

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-338	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/10/2018
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NAME OF PROVIDER OR SUPPLIER ST MARK'S MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 3735 HERITAGE MEADOW LANE HOLLY SPRINGS, NC 27540
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 4/10/18. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G 5600C Supervised Living for Adults with Developmental Disabilities.</p>	V 000		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</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>	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>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure medications were administered on the written order of a person authorized by law to prescribe drugs for 2 of 3 audited clients (#1 and #3). The findings are:</p> <p>Review on 4/9/18 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admission date: 11/2002 - Diagnoses: Severe Mental Retardation, Bipolar, Seizure Disorder, Psychotic Disorder, Autism, Recurrent UTI (Urinary Track Infection) and Gall Bladder Disorder - Physician's order dated 1/22/18 Cetirizine (used to treat hay fever, and allergy symptoms) 10 mg 1 tablet by mouth at bedtime - February 2018 MAR: No transcription for Cetirizine <p>Interview on 4/9/18 with staff #1 revealed:</p> <ul style="list-style-type: none"> - She wasn't aware client #1 had an order for Cetirizine - The medication wasn't sent to the facility by the pharmacy therefore it wasn't administered in January or February <p>Interview on 4/10/18 with the Owner revealed:</p> <ul style="list-style-type: none"> - There was some discrepancies regarding client #1's Cetirizine when she went into the hospital - The issue has been straightened out and client #1 is receiving the Cetirizine <p>Review on 4/5/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> - Admission date: 5/2000 	V 118		

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V 118	<p>Continued From page 2</p> <ul style="list-style-type: none"> - Diagnoses: Moderate Mental Retardation, Diabetes - Type 2, Hypertension, Asthma, Restrictive Lung Disorder, Blindness, Anxiety and Decreased Hearing - Physician's order dated 3/6/18: Clonazepam (used to treat Panic and Anxiety Disorder) 1 tablet by mouth twice daily as needed <p>Observation on 4/5/18 at 2:30 pm of client #3's medications revealed:</p> <ul style="list-style-type: none"> - No evidence of Clonazepam on site <p>Interview on 4/5/18 with staff #1 revealed:</p> <ul style="list-style-type: none"> - Client #3's Clonazepam has been ordered and should be delivered by the pharmacy soon <p>Interview on 4/10/18 with the Owner revealed:</p> <ul style="list-style-type: none"> - He confirmed client #3's Clonazepam had been ordered 	V 118		
V 121	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(f) Medication review:</p> <p>(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.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p>	V 121		

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V 121	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure a drug regimen review was completed at least every 6 months for 3 of 3 clients (#1 - #3). The findings are:</p> <p>Review on 4/9/18 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admission date: 11/2002 - Diagnoses: Severe Mental Retardation, Bipolar, Seizure Disorder, Psychotic Disorder, Autism, Recurrent UTI (Urinary Track Infection) and Gall Bladder Disorder - Drug Regimen 9/22/17 - 4/9/18 included: Latuda (used to treat Schizophrenia), Fluoxetine (used to treat Depression, Obsessive Compulsive Disorder and Panic Disorder) and Lorazepam (used to treat anxiety) - No evidence of a 6 month drug review <p>Review on 4/5/18 of client #2's record revealed:</p> <ul style="list-style-type: none"> - Admission date: 11/2003 - Diagnoses: Mild Mental Retardation, Hyperlipidemia, Hypothyroidism and GERD (Gastroesophageal Reflux Disease) - Drug Regimen 10/21/16 - 4/5/18 included: Quetiapine (used to treat Schizophrenia, Bipolar and Depression) - No evidence of a 6 month drug review <p>Review on 4/5/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> - Admission date: 5/2000 - Diagnoses: Moderate Mental Retardation, Diabetes - Type 2, Hypertension, Asthma, Restrictive Lung Disorder, Blindness, Anxiety and Decreased Hearing - Drug Regimen 3/3/17 - 4/5/18 included Clonazepam (used to treat Panic Disorder and Anxiety) - No evidence of a 6 month drug review 	V 121		

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V 121	<p>Continued From page 4</p> <p>Interview on 4/5/18 with staff #1 revealed:</p> <ul style="list-style-type: none"> - The facility had recently changed pharmacy's - She's contacted the pharmacy and they're going to send someone to complete the drug regimens for all clients <p>Interview on 4/10/18 with the Owner revealed:</p> <ul style="list-style-type: none"> - He's aware the drug reviews had not been completed - They've contacted the pharmacy and someone will be out to the home to complete the drug reviews next week 	V 121		