

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL043-084	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 01/15/2025
NAME OF PROVIDER OR SUPPLIER FOREST HILLS FAMILY CARE FACILITY		STREET ADDRESS, CITY, STATE, ZIP CODE 54 RIPLEY ROAD CAMERON, NC 28326		
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V 000	INITIAL COMMENTS An annual, complaint and follow up survey was completed on January 15, 2025. The complaint was substantiated (intake #NC00225248). 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 3 and has a current census of 3. The survey sample consisted of audits of 3 current clients.	V 000		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (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. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (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.	V 112		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Division of Health Service Regulation

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to develop goals and strategies and implement procedures in the treatment/habilitation plan to address the client's needs for 1 of 3 audited clients. The findings are:</p> <p>Finding #1 Review on 1/14/25 of client #3's record revealed: - Admitted on 6/21/12. - Diagnoses of Severe Intellectual Developmental Disabilities, Autistic Disorder, Hypertension and Diabetes Mellitus II. - Physicians order dated 8/12/24: Check blood sugar "2x/day." - Client #3' Blood sugar check documentation: October 2024- Blood sugar checked only once daily: 10/3/24-10/10/24, 10/17/24, 10/22/24, 10/23/24, 10/25/24, 10/26/24, 11/27/24-11/29/24 and 10/31/24. No blood sugar check on 10/18/24. November 2024- No blood sugar check on 11/1/24; Blood sugar checked only once daily 11/4/24-11/6/24, 11/11/24, 11/14/24, 11/15/24, 11/17/24-11/21/24, 11/25/24 and 11/30/24. December 2024- Blood sugar checked only once daily 12/3/24, 12/4/24, 12/6/24, 12/9/24-12/13/24, 12/15/24-12/18/24, 12/20/24, 12/26/24 and 12/31/24. No blood sugar check on 12/23/24.</p>	V 112		

Division of Health Service Regulation

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V 112	Continued From page 2 January 2025- Blood sugar checked once daily 1/1/25, 1/6/25, 1/9/25. No blood sugar check 1/10/25. Review on 1/14/25 of Client #3's Individual Support Plan dated 4/1/24 revealed: - "My Support Needs- Medical support needs: [Client #3] needs support to...have his blood sugar levels checked twice daily...regular blood checks are required...Things that may create stress...change in blood sugar levels (high: 250-400, low: less than 70)...What you can do to help me prepare ahead? Ensure his blood sugar levels are in good range. Long Range Goal 1: [Client #1] will increase his health...Where am I now: [Client #1] needs support to monitor his blood sugar levels. Interview on 1/15/25 staff #2 stated he was aware of client #3's 2 times daily blood sugar checks and completed it when he worked. Interview on 1/15/25 the Qualified Professional stated: - She visited the facility 1-2 times weekly and reviewed staff's documentation. - She had a training with staff to remind them to document appropriately. - She would ensure staff were checking and documenting client #3's blood sugar checks. Interview on 1/15/25 the Director of Quality Management stated: - Client #3's blood sugar checks should be completed and documented twice daily.	V 112		
V 542	27F .0105(a-c) Client Rights - Client's Personal Funds	V 542		

Division of Health Service Regulation

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V 542	Continued From page 3 10A NCAC 27F .0105 CLIENT'S PERSONAL FUNDS (a) This Rule applies to any 24-hour facility which typically provides residential services to individual clients for more than 30 days. (b) Each competent adult client and each minor above the age of 16 shall be assisted and encouraged to maintain or invest his money in a personal fund account other than at the facility. This shall include, but need not be limited to, investment of funds in interest-bearing accounts. (c) If funds are managed for a client by a facility employee, management of the funds shall occur in accordance with policy and procedures that: (1) assure to the client the right to deposit and withdraw money; (2) regulate the receipt and distribution of funds in a personal fund account; (3) provide for the receipt of deposits made by friends, relatives or others; (4) provide for the keeping of adequate financial records on all transactions affecting funds on deposit in personal fund account; (5) assure that a client's personal funds will be kept separate from any operating funds of the facility; (6) provide for the deduction from a personal fund account payment for treatment or habilitation services when authorized by the client or legally responsible person upon or subsequent to admission of the client; (7) provide for the issuance of receipts to persons depositing or withdrawing funds; and (8) provide the client with a quarterly accounting of his personal fund account.	V 542			

Division of Health Service Regulation

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V 542	<p>Continued From page 4</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide quarterly accounting of personal funds for 3 of 2 current client (#1, #2 and #3). The findings are:</p> <p>Finding #1: Review on 1/14/25 of client #1's record revealed: - Admitted 4/26/10 - Diagnoses Autistic Disorder, Intellectual Developmental Disability-Severe and Hypertension. - No evidence quarterly accounting statements had been provided to client #1's representative.</p> <p>Finding #2: Review on 1/14/25 of client #2's record revealed: - Admitted 7/16/20 - Diagnoses Autistic Disorder and Intellectual Developmental Disability- Moderate - No evidence quarterly accounting statements had been provided to client #1's representative.</p> <p>Finding #3: Review on 1/14/25 of client #2's record revealed: - Admitted 6/21/12 - Diagnoses Autistic Disorder, Intellectual Developmental Disability- Severe, Hypertension and Diabetes Mellitus II - No evidence quarterly accounting statements had been provided to client #1's representative.</p> <p>Interview on 1/15/25 client #1 and client #2 did not respond to questions when asked.</p> <p>Interview on 1/15/25 client #3 did not answer questions when asked and only commented about the super bowl.</p>	V 542		

Division of Health Service Regulation

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V 542	Continued From page 5 Interview on 1/15/25 client #1's guardian stated: - She had recently requested client #1's balance due to some planned shopping. - She had received a statement with the balance but she had not received quarterly statements of client #1's account. Interview on 1/15/25 client #3's guardian stated: - She had recently received a statement of client #3's account because she had requested it. - She had not received any other statements for client #3's account. Interview on 1/15/25 the Accounting/Human Resources staff stated: - She had worked in accounting for the facility for several years. - She had not provided quarterly accounting statement to the client's or their representatives unless it was requested. Interview on 1/15/25 the Director of Quality Management stated: - He thought the facility only had to make the quarterly statement of the clients accounts available. - He understood the requirement to provide quarterly accounting statements. - He would ensure the facility provided quarterly accounting statements as required.	V 542		
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.	V 736		

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V 736	<p>Continued From page 6</p> <p>This Rule is not met as evidenced by: Based on observations and interviews the facility was not maintained in a safe, clean and attractive manner. The findings are:</p> <p>Observation on 1/14/25 of the facility revealed:</p> <ul style="list-style-type: none"> - The dining area right side window had a blind that was missing approximately 1 1/2 feet (ft) of blind slats; the walls had stains that were various shades of brown; the baseboards were discolored and dusty; there was a crack in the wall under the light switch approximately 4 inches long; a chair at the dining table had a broken piece of wood approximately 4 inches that exposed sharp wooded edges. - The kitchen floor had tile in front of the kitchen sink that was loose and lifting approximately 3 ft by 2 ft in size and the area was very soft when stepped on; the lower cabinet in the corner to the left of the sink was off the hinge; all cabinets under the sink had small black particles through out; 1 cabinet under the sink had 2 live spiders in webs; the kitchen counter had 3 pots with liquid ad food residue in them sitting on a baking pan that also had food residue on it; ; the upper cabinet beside the refrigerator had a door on the right side that was cracked in several areas on the inside of the door; the freezer was missing a handle but had a sharp pointy piece of it towards the bottom of the freezer door; the refrigerator had brown residue on it; bottom refrigerator doors ere missing and food particles were spilled; the microwave was heavily soiled with food particles and spills; stove drip pans were rusted, dark with food particles and some had cracks; the oven was heavily stained with dark particles in the bottom; the oven drawer had dark colored spills on it; cabinets beside the stove felt greasy and had dust. 	V 736		

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V 736	<p>Continued From page 7</p> <ul style="list-style-type: none"> - The return vent door by the kitchen had heavy dust on inside and outside. - Client #1's bedroom had no blind at the window; no sheet on the bed; walls had various brown stains and smudges throughout the room; the 9 drawer dresser had the top middle drawer handle missing; there was broken plastic clothes hamper that had sharp edges; the bedroom door was cracked by the door knob; brown molding at the bottom of the doorway was cracked and broken. - The hallway bathroom had a section of baseboard that was missing behind the door, a rusted vent cover, shoe molding and baseboard was discolored green and dark behind the toilet; the toilet tank top was broken on the right edge approximately 3 inches; the door frame on the right side had brown molding around the bottom that was cracked and broken. - Client #2's bedroom had a blind missing from the left side window; the brown headboard was peeling; approximately 6 ft of brown molding around the door frame from top to bottom missing; the corner wall beside client #2's bedroom was missing approximately 4 ft of molding; - The floor vent in the living room behind the Christmas tree was missing. - Client #3's bedroom had a foul odor of feces; the white door was stained; the toilet was dirty with feces. - The sitting/tv room had had wood frame chair, sofa and love seat that had rips and tears in the material of cushions; walls had dark smudges and stains throughout. <p>Interview on 1/15/25 client #1 and client #2 did not respond to questions when asked.</p> <p>Interview on 1/15/25 client #3 did not answer questions when asked and only commented</p>	V 736		

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V 736	<p>Continued From page 8</p> <p>about the super bowl.</p> <p>Interview on 1/15/25 staff #2 stated he had worked at the facility since October 2024 and was responsible for monitoring clients, administering medications, meal preparation and cleaning. He would notify the office if repairs were needed at the facility.</p> <p>Interview on 1/15/25 the Qualified Professional stated:</p> <ul style="list-style-type: none"> - She went to the facility 1-2 times weekly. - The facility had maintenance work request slips for staff to complete. - Staff would complete the form and send it to the office. - She had completed the maintenance before, taken pictures and notified the Accounting/Human Resources staff. - Maintenance would be sent to the facility to complete the repairs. <p>Interview on 1/15/25 the Director of Quality Management stated:</p> <ul style="list-style-type: none"> - The kitchen floor had been like that for approximately 3 weeks. The facility will get new flooring installed in the kitchen. - He understood the freezer was missing a handle but it could still be used by the clients. - The pots on the counter were probably soaking. - Client #1 tears down the blinds and curtains in his room. They are planning to tint the window and update his treatment plan. - Staff working 3rd shift should be cleaning the facility during the shift. - He would ensure all maintenance issues were addressed. <p>This deficiency constitutes a re-cited deficiency</p>	V 736		

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V 736	Continued From page 9 and must be corrected within 30 days.	V 736			