STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL001-014	A. BUILDING: _____ B. WING _____	06/17/2025

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CRESTVIEW GROUP HOME #2	635 CRESTVIEW DRIVE BURLINGTON, NC 27217

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V 000	INITIAL COMMENTS An annual survey was completed on June 17, 2025. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness. This 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 109	27G .0203 Privileging/Training Professionals 10A NCAC 27G .0203 COMPETENCIES OF QUALIFIED PROFESSIONALS AND ASSOCIATE PROFESSIONALS (a) There shall be no privileging requirements for qualified professionals or associate professionals. (b) Qualified professionals and associate professionals shall demonstrate knowledge, skills and abilities required by the population served. (c) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence. (d) Competence shall be demonstrated by exhibiting core skills including: (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. (e) Qualified professionals as specified in 10A NCAC 27G .0104 (18)(a) are deemed to have met the requirements of the competency-based employment system in the State Plan for MH/DD/SAS.	V 109		

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V 109	Continued From page 1 (f) The governing body for each facility shall develop and implement policies and procedures for the initiation of an individualized supervision plan upon hiring each associate professional. (g) The associate professional shall be supervised by a qualified professional with the population served for the period of time as specified in Rule .0104 of this Subchapter. This Rule is not met as evidenced by: Based on records reviews and interviews, the Qualified Professional (QP) did not meet the educational requirement for the MH/DD/SAS population served. The findings are: Review on 6/17/25 of the Group Home Coordinator/QP revealed: -Hire date of 5/20/86. -She was the Group Home Coordinator/QP. -There was documentation of a high school diploma. -There was no documentation of having a Bachelor's degree. Review on 6/17/25 of Client #1's record revealed: -Admission date of 3/13/10. -Diagnoses of Schizophrenia; Type II Diabetes Mellitus; Hypertension; Polycystic Ovarian Syndrome; Hyperlipidemia; Hypothyroidism; Chronic Back/Knee Pain. -Person Centered Plan was signed by the Group Home Coordinator/QP under Section 2. "PERSON RESPONSIBLE FOR THE PCP: The following signature confirms the responsibility of	V 109		

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V 109	Continued From page 2	V 109		

the QP/LP for the development of this PCP. The signature indicates agreement with the services/supports to be provided."
-Group Home Coordinator had the initials "QP" placed after her signature.

Review on 6/17/25 of Client #2's record revealed:
-Admission date of 4/1/20.
-Diagnoses of Schizophrenia; Obesity; Sinus tachycardia (secondary to Clozapine); Chronic Constipation; Hypertriglyceridemia; Metrorrhagia; Vitamin Deficiency; High Blood Pressure; Overactive Bladder; Seasonal Allergies.
-Person Centered Plan was signed by the Group Home Coordinator/QP under Section 2. "PERSON RESPONSIBLE FOR THE PCP: The following signature confirms the responsibility of the QP/LP for the development of this PCP. The signature indicates agreement with the services/supports to be provided."
-Group Home Coordinator had the initials "QP" placed after her signature.

Interview on 6/17/25 with the Group Home Coordinator/QP revealed:
-She had worked for the agency for over 30 years.
-She knew she did not have the credentials to acts as a QP.
-She had been assigned the duties of the QP a few years ago.
-She completed treatment plans and other documents for the clients.
-The highest level of education she completed was high school.

Interview on 6/17/25 with the Clinical Director revealed:
-She had not been aware that the Group Home Manager was not able to be the QP due to her

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V 109	Continued From page 3 lack of credentials until last week when surveyor completed survey at sister facility. -Agency was actively searching for a QP to cover the this facility and sister facility next door. -She acknowledged the QP did not meet the educational requirement for the MH/DD/SAS population served.	V 109		
V 121	27G .0209 (F) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (f) Medication review: (1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated. (2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable. This Rule is not met as evidenced by: Based on records reviews and interview, the facility failed to obtain drug regimen reviews every six months for 3 of 3 clients (#1, #2 and #3) who received psychotropic drugs. The findings are: Review on 6/17/25 of Client #1's record revealed: -Admission date of 3/13/10. -Diagnoses of Schizophrenia; Type II DM; HTN; Polycystic Ovarian Syndrome; Hyperlipidemia;	V 121		

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V 121	Continued From page 4 Hypothyroidism; Chronic Back/Knee Pain. -Physician's order dated 7/14/24: -Aripiprazole 30 milligrams (mg) (Schizophrenia)- Take one tablet daily. -Physician's order dated 3/11/25: -Clonazepam 1 mg- Take one tablet at night. Discontinued on 5/22/25. -Physician's order dated 5/21/25: -Olanzapine 10 mg (Schizophrenia)- Take one tablet at night. -Physician's order dated 5/22/25: -Clonazepam 1 mg (Anxiety)- Take 1/2 tablet at night (0.5 mg). -The last time a six month psychotropic drug review was conducted was 4/25/24. -There was no evidence of a current six month psychotropic drug review. Review on 6/17/25 of the April 1, 2025 through June 16, 2025 Medication Administration Record (MAR) revealed: -Staff documented Client #1 was administered the above medication from April 1, 2025 through June 16, 2025. Review on 6/17/25 of Client #2's record revealed: -Admission date of 4/1/20. -Diagnoses of Schizophrenia; Obesity; Sinus tachycardia (secondary to Clozapine); Chronic Constipation; Hypertriglyceridemia; Metrorrhagia; Vitamin Deficiency; High Blood Pressure; Overactive Bladder; Seasonal Allergies. -Physician's orders dated 5/29/25: -Clozapine 100 mg (Schizophrenia)- Take one tablet twice a day. -Lithium Carbonate 300 mg (Schizophrenia, Bipolar)- Take one tablet twice a day. -Haloperidol 10 mg (Schizophrenia)- Take two tablets at night. -Clozapine 25 mg- Take one tablet at night.	V 121		

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V 121	Continued From page 5	V 121		

-The last time a six month psychotropic drug review was conducted was 4/25/24.
-There was no evidence of a current six month psychotropic drug review.

Review on 6/17/25 of the April 1, 2025 through June 16, 2025 Medication Administration Record (MAR) revealed:
-Staff documented Client #2 was administered the above medication from April 1, 2025 through June 16, 2025.

Review on 6/17/25 of Client #3's record revealed:
-Admission date of 9/10/24.
-Diagnoses of Schizophrenia, Unspecified; Major Depressive Disorder, Recurrent, Moderate.
-Physician's order dated 10/1/24:
-Aripiprazole 400 mg (Schizophrenia)- Inject 2 milliliters (ml) every 28 days.
-Physician's order dated 5/8/25:
-Mirtazapine 30 mg (Depression)- Take one tablet at night.
-Lorazepam 1 mg (anxiety)- Take one tablet twice a day.
-Physician's orders dated 5/20/25:
-Aripiprazole 20 mg- Take 1/2 tablet twice a day.
-Haloperidol Decanoate 100 ml injection (Schizophrenia)- Inject every four weeks.
-There was no evidence of a current six month psychotropic drug review.

Review on 6/17/25 of the April 1, 2025 through June 16, 2025 Medication Administration Record (MAR) revealed:
-Staff documented Client #3 was administered the above medication from April 1, 2025 through June 16, 2025.

Interview on 6/17/25 with the Group Home

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V 121	Continued From page 6 Coordinator/Qualified Professional revealed: -Facility was awaiting for the pharmacy to conduct the psychotropic drug reviews. -She was under the impression that the psychotropic drug reviews were to be conducted only once a year. -She acknowledged the psychotropic drug reviews for Clients #1, #2 and #3 had not been conducted every six months. Interview on 6/10/25 with the Clinical Director revealed: -She was aware that the drug reviews for the facility had not been completed. -Drug reviews were scheduled for tomorrow (6/18/25). -She was not aware the drug psychotropic drug reviews needed to be conducted every six months until surveyor visited sister facility last week. -She acknowledged the psychotropic drug reviews for Clients #1, #2 and #3 had not been conducted every six months.	V 121		
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. This Rule is not met as evidenced by: Based on observation and interview, the facility was not maintained in a clean, attractive, orderly manner. The findings are: Observation on 6/17/25 at approximately 1:00 pm	V 736		

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V 736	Continued From page 7 revealed: -Bathroom between bedrooms #1 and #2 (Bathroom with Shower): -The shower seat had organic matter growing all along the edges of the shower seat. -Organic matter was growing on the left back corner inside the shower. -Black stains between the tiles inside the shower. -Bathroom between bedrooms #3 and #4 (Bathroom with tub): -There were black stains on the caulk separating the tub and the walls inside the shower/tub area. -There were black stains on the grout between the tiles on the floor outside the tub. -Bathroom between bedrooms #5 and #6 (Bathroom with tub): -There were black stains on the caulk separating the tub and the walls inside the shower/tub area. -There were black stains on the grout between the tiles on the floor outside the tub. -There were rust spots on top of the door frame separating room #6 and the bathroom. Interview on 6/17/25 with the Group Home Coordinator/Qualified Professional revealed: -Clients were supposed to let staff know when the bathrooms needed to have a deep cleaning. -Clients were not able to clean/scrub the showers due to their physical conditions. -She was not aware that the showers/tubs were in need of a deep cleaning. -Clients had not informed her. -When needed, staff used bleach products to clean the showers/tubs and everything cleared up well afterwards. -She would let staff know about the bathroom situations.	V 736		

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V 736	Continued From page 8 Interview on 6/17/25 with the Clinical Director revealed: -She was not aware about the shower/tubs conditions. -"Staff would get the bathrooms cleaned."	V 736		