

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL047-156	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/08/2018
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NAME OF PROVIDER OR SUPPLIER SERENITY THERAPEUTIC SERVICES LLC #1	STREET ADDRESS, CITY, STATE, ZIP CODE 3647 HIGHWAY 401 RAEFORD, NC 28376
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed 06/08/18. Deficiencies were cited. The complaint was unsubstantiated. Complaint ID #NC00139350.</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 117	<p>27G .0209 (B) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(b) Medication packaging and labeling:</p> <p>(1) Non-prescription drug containers not dispensed by a pharmacist shall retain the manufacturer's label with expiration dates clearly visible;</p> <p>(2) Prescription medications, whether purchased or obtained as samples, shall be dispensed in tamper-resistant packaging that will minimize the risk of accidental ingestion by children. Such packaging includes plastic or glass bottles/vials with tamper-resistant caps, or in the case of unit-of-use packaged drugs, a zip-lock plastic bag may be adequate;</p> <p>(3) The packaging label of each prescription drug dispensed must include the following:</p> <p>(A) the client's name;</p> <p>(B) the prescriber's name;</p> <p>(C) the current dispensing date;</p> <p>(D) clear directions for self-administration;</p> <p>(E) the name, strength, quantity, and expiration date of the prescribed drug; and</p> <p>(F) the name, address, and phone number of the pharmacy or dispensing location (e.g., mh/dd/sa center), and the name of the dispensing practitioner.</p>	V 117		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 117	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record reviews, observation and interviews, the facility staff failed assure medications ordered by the physician for 1 of 3 audited clients (#2) retained a current dispense date. The findings are:</p> <p>Review on 6/8/18 of Client #2's record revealed: - Admission date of 4/1/11 - Diagnoses of Schizophrenia - Undifferentiated; Severe Mental Retardation; Fibrocystic Disease; Presbyopia; Hypertopia; Mild Kyphoscolosis; Rheumatoid Arthritis; Contractures; and Sleep Apnea. - Physician's orders included the following medications to be administered on an as needed basis (PRN:) 1. Benzonate Capsules 100mg, three (3) times a day (for cough suppressant) - 1/17/18 2. MAPAP 500mg, One capsule four times a day (for pain) - 1/17/18</p> <p>Observation on 6/8/18 at 3:30 PM of Client #2's medications on-hand revealed: 1. A bubble pack of Benzonate Capsules 100mg, dispensed on 3/2/17 with expiration date of 3/2/18 2. MAPAP 500mg, dispensed on 3/2/17 - Both of the above medications were past the expiration date. - The PRN medications were not within the current dispensing date and available to be administered to Client #2 on an as needed basis.</p> <p>Interview on 6/8/18 with the House Manager confirmed:</p>	V 117		

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V 117	Continued From page 2 - Benzonatate Capsules 100mg and MAPAP 500mg were expired. - Client #2 had not had a need and was not administered any of the expired medication.	V 117		
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 with a physician.	V 118		

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V 118	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record reviews, observation and interviews, the facility staff failed to administer medications as ordered by the physician for 1 of 3 (#2) audited clients. The findings are:</p> <p>Review on 6/8/18 of Client #2's record revealed: - Admission date of 4/1/11 - Diagnoses of Schizophrenia - Undifferentiated; Severe Mental Retardation; Fibrocystic Disease; Presbyopia; Hypertopia; Mild Kyphoscolosis; Rheumatoid Arthritis; Contractures; and Sleep Apnea. - A physician order for the following medications as dated: 1. 5/16/18 - Tobramycin/Dexamethasone Ophthalmic Suspension 0.3 - 1% (a combination antibiotic and steroid used to treat bacterial infections of the eyes) to be administered as follows: One drop in right eye four(4) times a day for five (5) days THEN one drop in right eye two (2) times a day for five (5) days (For a total of 10 days.) 2. 6/1/18 - Triple Antibiotic Ointment: Apply to 2nd right toe tip two (2) times a day for fourteen (14) days.</p> <p>Observation on 6/8/18 at 3:30 PM of Client #2's medications on-hand revealed: - A partially used container of the eye drops medication - Tobramycin/Dexamethasone Ophthalmic Suspension, dispense date 5/17/18. - A One ounce tube of Triple Antibiotic Ointment. The tube was dated 6/1/18 and was unopened/unused</p> <p>Review on 6/8/18 of Client #2's May 2018 and</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>June 2018 MARs revealed documentation:</p> <ol style="list-style-type: none"> 1. Tobramycin/Dexamethasone Ophthalmic eye drops were administered four (4) times a day May 19 - 23, for a total of five days. <ol style="list-style-type: none"> a. There was no other documentation the medication was administered one drop two (2) times a day for the additional second set of five days as ordered. b. There was no documentation the physician ordered a delay in starting the medication. Staff documented they began administering the medication on 5/19/18, two days after dispensed by the pharmacy(5/17/18) and three days after the physician's order (5/16/18.) 2. Triple Antibiotic Ointment was not transcribed on the May 2018 MAR and there was no documentation the medication was administered to the client. <p>Interview on 6/8/18 with the House Manager confirmed:</p> <ul style="list-style-type: none"> - The eye drops were not administered to Client #2 according to doctor's orders. - Staff did not administer the Triple Antibiotic Ointment. 	V 118		