

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-862	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 04/25/2025
NAME OF PROVIDER OR SUPPLIER HEAVENLY PLACE 2			STREET ADDRESS, CITY, STATE, ZIP CODE 3120 TUCKLAND DRIVE RALEIGH, NC 27610		
(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 and follow up survey was completed on April 25, 2025. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness. The facility is licensed for 6 and has a current census of 5. The survey sample consisted of audits of 3 current clients.	V 000			
V 107	27G .0202 (A-E) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (a) All facilities shall have a written job description for the director and each staff position which: (1) specifies the minimum level of education, competency, work experience and other qualifications for the position; (2) specifies the duties and responsibilities of the position; (3) is signed by the staff member and the supervisor; and (4) is retained in the staff member's file. (b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility: (1) is at least 18 years of age; (2) is able to read, write, understand and follow directions; (3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and (4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry.	V 107	V 107 The Administration will ensure that all staff personnel records are available for review and meets the requirements of the current job employment that includes, education, background check and work experience. Monitoring will take place monthly by administrative staff and report the outcome to the Administrator.	4/30/25	

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MHL&C 5/13/25

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

TITLE

(X6) DATE

STATE FORM

6899

KFBR11

If continuation sheet 1 of 11

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V 107	<p>Continued From page 1</p> <p>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to have a complete personnel record affecting one of two audited staff (#4). The findings are:</p> <p>Review on 4/25/25 of Staff #4's personnel record revealed: -Hire date of 5/19/22. -She was hired as the House Manager. -No documentation of educational verification.</p> <p>Interview on 4/25/25 with Staff #4 revealed: -She thought she had shared her education information when she applied for the job. -She had graduated from high school.</p>	V 107			

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V 107	Continued From page 2 -She did not know why her school information was not in her personnel record. Interview on 4/25/25 with the Administrator revealed: -He did not know why Staff #4's record did not have her education verification. -He had asked her today to bring in a copy of her high school diploma and it would be filed in her record. -He acknowledged the facility failed to have a complete personnel record for Staff #4.	V 107			
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	V 118	V 118 Staff will continue to administer all medication as prescribed by the doctor's order to reduce the risk of medication error in the home. Monitoring will take place monthly by the QP while reviewing the MAR and reporting the outcome to the Administrator.		4/30/25

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V 118	<p>Continued From page 3</p> <p>(E) name or initials of person administering the drug.</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 observation, record reviews and interviews, the facility failed to keep the MARs current affecting three of three audited clients (#1, #2 and #3). The findings are:</p> <p>Review on 4/24/25 of Client #1's record revealed: -Admission date of 9/16/21. -Diagnoses of Bipolar Disorder; Chronic Back Pain; History of Renal Calcium; Hypertension; Anxiety; Mixed Incontinence; Hyperlipidemia; Tobacco Use. -Physician order dated 2/25/25 for Hydrocortisone 1% (skin rash), apply topically to affected area twice daily as needed. -There was no physician order for Hydrocortisone 2.5%, apply topically to affected area twice daily.</p> <p>Observation on 4/24/25 at about 12:20 pm of Client #1's medications revealed: -Hydrocortisone 1 %, was available. -Hydrocortisone 2.5% was not available.</p> <p>Review on 4/24/25 of Client #1's MARs MARs from February 1, 2025 through April 24, 2025 revealed: -Hydrocortisone 1% had not been initialed by staff</p>	V 118			

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V 118	Continued From page 4 as administered. -Hydrocortisone 2.5% had been initialed by staff as administered twice daily. Review on 4/24/25 of Client #2's record revealed: -Admission date of 1/13/25. -Diagnoses of Schizophrenia, Hyperlipidemia, Essential Hypertension, Type 2 Diabetes, Gastroesophageal Reflux Disease (GERD), Hypothyroidism. -Physician's order dated 12/11/24: -Atorvastatin 20 milligrams (mg) (hypertension), take one tablet by mouth at bedtime. -Levothyroxine 100 micrograms (mcg) (hypothyroidism), take one tablet by mouth every day. -Metformin HCl 500 mg (diabetes), take one tablet by mouth every day. -Naproxen 500 mg (pain relief), take one tablet by mouth every 12 hours as needed with meals. -Physician's order dated 3/9/25: -Omeprazole DR 40mg (GERD), take one capsule by mouth every day. -Physician's order dated 4/15/25: -Clozapine 200mg (schizophrenia), take one tablet by mouth at bedtime. -Clozapine 50mg, take one tablet by mouth at bedtime. -Divalproex Sodium Delayed Release (DR) 500mg (anti-psychotic), take one tablet by mouth three times daily. -Cyclobenzaprine 10mg (pain relief), take one tablet by mouth three times daily as needed for pain. -Aripiprazole 15mg (schizophrenia), take one tablet by mouth twice a day.	V 118			

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V 118	Continued From page 5 -Aripiprazole 30mg, take one tablet by mouth daily. -Physician's order dated 4/24/25: -Venlafaxine HCl Extended Release (ER) 150mg (depression/anxiety), take 2 capsules by mouth twice daily. -Aripiprazole 15mg, take one tablet by mouth twice a day, discontinued (D/C). Observation on 4/24/25 at about 10:24 am of Client #2's medications revealed: -All medications listed were available. Review on 4/24/25 of client #2's MARs from February 1, 2025 through April 24, 2025 revealed: February 2025- -Clozapine 200 mg had not been initialed as administered on 2/28. -Clozapine 50 mg had not been initialed as administered on 2/28. -Aripiprazole 15 mg had not been initialed as administered 2/28. -Venlafaxine HCl ER 150mg had not been initialed as administered for 8:00 PM dose on 2/28. -Divalproex Sodium DR 500mg had not been initialed as administered for the 5:00 PM and 8:00 PM doses on 2/28. April 2025- -Aripiprazole 30 mg was not listed on the MAR. -Aripiprazole 30 mg had not been initialed as administered from 4/15 through 4/25. -Aripiprazole 15 mg had been initialed as administered from 4/15 through 4/25. -Venlafaxine HCl ER 150mg instructions on the MAR were different from the instructions on the bubble pack. MAR instructions were 'take two capsules by mouth twice daily,' bubble pack	V 118			

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V 118	<p>Continued From page 6</p> <p>instructions were 'take two capsules by mouth daily.' MAR instructions were consistent with physician's order dated 4/24/25.</p> <p>Review on 4/24/25 of Client #3's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 1/7/2025. -Diagnoses of Schizophrenia Disorder, Tobacco Use Disorder, Genital Herpes simplex 2, Hyperprolactinemia. -Physician's order dated 1/21/25: <ul style="list-style-type: none"> -Vitamin D3 400 units (iu), 100 (Vitamin D deficiency), take one tablet by mouth every day. -Folic Acid 1mg (nutritional supplement), take one-half tablet by mouth in the morning. -Senna Laxative 8.6mg (constipation), take two tablets by mouth twice a day. -Bisacodyl EC 5mg (constipation), take two tablets by mouth at bedtime. <p>Observation on 4/24/25 at about 11:18 am of Client #3's medications revealed:</p> <ul style="list-style-type: none"> -Vitamin D3 400 iu, was not available. <p>Review on 4/24/25 of client #3's MAR from February, 2025 revealed:</p> <ul style="list-style-type: none"> -Vitamin D3 400 iu, 100 had not been initialed as administered 2/26-2/28. -Folic Acid 1 mg had not been initialed as administered 2/26-2/28. -Senna Laxative 8.6 mg had not been initialed as administered 2/26-2/28. -Bisacodyl EC 5 mg had not been initialed as administered 2/26-2/28. <p>Interview on 4/24/25 with Client #1 revealed:</p> <ul style="list-style-type: none"> -She had not had any issues in receiving her medications. -She was using Hydrocortisone for a skin irritation that developed above her lips. 	V 118			

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V 118	<p>Continued From page 7</p> <p>-Medication was working because her skin was clearing.</p> <p>-She had only been using the Hydrocortisone 1% tube.</p> <p>Interview on 4/25/25 with Clients #2 and #3 revealed:</p> <p>-They reported they receive their medications on time and daily.</p> <p>Interview on 4/24/25 with with Staff #4 revealed:</p> <p>-The last of the previous package for Client #3 had been administered that morning and they were due to get another package that day. The Vitamin D3 would be coming in today.</p> <p>Interview on 4/24/25 with the Qualified Professional (QP) revealed:</p> <p>-He was not aware that staff had been marking Hydrocortisone 2.5% as administered for Client #1.</p> <p>-Client #1 had develop a skin condition and was being treated with the Hydrocortisone tube that the pharmacy had sent to the facility.</p> <p>-QP spoke with the pharmacy and reported that the Aripiprazole 15mg for Client #2 had been discontinued 4/15/25</p> <p>-New dose of Aripiprazole 30mg was to begin 4/15/25.</p> <p>-QP coordinated with prescriber and received a new physician's order for Client #2 on 4/24, dated 4/24, for Venlafaxine HCl 150mg confirming the dosing schedule on the new physician's order which is consistent with the MAR.</p> <p>-QP acknowledged that staff was unable to provide an explanation for the discrepancies or confirm that the correct dosages of medication was administered for Client #2.</p> <p>Due to the failure to accurately document</p>	V 118			

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V 118	Continued From page 8 medication administration, it could not be determined if the clients received their medication as ordered by the physician.		V 118		
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 was not maintained in a clean, attractive, orderly manner and free from offensive odor. The findings are:</p> <p>Observation on 4/24/25 at approximately 9:12 AM revealed: -Kitchen: -Water stain on ceiling approximately 8' long. -Bedroom 2: Clients #2, and #3 reside in this room -Urine smell. -Bathroom 2 (Hall): -Quarter round molding missing all around the room. -Baseboard coming off wall at corner near shower/tub- appears water damaged. -Multiple (20-30) brownish stains on wall between shower/tub and toilet. -Faucet reversed (left handle turns on cold, right handle turns on hot). -Hall: -Staff bedroom door stained: dark gray patch on center of door approximately 12"x12", water stains on upper right corner of door approximately</p>		V 736	<p>V 736 Maintenance/staff will replace, repair and clean the identified areas in the home according to the state regulations. Monitoring will take place monthly by the QP by using the Environmental Assessment Form and reporting the outcome to the Administrator.</p>	4/30/25

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V 736	Continued From page 9 4"x6". -Living Room: -Spackle patch on ceiling approximately 12"x5", water stain around patch. -Couch cushion torn open with stuffing coming out of the top. -Outside: -Paint peeling on four shutters (two per window) on front two windows. -On the side of the house wood mailbox stand (4'x4' approximately 4' long with a 2' crosspiece 1' from one end) with concrete (approximately 12" wide from 1/2" thick at the edge to 3" thick around the wood post) at the base lying on the ground -Back door: board along the bottom of the door frame coming apart from the frame and falling off. Interview on 4/29/25 with the Qualified Professional revealed: -Water damage in the Kitchen was due to be fixed soon, though no specific date was stated. -He was unaware of the issues in the bathroom but would be calling the company's handyman to get them addressed today. -The couch cushion was due to be replaced as soon as possible.	V 736			
V 750	27G .0304(b)(3) Maintenance of Elec., Mech., & Water Systems 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (3) Electrical, mechanical and water	V 750			

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V 750	Continued From page 10 systems shall be maintained in operating condition. This Rule is not met as evidenced by: Based on observation and interview, the facility failed to maintain electrical systems in safe operating conditions. The findings are: Observation on 4/24/25 from about 8:30 am to 1:30 pm of the facility revealed: -Two smoke detectors located at the hallway leading to the clients' bedrooms made the alarm warning noises (chirping sounds) indicating that the batteries needed replacing. Interview on 4/24/25 with Staff #4 revealed: -She had not noticed the smoke detectors chirping. -She believed the noise had just started today. -She acknowledged the facility failed to ensure the smoke detectors were maintained in operating conditions.	V 750	V 750 Maintenance will repair/replace the smoke detector in the hallway to ensure the safety of clients and others in the home according to state regulations. Monitoring will take place monthly by the QP by using the Environmental Assessment Form and reporting the outcome to the Administrator.		4/30/25