

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL013-084	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/21/2025
NAME OF PROVIDER OR SUPPLIER CABARRUS COUNTY GROUP HOME #2		STREET ADDRESS, CITY, STATE, ZIP CODE 1201 CHIPOLA STREET KANNAPOLIS, NC 28083		
(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 April 21, 2025. Deficiencies were cited. This facility is licensed for the following category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 5 and has a current census of 4. The survey sample consisted of audits of 3 current clients.	V 000		
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.	V 118		

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

TITLE

(X6) DATE

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V 118	<p>Continued From page 1</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>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure MARs were kept current affecting 1 of 3 audited clients (Client #3). The findings are:</p> <p>Review on 4/15/25 of Client #3's record revealed: -Admitted 3/9/92. -Diagnosed with Schizophrenia, Anxiety, Moderate Intellectual Developmental Disability, Ischemic Cardiomyopathy, Arthritis, Hypertension, Osteoporosis, High Cholesterol, History of Breast Cancer, History of Urinary Tract Infections. -Physician's order dated 12/9/24 for Ibandronate Sodium (osteoporosis) 150 milligrams (mg) 1 tab on the first day of each month. -March 2025 MAR revealed Ibandronate Sodium 150mg was administered daily.</p> <p>Interview on 4/16/25 with House Manager (HM) #1 revealed: -It was a documentation error that Client #3's Ibandronate Sodium 150mg was documented as administered daily in March 2025. Normally there was a line drawn throughout the remainder of the month. It was an error that she continued to initial medication administration through the remainder of the month for this medication.</p>	V 118		

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V 118	Continued From page 2 Interview on 4/21/25 with HM #2 revealed: -It was a documentation error that Client #3's Ibandronate Sodium 150mg was documented as administered daily in March 2025. The pharmacy dispensed only one tablet of this medication monthly. Interview on 4/21/25 with the Qualified Professional revealed: -Was not aware of the documentation error with Client #3's Ibandronate Sodium on the March 2025 MAR. Interview on 4/21/25 with the facility's dispensing pharmacy revealed: -Ibandronate Sodium 150mg was dispensed as only one tablet monthly for Client #3 so it would not have been possible to have administered any more than one tablet each month. Interview on 4/21/25 with the Administrator revealed: -It was a documentation error that HM #1 and HM #2 initialed Client #3's March 2025 MAR daily for administration of Ibandronate Sodium 150mg. Will follow up with the facility staff regarding this documentation error.	V 118		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with	V 536		

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V 536	Continued From page 3 disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented. (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered. (d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (e) Formal refresher training must be completed by each service provider periodically (minimum annually). (f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule. (g) Staff shall demonstrate competence in the following core areas: (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities;	V 536		

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V 536	Continued From page 4 (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). (h) Service providers shall maintain documentation of initial and refresher training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where they attended; and (C) instructor's name; (2) The Division of MH/DD/SAS may review/request this documentation at any time. (i) Instructor Qualifications and Training Requirements: (1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions. (2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program. (3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (4) The content of the instructor training the service provider plans to employ shall be	V 536		

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V 536	Continued From page 5 approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule. (5) Acceptable instructor training programs shall include but are not limited to presentation of: (A) understanding the adult learner; (B) methods for teaching content of the course; (C) methods for evaluating trainee performance; and (D) documentation procedures. (6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach. (7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually. (8) Trainers shall complete a refresher instructor training at least every two years. (j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where attended; and (C) instructor's name. (2) The Division of MH/DD/SAS may request and review this documentation any time. (k) Qualifications of Coaches: (1) Coaches shall meet all preparation requirements as a trainer. (2) Coaches shall teach at least three times the course which is being coached. (3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction.	V 536		

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V 536	<p>Continued From page 6</p> <p>(I) Documentation shall be the same preparation as for trainers.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure staff received annual training in alternatives to restrictive interventions affecting 3 of 3 staff (House Manager (HM) #1, HM #2, and Qualified Professional (QP)). The findings are:</p> <p>Review on 4/15/25 of HM #1's personnel record revealed: -Hired 2/9/04; -Most recent training in Evidenced Based Protective Interventions (EBPI) was completed on 9/28/23 with an expiration date of 9/28/24.</p> <p>Review on 4/15/25 of HM #2's personnel record revealed: -Hired 9/11/23. -Most recent training in EBPI was completed on 3/28/24 with an expiration of 3/28/25.</p> <p>Review on 4/15/25 of the QP's personnel record revealed: -Hired 2/18/24. -No training certificate for EBPI.</p> <p>Interview on 4/21/25 with the QP revealed: -Had training in North Carolina Interventions from another job. -Completed initial training in EBPI with the facility</p>	V 536		

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V 536	Continued From page 7 upon hire in March 2024. -Will complete annual training in EBPI in the next week. Interview on 4/21/25 with the Administrator revealed: -Will provide EBPI annual training to HM #1, HM #2, and QP within the next week or two.	V 536		