

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL075-031	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 05/21/2024
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NAME OF PROVIDER OR SUPPLIER HUMMINGBIRD HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 64 FOREST LANE TRYON, NC 28782
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on May 21, 2024. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living.</p> <p>This facility is licensed for 2 and has a current census of 1. The survey sample consisted of audits of 1 current client.</p>	V 000		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(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.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(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.</p>	V 112		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to develop and implement a treatment/habilitation or service plan to include a schedule for review at least annually in consultation with the client or legally responsible party affecting 1 of 1 current client (Client#1). The findings are:</p> <p>Review on 5/21/24 of Client#1's record revealed: -Date of Admission: 6/30/19. -Diagnoses: Generalized Anxiety Disorder; Intellectual Disability, Moderate; Down Syndrome. -A treatment plan completed 1/21/23 with a target date of 12/31/23. -No current treatment/habilitation or service plan.</p> <p>Interview on 5/21/24 with the Qualified Professional (QP) revealed: -He was responsible for the development of client treatment/habilitation plans. -" ...Just need to get a new signature on [Client#1's] plan and [Alternative Family Living (AFL) Staff#1] is currently content with the goals and interventions and we are going to continue those as the same and I just need to get a new signature to make it current ..."</p>	V 112		
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 reviews, observation and interviews, the facility failed to ensure MARs were kept current for 1 of 1 current client (Client#1).</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>The findings are:</p> <p>Review on 5/20/24 of Client#1's record revealed:</p> <ul style="list-style-type: none"> -Date of Admission: 6/30/19. -Diagnoses: Generalized Anxiety Disorder; Intellectual Disability, Moderate; Down Syndrome. -Physician orders included: <ul style="list-style-type: none"> -Probiotic (supplement) 20 billion colony forming units (CFU's) 1 by mouth (PO) daily in the morning dated 3/7/17. -Nasonex (steroid) 50 micrograms (mcg) 2 sprays each nostril daily as needed (PRN) with no instructions for the reason to administer the medication dated 4/7/20. -Cetirizine HCL (antihistamine) 10 milligrams (mg) 1 PO at dinnertime daily dated 4/7/20. -Omeprazole (proton pump inhibitor) 20 mg 1 PO everyday PRN with no instructions for the reason to administer the medication dated 10/6/20. -Concerta (stimulant) 36 mg 1 PO daily in the morning dated 8/17/20. -Trazodone (mood stabilizer) 50 mg 1 PO daily in the evening dated 6/15/20. -Risperidone (anti-psychotic) 0.5 mg 1-2 PO PRN with no instructions for the reason to administer the medication dated 6/15/20. -Risperidone 0.25 mg 2-3 PO at HS dated 7/6/20. -Risperidone 1 mg PO in the morning dated 8/17/20 and 10/7/22. -Risperidone 0.5mg 1 PO at bedtime (HS) dated 10/7/22. -No evidence of current physician orders. <p>Observation on 5/20/24 at approximately 12:00 pm of Client #1's medications revealed:</p> <ul style="list-style-type: none"> -1 bottle of over the counter 25 billion CFU probiotic capsules. -No evidence of 20 billion CFU probiotic capsules 	V 118		

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V 118	<p>Continued From page 4</p> <p>as ordered by the physician.</p> <p>-Trazodone 50 mg dispensed from a local pharmacy on 3/11/24 with labeled instructions to take 1/2-1 tablet PO at bedtime (pharmacy label did not match the physician's order or MAR).</p> <p>Review on 5/20/24 of Client #1's MARs dated 3/1/24-5/20/24 revealed:</p> <p>-Nasonex 50 mcg 2 sprays in each nostril in the morning PRN with no instructions for the reason to administer the medication on any of the MARs.</p> <p>-Cetirizine HCL 10 mg 1 PO once daily in the morning documented as administered at 6:30 am (instead of at dinnertime as ordered by the physician) on all MARs.</p> <p>-Omeprazole was not listed on the March 2024 or April 2024 MARs.</p> <p>-Omeprazole 20 mg tab (tablet) as needed ***Special Instructions PRN" was listed on the May 2024 MAR and crossed out with an X. There were no instructions for the medication amount or reason to administer.</p> <p>-Risperidone 0.25 mg was listed on the May 2024 MAR with instructions to administer 2 PO daily in the morning.</p> <p>-Risperidone 0.5 mg PO once daily PRN with no instructions for the medication amount or reason to administer on any of the MARs.</p> <p>Review on 5/21/24 of Alternative Family Living (AFL) Staff #1's personnel record revealed:</p> <p>-Date of Hire: 7/12/19.</p> <p>-Refresher training in medication administration 3/5/24.</p> <p>Review on 5/21/24 of the Programs Assistant's personnel record revealed:</p> <p>-Date of Hire: 11/7/23.</p> <p>-No evidence of training in medication administration.</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>Review on 5/21/24 of the Qualified Professional's personnel record revealed: -Date of Hire: 7/17/23. -No evidence of training in medication administration.</p> <p>Interview on 5/20/24 with AFL Staff #1 revealed: -"If new medications are ordered, I would let [QP] know that there is a new medication. I would check it and count it and then write it in on the MARs. [Licensee] sends typed up MARs in bulk ...If there is a medication change, I will change it on the MAR for that month and notify [Licensee] and then they will send me new ones. At the end of the month, I take a picture of the MAR and email it to the [Licensee]." -Last on-site visit from Licensee was November 2023. -" When they (Licensee) used to come out to the home (AFL), they would scan it (client MAR) into their [electronic system]. Now I just take pictures of everything and send them." -She sent a copy of physician's orders for each client's medication to the licensee when she initially contracted with them. The Licensee never requested a copy of updated physician's orders. "They did that when I first started with the company (Licensee), and nothing has changed since then." -Client #1's "MAR is wrong for risperidone. The actual dose is 0.5 mg. She used to take 2 pills. [QP] sent me the wrong MARs and I didn't notice it, my bad. I have only been giving her 1 Risperdal at bedtime and he just sent me the wrong MARs because it even had the old omeprazole on there and she hasn't taken that in years." -"We just had the medication refresher (training) recently. Our trainings are in compliance."</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>Interview on 5/21/24 with the Programs Assistant revealed: -Duties included performing "monthly check-ins" with AFL providers to "make sure everything is up to code." -Responsible for ensuring "all paperwork and MARs and medications are up to date and match and are not expired. Open the box of meds (medications) to check and make sure the correct amount of pills are in there ...and that it's the correct meds on the list. I pull out a MAR sheet and make sure that everything is in line to what is on there and compare the MAR sheet to the medication ..." -He conducted an on-site visit of Hummingbird for April 2023 "but all other months (visits) were virtual."</p> <p>Interview on 5/21/24 with the Qualified Professional (QP) revealed: -QP for Hummingbird Home since July 2023. -Never conducted an on-site visit to the Hummingbird Home. -"I delegate the duties to [Programs Assistant] ...I collect the information from him ...[Programs Assistant] counts the pills and makes sure the MAR is filled out. If there is an issue, then it is brought to my attention ...I review the MARs, I'm looking that they are filled out and that there a no deviations on the paper and that there is consistency in demonstrating administration of the medicine ..." -Had not received training in medication administration. -There were no current physician orders on file with the Licensee for Client #1. -Planned to have AFL Staff#1 obtain a medication review for Client #1 and update the MAR. - Will ensure that the physician writes the reason for administration on all as needed (PRN)</p>	V 118		

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V 118	Continued From page 7 medication orders. -Will verify accuracy of medication administration times Due to the failure to accurately document medication administration, it could not be determined if clients received their medication as ordered by the physician. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 118		
V 138	27G .0404 (A-E) Operations During Licensed Period 10A NCAC 27G .0404 OPERATIONS DURING LICENSED PERIOD (a) An initial license shall be valid for a period not to exceed 15 months from the date on which the license is issued. Each license shall be renewed annually thereafter and shall expire at the end of the calendar year. (b) For all facilities providing periodic and day/night services, the license shall be posted in a prominent location accessible to public view within the licensed premises. (c) For 24-hour facilities, the license shall be available for review upon request. (d) For residential facilities, the DHSR complaint hotline number shall be posted in a public place in each facility. (e) A facility shall accept no more clients than the number for which it is licensed.	V 138		

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V 138	<p>Continued From page 8</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, the licensee failed to post the annually renewed license in a prominent location accessible to public view within the licensed premises. The findings are:</p> <p>Observation on 5/20/24 at approximately 12:13 pm revealed: -The facility license posted at the front door expired on 12/23/23.</p> <p>Interview on 5/20/24 with Alternative Family Living (AFL) Staff #1 revealed: -The former Qualified Professional (QP) used to bring me the new license to the AFL "every year when it was received from the state, but ever since she left, I haven't received a new one."</p> <p>Interview on 5/21/24 with the QP revealed: -Began working for Irene Wortham Center, Inc. (Licensee) in July 2023. -His name replaced the former Chief Operating Officer as the point of contact for the licensee, " ...My name is on the envelope and all the mail gets funneled through the main office ..." -If renewed facility licenses were mailed to the Irene Wortham Center, " ...we stick them with their (AFL Providers') contracts for records ..."</p>	V 138		