continued From page 8</p> <ul style="list-style-type: none"> - the kitchen floor was like that when he started in October 2023 - no one had repaired the kitchen floor since he started at the facility <p>During interview on 4/18/24 the Qualified Professional reported:</p> <ul style="list-style-type: none"> - the kitchen floor needed to be repaired - patches of the floor had been fixed but not the entire kitchen floor - management informed her they were cited due to repairs needed to the kitchen floor - she informed management to get the kitchen floor repaired <p>During interview on 4/17/24 the Licensee reported:</p> <ul style="list-style-type: none"> - the kitchen floor was previously repaired - the floor was damaged again so she was having new tile put down - they were having difficulty finding the accurate size tile to resemble tile currently on floor <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		
V 752	<p>27G .0304(b)(4) Hot Water Temperatures</p> <p>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT</p> <p>(b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors.</p> <p>(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.</p>	V 752		

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V 752	<p>Continued From page 9</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to maintain water temperatures between 100 - 116. The findings are:</p> <p>Observation 4/15/24 at 1:32pm of the kitchen sink water temperature revealed: - water temperature was 132 degrees Fahrenheit</p> <p>During interview on 4/17/24 client #1 reported: - "water fine"</p> <p>During interview on 4/17/24 client #3 reported: - he filled the kitchen sink with water when he assisted with meals - was able to adjust water temperatures during showers & during meal preparations</p> <p>During interview on 4/15/24 & 4/17/24 staff #1 reported: - he had worked at the facility since October 2023 - had not checked the water temperature since being at the facility - Licensee told him to check the water temperatures but "kinda didn't know how to" - was not sure what the water temperatures were supposed to be - he assisted the clients with their baths that were not capable of adjusting the water temperatures - maintenance came 2 days ago (4/15/24) to adjust water temperatures</p> <p>During interview on 4/17/24 staff #2 reported: - she checked the water temperatures monthly - it was between 116 & 117</p>	V 752		

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V 752	<p>Continued From page 10</p> <ul style="list-style-type: none"> - clients had not complained of the water being too hot <p>During interview on 4/15/24 the Facility's Consultant reported:</p> <ul style="list-style-type: none"> - staff were supposed to check the facility's water temperature - she would have someone to turn the water temperatures down 	V 752		