

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-955	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 02/28/2018
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NAME OF PROVIDER OR SUPPLIER VICTORY HEALTHCARE SERVICES 2	STREET ADDRESS, CITY, STATE, ZIP CODE 1421 PJ FARMS LANE RALEIGH, NC 27603
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(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
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V 000	INITIAL COMMENTS A complaint survey was completed on February 28, 2018. The complaint was substantiated (intake #NC00136083). A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.	V 000	<p>Current orders of Medications are all in clients Charts.</p> <p>Administrator will ensure compliance by conducting monthly Audit of the clients Chart.</p> <p>Staff received training on MAR documentation.</p> <p>RECEIVED IN APR 12 2018 CONSTRUCTION SECTION</p>	4/5/18
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. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation	V 118		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Almore TITLE Administrator (X6) DATE 4/5/18

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V 118	<p>Continued From page 1 with a physician.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure current physician's orders were maintained at the facility for all medications administered and failed to maintain MARs accurately for 3 of 3 audited clients (#1, #3 and #4). The findings are:</p> <p>a. Observation on 2/27/18 at 10:30am of medications for client #1 included:</p> <ul style="list-style-type: none"> - Lovastatin 40mg - 1 daily (qd) - Protonix 40mg - 1 at hour of sleep (hs) - Vitamin D3 50,000units - 1 tablet 3 times per week <p>Review on 2/27/18 of client #1's record revealed:</p> <ul style="list-style-type: none"> - admission 9/7/11 - diagnoses of Schizoaffective Disorder, Chronic Obstructive Pulmonary Disease, Hypertension, Hyperlipidemia, History of Diverticulosis and a history of Frontal Lobe Cerebral Infarct - no physician's orders for the Lovastatin or Protonix - a physician's order dated 11/29/17 for Vitamin D with instructions: give 3 times per week for 8 weeks then give 5000 units 3 times per week - MARs for December, 2017 and January, 2018 documenting she received the 50,000 units 3 times weekly (8 weeks) - MAR for February, 2018 documenting he was continuing to receive 50,000 unit once a week 	V 118		

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V 118	<p>Continued From page 2</p> <ul style="list-style-type: none"> - no documentation of receiving a 5000 unit Vitamin D tablet <p>b. Observation on 2/27/18 at 11:30am of medications for client #3 included:</p> <ul style="list-style-type: none"> - Clozapine 100mg - 0.5 tab in morning and 1.5 tabs hs - levothyroxine 100mcg 1 qd - Calcium with Vitamin D - 1 twice daily - Multivitamin 1 qd <p>Review on 2/27/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> - admission 5/18/01 - diagnoses of Schizoaffective Disorder, Hypothyroidism, history of thyroid Malignancy and Vitamin D Deficiency - no physician's orders for the Multivitamin - a physician's order over 1 year old dated 1/11/17 for Clozapine 100mg - a physician's order over 1 year old dated 2/10/17 for for Levothyroxine 100mcg with instructions to administer at 6:00am - MAR for December, 2017 documenting she was administered the Levothyroxine at 7:30am - MARs for January and February, 2018 documenting she was administered the Levothyroxine at 8:00am - MAR for February, 2018 documented the Calcium/Vitamin D tablet was not available on the first through the 7th and there were missing initials on the 10th and 11th <p>c. Observation on 2/27/18 at 11:00am of medications for client #4 included:</p> <ul style="list-style-type: none"> - Seroquel 50mg - 1 three times daily (tid) - Fexofenadine 180mg - 1 qd - Flonase - qd - Ammonium Lactate 12% - apply topically tid <p>Review on 2/27/18 of client #4's record revealed:</p>	V 118		