| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | MHL032-133 | A. BUILDING: _____ B. WING _____ | 01/13/2025 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| THE SHERMAN HOUSE | 1712 SHERMAN AVENUE DURHAM, NC 27707 |

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| V 000 | INITIAL COMMENTS<br><br>An annual survey was completed on January 13, 2025. Deficiencies were cited.<br><br>This facility is licensed for the following service categories: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability and 10A NCAC 27G .5100 Community Respite for Individuals of all Disability Groups.<br><br>This facility is licensed for 4 and has a current census of 3. The 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability has a current census of 3 and the 10A NCAC 27G .5100 Community Respite for Individuals of all Disability Groups has a current census of 0. The survey sample consisted of audits of 3 current clients in the 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability and 0 clients in the 10A NCAC 27G .5100 Community Respite for Individuals of all Disability Groups. | V 000 | | |
| V 118 | 27G .0209 (C) Medication Requirements<br><br>10A NCAC 27G .0209 MEDICATION REQUIREMENTS<br>(c) Medication administration:<br>(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.<br>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.<br>(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. | V 118 | | |

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| V 118 | Continued From page 1<br>(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:<br>(A) client's name;<br>(B) name, strength, and quantity of the drug;<br>(C) instructions for administering the drug;<br>(D) date and time the drug is administered; and<br>(E) name or initials of person administering the drug.<br>(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.<br><br>This Rule is not met as evidenced by:<br>Based on observation, record review and interview, the facility failed to keep the MAR current affecting one of three current clients (#2). The findings are:<br><br>Observation on 1/13/25 at approximately 10:55 am of the medication bin for client #2 revealed:<br>-There was a box of Mupirocin 2% topical cream (skin infection).<br><br>Review on 1/13/25 of client #2's record revealed:<br>-Admission date of 3/24/05.<br>-Diagnoses of Autism Spectrum Disorder and Severe Intellectual Disability.<br>-Physician order dated 7/17/24 for Mupirocin 2% topical cream, apply to left leg 3x daily. | V 118 | | |

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| V 118 | Continued From page 2<br><br>Review on 1/13/25 of client #2's January 2025 MAR revealed:<br>-No staff initials to indicate the medication was administered on 1/1/25 thru 1/12/25 for the 3:00 pm dose of Mupirocin 2% topical cream.<br><br>Interview on 1/13/25 with the Residential Manager revealed:<br>-He reported he was "sure" client #2 received his 3:00 pm dose of the Mupirocin 2% topical cream for his left leg.<br>-Client #2 was given the Mupirocin 2% topical cream when he returned from the Day Program.<br>-He acknowledged the MAR was not kept current for client #2. | V 118 | | |
| V 513 | 27E .0101 Client Rights - Least Restrictive Alternative<br><br>10A NCAC 27E .0101 LEAST RESTRICTIVE ALTERNATIVE<br>(a) Each facility shall provide services/supports that promote a safe and respectful environment. These include:<br>(1) using the least restrictive and most appropriate settings and methods;<br>(2) promoting coping and engagement skills that are alternatives to injurious behavior to self or others;<br>(3) providing choices of activities meaningful to the clients served/supported; and<br>(4) sharing of control over decisions with the client/legally responsible person and staff.<br>(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:<br>(1) using the intervention as a last resort; | V 513 | | |

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| V 513 | Continued From page 3<br>and<br>(2) employing the intervention by people trained in its use.<br><br>This Rule is not met as evidenced by:<br>Based on record review, observation, and interviews, the facility failed to use the least restrictive and most appropriate settings and methods. The findings are:<br><br>Review on 1/13/25 of client #2's record revealed:<br>-Admission date of 3/24/05.<br>-Diagnoses of Autism Spectrum Disorder and Severe Intellectual Disability.<br>-No documentation of restriction in treatment plan.<br><br>Observation on 1/13/25 at approximately 10:10 am revealed:<br>-Client #2's clothing was in a locked closet in the hallway.<br><br>Attempted interview on 1/13/25 with client #2 revealed:<br>-He could not be interviewed because he was nonverbal.<br><br>Interview on 1/13/25 with staff #1 revealed:<br>-Client #2's clothing was locked in the closet in the hallway because he tore up his clothing.<br>-Client #2 also threw pieces of his clothing into the toilet.<br>-They had been locking his clothing away in the closet for about a year.<br><br>Interview on 1/13/25 with the Residential | V 513 | | |

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| V 513 | Continued From page 4<br><br>Manager revealed:<br>-Client #2's clothes were kept in closet because he will tear his clothing.<br>-They had been locking his clothing in the closet since July 2024.<br>-Client #2 tore up his clothes and the other client's clothes.<br><br>Interview on 1/13/25 with the Executive Director revealed:<br>-She was aware of client #2 tearing up his clothes.<br>-She was not aware of staff locking client #2's clothes in the hallway closet.<br>-The team did not meet to put anything in place to address staff locking client #2's clothes away in the hallway closet. | V 513 | | |