

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL090-205	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 08/22/2024
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NAME OF PROVIDER OR SUPPLIER SOUTHWOOD PLACE GROUP HOME 1	STREET ADDRESS, CITY, STATE, ZIP CODE 134 EAST AVENUE MONROE, NC 28110
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V 000	<p>INITIAL COMMENTS</p> <p>An annual, complaint and follow up survey was completed on 8-22-24. The complaints were substantiated (#NC00218665, #NC00219216, #NC00219283, #NC00219132, #NC00220366). Deficiencies were cited.,</p> <p>This facility is licensed for the following service category: 10A NCAC 27G 5600C Supervised Living for Adults with a Developmental Disability.</p> <p>This facility is licensed for three and has a current census of three. The survey sample consisted of audits of three 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) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes.</p> <p>(b) The plans 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 the facility's response to fire emergencies.</p> <p>(d) Each facility shall have a first aid kit accessible for use.</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>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to ensure that fire drills were conducted quarterly on each shift. The findings are:</p> <p>Interview on 8-12-24 with the Qualified Professional revealed: -During the week the shifts ran from 7am-3pm, 2:30pm-10:30pm, and 10pm-8am. -During the weekends the shifts were 7a-7pm and 7pm-7am</p> <p>Review on 8-12-24 of fire drills from January 2024 through December 2023 revealed: -No second shift fire drill the first quarter of 2024. -No third shift fire drill the second quarter of 2024. -No first shift fire drill the fourth quarter of 2023.</p> <p>Interview on 8-14-24 with the current Facility Manager revealed: -Going forward she would ensure that the fire drills were done correctly.</p>	V 114		
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36</p>	V 120		

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V 120	<p>Continued From page 2</p> <p>degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interviews the facility failed to ensure that medications were stored separately for internal and external use, effecting one of three clients (Client #3). The findings are:</p> <p>Observation on 8-14-24 at approximately 4:00pm of Client #3's medications revealed: -Nystatin cream stored with oral medications</p> <p>Interview on 8-14-24 with Staff #4 revealed: -He was a fill in staff. -The box of Client #3's medications was how he found it in the closet.</p>	V 120		
V 291	<p>27G .5603 Supervised Living - Operations</p> <p>10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or</p>	V 291		

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V 291	<p>Continued From page 3</p> <p>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.</p> <p>(b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management.</p> <p>(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.</p> <p>(d) Program Activities. Each client shall have activity opportunities based on her/his choices, 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 interviews and record review the facility failed to maintain coordination between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management effecting one of three clients (Client #1). The findings are:</p> <p>Review on 8-12-24 of Client #1's record revealed:</p>	V 291		

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V 291	<p>Continued From page 4</p> <ul style="list-style-type: none"> -Admitted 3-1-21. -Diagnoses include: Moderate Intellectual Developmental Disorder, Autistic Disorder, Anxiety Disorder Unspecified, Unspecified Contact Dermatitis, Tic Disorder. <p>Interview on 7-31-24 with the day program Program Director revealed:</p> <ul style="list-style-type: none"> -They had multiple problems with getting in contact with the facility. -Client #1 had been dropped off at the day program on 5-28-24 when he was not supposed to be there that day, and he had a behavior causing him to be suspended. -Staff dropped him off again the next day when he was suspended. -They could not get in touch with the facility on the 5-28-24 and Client #1's mother had to come pick him up. -They did have a meeting on 5-30-24 with everyone on Clients #1's team and got updated phone numbers for the facility. <p>Interview on 8-12-24 with Client #'s Mother/Legal Guardian revealed:</p> <ul style="list-style-type: none"> -The facility have failed to pick him up in a timely manner from the day program, they don't pick him up until 3:30 or 4:00. - Client #1 has been sick and they didn't have anyone to pick him up. -Client #1 would then act out because he didn't feel good. If Client #1 tells the facility he doesn't feel good they take him to the day program anyway. -"[Day program] has called me on multiple occasions because they can't get anybody." <p>Attempted to call Facility Manager on 8-13-24 and was told her mailbox was full.</p>	V 291		

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V 291	<p>Continued From page 5</p> <p>Attempted to call Facility Manager on 8-20-24 and left a message, but Facility Manager did not return phone call.</p> <p>Interview on 8-14-24 with the Facility Manager revealed: -She didn't know that her mailbox was full.</p> <p>Interview on 8-14-24 with the Regional Director revealed: -She understood that the Facility Manager needed to be able to be reached. -They did have a meeting the the Day Program and updated everyones phone number so the Day Program could reach someone in case of an emergency.</p>	V 291		
V 513	<p>27E .0101 Client Rights - Least Restrictive Alternative</p> <p>10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE</p> <p>(a) Each facility shall provide services/supports that promote a safe and respectful environment. These include:</p> <p>(1) using the least restrictive and most appropriate settings and methods;</p> <p>(2) promoting coping and engagement skills that are alternatives to injurious behavior to self or others;</p> <p>(3) providing choices of activities meaningful to the clients served/supported; and</p> <p>(4) sharing of control over decisions with the client/legally responsible person and staff.</p> <p>(b) The use of a restrictive intervention procedure designed to reduce a behavior shall always be accompanied by actions designed to insure dignity and respect during and after the intervention. These include:</p>	V 513		

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V 513	<p>Continued From page 6</p> <p>(1) using the intervention as a last resort; and (2) employing the intervention by people trained in its use.</p> <p>This Rule is not met as evidenced by: Based on interviews and observation the facility failed to ensure that the least restrictive setting was provided, effecting one of three clients (Client #1). The findings are:</p> <p>Observation on 8-14-24 of Client #1's bedroom revealed: -Lock on the outside of his door that can be used with a code, key of thumbprint. -Client #1 was unable to enter his room due to not knowing the code and the thumbprint access had not been set up. -Staff entered the code for Client #1 and Client #1 entered his room.</p> <p>Interview on 8-16-24 and 8-12-24 with Client #1's Mother/Legal Guardian revealed: -Another client in the facility was going into Client #1's room and stealing his possessions. -The facility staff refused to retrieve her son's possessions. -Other clients were wearing client #1's clothes. -She had bought a lock for Client #1's room approximately "3-4 weeks ago". -The facility had not set the thumbprint code up yet. -When she recently asked the new Facility Manager when it would be set up, the Facility Manager told her that it was not her job to do</p>	V 513		

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V 513	Continued From page 7 something like that. Interview on 8-19-24 with the Vice President of Operations revealed: -The facility had purchased the lock for Client #1's door. -Client #1's Mother/Legal Guardian had wanted him to have it. -The staff at the facility were teaching him the code for the lock. -She thinks that the maintenance man had been out to the facility to set up the thumbprint access, but Client #1 had not been there that day. -She would make sure that the maintenance man coordinated a time with Client #1 and his Mother/Legal Guardian to get the thumbprint access enabled.	V 513		
V 540	27F .0103 Client Rights - Health, Hygiene And Grooming 10A NCAC 27F .0103 HEALTH, HYGIENE AND GROOMING (a) Each client shall be assured the right to dignity, privacy and humane care in the provision of personal health, hygiene and grooming care. Such rights shall include, but need not be limited to the: (1) opportunity for a shower or tub bath daily, or more often as needed; (2) opportunity to shave at least daily; (3) opportunity to obtain the services of a barber or a beautician; and (4) provision of linens and towels, toilet paper and soap for each client and other individual personal hygiene articles for each indigent client. Such other articles include but are not limited to toothpaste, toothbrush, sanitary napkins, tampons, shaving cream and shaving	V 540		

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V 540	<p>Continued From page 8</p> <p>utensil.</p> <p>(b) Bathtubs or showers and toilets which ensure individual privacy shall be available.</p> <p>(c) Adequate toilets, lavatory and bath facilities equipped for use by a client with a mobility impairment shall be available.</p> <p>This Rule is not met as evidenced by: Based on interview and observation the facility failed to provide the opportunity to shave daily, effecting two of three clients (Clients #1 and #3). The findings are:</p> <p>Observation on 7-31-24 at approximately 11:00am revealed: -Client #1 and Client #2 both had a beard of what appeared to be several days growth.</p> <p>Observation on 8-20-24 at approximately 4:00pm revealed -Client #1 and Client #2 had what appeared to be several days growth of beard.</p> <p>Interview on 7-31-24 with Client #1 revealed: -He replied "no" when asked if he was shaved daily.</p> <p>Interview on 7-31-24 with Client #3 revealed: -He was supposed to be shaved that day. -He did not like having facial hair and wanted to be shaved daily.</p> <p>Interview on 7-31-24 with the Day Program Director revealed: -Client #1 and Client #3 are frequently unshaven. -Client #3 Like to look well and his</p>	V 540		

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V 540	<p>Continued From page 9</p> <p>appearance is important to him.</p> <ul style="list-style-type: none"> -Client #3 has come to the Day Program and asked to be shaved there. -They called the Vice President of Operations three weeks ago to request Client #3 be shaven. -Since then, Client #3 has a full beard again. <p>Interview on 8-14-24 with Former Staff #4 revealed: -"I don't think they got shaved as often as they should."</p> <p>Interview on 8-12-24 with Client #1's Mother/Legal Guardian revealed: -The do not shave Client #1 regularly. -He had not been shaved for a week when she went on on of her visits.</p> <p>Interview on 8-14-24 with the Qualified Professional revealed: -This was the first time she was hearing about an issue with the clients being shaved. -She would make sure the clients were shaved.</p>	V 540		
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 interviews, the facility failed to be maintained in a clean, safe, attractive and orderly manner and kept free from offensive odors. The findings are:</p>	V 736		

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V 736	<p>Continued From page 10</p> <p>Observation on 8-14-24 at approximately 4:00pm revealed:</p> <ul style="list-style-type: none"> -Bedroom #1: popcorn ceiling peeling over the tub and sink approximately 2 feet by 3 inches, floor panels are peeling in several places, room has foul odor, no mattress pad protecting the mattress. -Bedroom #2 (empty): uncovered electrical outlet, 4 panels of the floor were peeling. -Hall bathroom: popcorn ceiling over the tub was peeling off, paint behind the toilet was bubbled up. -Third bedroom: brown substance on the closet door. -Hallway: six floor panels were peeling. <p>Interview on 8-12-24 with Client #1's Mother/Legal Guardian revealed:</p> <ul style="list-style-type: none"> -The popcorn ceiling is coming down and now there is a wet spot on his ceiling. -Sometimes Client #1's clothes smell so badly that she has to take them home and wash them. 	V 736		