

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601323</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/30/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>DAVIS HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>6914 CEDARCREEK DRIVE CHARLOTTE, NC 28215</b>
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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
V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 5/30/18. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living/ Alternative Family Living (AFL)</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		

Division of Health Service Regulation 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 reviews, observation and interviews, the facility failed to administer medications based on the written orders of a person authorized to prescribe medications, affecting 1 of 2 clients (Client #2). The findings are:</p> <p>Review on 5/24/18 of Client #2's record revealed: - Admission date of 8/1/16 - Diagnoses of Autism, Mild Intellectual Disability Disorder, Impulse Control Disorder, Mood Affective Disorder, Adjustment Disorder with Anxiety</p> <p>Review on 5/24/18 of March-May 2018 MARs revealed: - Probiotic, 1 capsule PO (by mouth) daily</p> <p>Review on 5/24/18 of Client #2's medication orders revealed: - No medication order written by a physician for Probiotic</p> <p>Interview on 5/24/18 with Staff #1 revealed: - He did not know where the order was but he knows they did have it. He will check for it at the office.</p> <p>Interview on 5/30/18 with The Qualified Professional (QP) revealed: - They had the original order when it was first written, but she doesnt know what happened to it. - The doctor office was held up and failed to get a copy of it to them</p>	V 118		

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V 118	Continued From page 2  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 118		