

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-942	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	DATE SURVEY COMPLETED AUG 10 2018 07/19/2018
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NAME OF PROVIDER OR SUPPLIER **ABOVE & BEYOND CARE, LLC** STREET ADDRESS, CITY, STATE, ZIP CODE **Lic. & Cert. Section
2724 BLOSSOM ROAD
HOPE MILLS, NC 28348**

(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 An annual survey was completed on July 19, 2018. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000	VIII - The Executive Director has contacted Village Pharmacy to request medications be placed in blister packs as the other consumers.	
V 116	27G .0209 (A) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (a) Medication dispensing: (1) Medications shall be dispensed only on the written order of a physician or other practitioner licensed to prescribe. (2) Dispensing shall be restricted to registered pharmacists, physicians, or other health care practitioners authorized by law and registered with the North Carolina Board of Pharmacy. If a permit to operate a pharmacy is Not required, a nurse or other designated person may assist a physician or other health care practitioner with dispensing so long as the final label, Container, and its contents are physically checked and approved by the authorized person prior to dispensing. (3) Methadone For take-home purposes may be supplied to a client of a methadone treatment service in a properly labeled container by a registered nurse employed by the service, pursuant to the requirements of 10 NCAC 45G .0306 SUPPLYING OF METHADONE IN TREATMENT PROGRAMS BY RN. Supplying of methadone is not considered dispensing. (4) Other than for emergency use, facilities shall not possess a stock of prescription legend drugs for the purpose of dispensing without hiring a pharmacist and obtaining a permit from the NC Board of Pharmacy. Physicians may keep a small	V 116	The 7 day medication multi-compartment will no longer be used. Consumer #1 will not be given his medications in the multi-compartment going forward. The Executive Director will ensure all medications are given/administered according to State Regulations and remain in appropriate packaging until dispensed on a daily basis	8.8.18

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

STATE FORM *Heather McLean* Executive Director 8.8.18
6899 61SZ11 If continuation sheet 1 of 3

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V 116	<p>Continued From page 1</p> <p>locked supply of prescription drug samples. Samples shall be dispensed, packaged, and labeled in accordance with state law and this Rule.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to assure that dispensing of medications was restricted to persons authorized by law to do so, affecting 1 of 3 audited clients (#1). The findings are:</p> <p>Review on 7/19/18 of client #1's record revealed: -22 year old male admitted 9/15/17. -Diagnoses included Mild Intellectual Developmental Disability, Schizoaffective disorder, and Bipolar disorder.</p> <p>Review on 7/19/18 of Client #1's Medication Administration Record revealed the following medications were administered: -Claritin 10 mg (milligrams) daily at 7 am (allergies) -Multivitamin daily at 7 am (supplement) -Abilify 2 mg, 4 tablets daily at 7 am (anti-psychotic drug) -Quetiapine Fumarate 100 mg daily at 7 am (anti-psychotic drug) -Passion Flower 250 mg daily at 7 am (herbal supplement) -Lamictal 100 mg, 3 tablets twice daily at 7 am and 9 pm (anticonvulsant) -Lithium ER 300 mg twice daily at 7 am and 9 pm (bipolar disorder) -Quetiapine Fumarate 25 mg 2 tablets daily at 9 pm -Quetiapine Fumarate 300 mg 2 tablets daily at 9</p>	V 116		

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V 116	<p>Continued From page 2</p> <p>pm -Zonisamide 25 mg daily at 9 pm (anti-convulsant)</p> <p>Observations at 1:13 pm on 7/19/18 revealed: -1 multi-compartment medication planner filled with client #1's medications. -Tablets were grouped in compartments per dosing times and for 7 days.</p> <p>Interview on 7/19/18 the Group Home Manager stated: -She pre-poured client #1's medications weekly. -Client #1 had been doing this prior to admission, but he was not allowed to do this in the facility. -She had been pre-pouring his medications since his admission in September 2017. -The medication planner, pre-filled with his medications, would be sent with client #1 when he went on home visits. -She did not know regulations prohibited this practice.</p>	V 116		