Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL064-114	A. BUILDING: _____ B. WING _____	05/08/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GUIDING STAR HEALTH CARE ADULT GROUP	2809 HUNTINGTON COURT ROCKY MOUNT, NC 27803

(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	INITIAL COMMENTS An annual survey was completed on 5/8/24. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G. 5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 6 beds and currently has a census of 6. The survey sample consisted of audits of 3 current clients.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.	V 108	RECEIVED BY MHL & C 7/8/24	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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V 108	Continued From page 1 (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.	V 108		
	This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure three of three audited staff (Licensee, Qualified Professional-QP and Staff #1) had current training in First Aid and CPR. The findings are:		Certif. cards attached	5/8/24
	Review on 5/8/24 of the Licensee record revealed: -Hire date of November 2010 -No current First Aid/CPR		Certif. cards attached	5/8/24
	Review on 5/8/24 of the QP's record revealed: -Hire date 8/1/11 -No current First Aid/CPR		Certif. cards attached	5/8/24
	Review on 5/8/24 of staff #1's record revealed: -Hire date of 11/11/10 -No current First Aid/CPR		Certif. card attached	5/8/24
	Interview on 5/8/24 the Licensee stated: -He was the First Aid/CPR trainer for the facility. -Had completed a First Aid/CPR training in the last few months and not placed their cards in the record. -Would look for the cards at his office and send them by the end of day (5/8/24).		Certif. card attached -	5/8/24
	No current First Aid/CPR cards were received for			

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V 108	Continued From page 2 staff by end of day on 5/8/24.	V 108		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (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. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (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. (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: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the drug. (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.	V 118		

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V 118	Continued From page 3 This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure medications were administered on the order of a physician and MARs were kept current for one of three audited clients (client #1). The findings are: Review on 5/8/24 of client #1's record revealed: -Admission date of 5/3/11 -Diagnoses of Mild Intellectual Developmental Disorder (IDD), Chronic Paranoid Schizophrenia, Hypertension and Chronic Obstructive Pulmonary Disease (COPD). Further review on 5/8/24 of client #1's record revealed: -FL-2 dated 11/23 and 5/7/24 -"Perphenazine (mood) tab 8 mg- 1 AM" and "Fluticasone Furoate Vilanterol (COPD) 100- 1 puff a day" -Review of client #1's medication Perphenazine tab 8 mg with expiration date of 5/23 and Fluticasone 100- was out -Review of Mar's for February 1, 2024 through May 8, 2024 the Perphenazine tab 8 mg and Fluticasone 100 was initialed daily as given. Interview on 5/8/24 the Client #1 stated: -Had been with out his inhaler for about a month. -Had told the Licensee he was out a few weeks ago. -Had not had any issues with breathing, but needs his inhaler. -Not aware of his other medications were expired, had not felt any different. Interview on 5/8/24 the Licensee stated: -He was the the one who checked medications for expiration dates.	V 118	miss & mark cathen w/ right person. I was not told med was out, I order meds. Meds were out about a week. 5/8/24 ordered med that day, was received next Day. 5/9/24	

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V 118	Continued From page 4 -Had missed that expiration date on Perphenazine and client #1 had been taking it. -May have had multiple packs and just picked up the wrong one. -Was not aware the Fluticasone was empty. -Staff #1 had not mentioned the medication being out. -Staff #1 should not have signed the MAR that he was not giving the Fluticasone.	V 118	We had paper meds on hand and was given paper only older meds were accidently left in tray w/ current meds showing night personnel how to administer meds, older meds were NOT open. Night personnel was given fluticasone in morning meds. 5/8/24 * will counsel night staff about medications missing & and signing MAR and not giving medication. My QP and myself will monitor all MARS more closely to ensure meds are given correctly.	

Certificate of Completion

[redacted]

has completed the requirements for

First Aid/CPR/AED Instructor

conducted by

American Red Cross

Date Completed: **01/06/2022**

Valid Period: **2 Years**

Certificate ID: **00QN7LN**

American Red Cross

Scan code or visit:

https://www.redcross.org/take-a-class/qrcode?certnumber=00QN7LN

American Red Cross
Training Services

Certificate of Completion

[redacted]

has successfully completed requirements for

Responding to Emergencies Adult First Aid/CPR/AED

Date Completed: 4/15/2024
Validity Period: 2 Years

Conducted by: Guiding Star Health Care

To verify certificate, scan code or visit redcross.org/digitalcertificate and enter ID.

Learn and be inspired at LifesavingAwards.org

01K8SAS

American Red Cross
Training Services

Certificate of Completion

[redacted]

has successfully completed requirements for

Bloodborne Pathogens Training

Date Completed: 4/17/2024
Validity Period: 1 Years

Conducted by: Guiding Star Health Care

To verify certificate, scan code or visit redcross.org/digitalcertificate and enter ID.

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01K9176

American Red Cross
Training Services

Certificate of Completion

[redacted]

has successfully completed requirements for

Responding to Emergencies Adult First Aid/CPR/AED

Date Completed: 4/15/2024
Validity Period: 2 Years

Conducted by: Guiding Star Health Care

To verify certificate, scan code or visit redcross.org/digitalcertificate and enter ID.

Learn and be inspired at LifesavingAwards.org

01K8SAT

American Red Cross
Training Services

Certificate of Completion

[redacted]

has successfully completed requirements for

Bloodborne Pathogens Training

Date Completed: 4/17/2024
Validity Period: 1 Years

Conducted by: Guiding Star Health Care

To verify certificate, scan code or visit redcross.org/digitalcertificate and enter ID.

Learn and be inspired at LifesavingAwards.org

01K9178

American Red Cross
Training Services

Certificate of Completion

[redacted]

has successfully completed requirements for

Responding to Emergencies Adult First Aid/CPR/AED

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Validity Period: 2 Years

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01K8SAV

American Red Cross
Training Services

Certificate of Completion

[redacted]

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01K917C

GUIDING STAR HEALTH CARE ADULT GROUP HOME

2809 Huntington Court
Rocky Mount, N. C. 27804
Phone 252-937-1700
Fax 252-557-4810
guidingstar@embarqmail.com
"WE Are Our Brother's Keeper"

To: [redacted]	From: [redacted]
Fax: 919-855-3795	Pages: 13
Phone: 919-715-8078	Date: 7/8/24
Re: may 8 visit	cc:

Comments:

I am truly sorry for the delay. I have been ill and hospitalized. I hope this includes all information requested, if not please let me know. I did not get your email until Sunday July 7, 2024.

facsimile