

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL036-329	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/10/2018
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NAME OF PROVIDER OR SUPPLIER PATRIOTS	STREET ADDRESS, CITY, STATE, ZIP CODE 1208-L EAST HUDSON BOULEVARD GASTONIA, NC 28054
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 8/10/18. 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 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to fire and disaster drills were held at least quarterly and shall be repeated for each shift. The findings are:</p> <p>Interview on 8/9/18 with the Chief Operating Officer (COO) revealed: -have three shifts for drills; -first shift is 9am-4pm; -second shift is 4pm-12am; -third shift is 12am-9am.</p>	V 114		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Division of Health Service Regulation

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V 114	Continued From page 1 Review on 8/9/18 of the facility's fire and disaster drill documentation for 1/2018 through 8/2018 revealed: -no third shift fire drills from 1/2018-8/2018; -no first and third disaster drills from 1/2018-8/2018; -no second shift disaster drills from 1/2018-7/2018. Interview on 8/9/18 with the Group Home Manager revealed he was not aware he had to do disaster drills also.	V 114		
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;	V 118		

Division of Health Service Regulation

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V 118	<p>Continued From page 2</p> <p>(D) date and time the drug is administered; and (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> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure prescription or non-prescription drugs were administered to a client on the written order of a person authorized by law to prescribe drugs affecting 2 of 2 clients (#1, #2). The findings are:</p> <p>Finding #1: Review on 8/9/18 of client #1's record revealed: -admission date of 1/10/18; -diagnoses of Intermittent Explosive Disorder, Schizophrenia, Intellectual Developmental Disability-Severe, Constipation, Allergic Rhinitis and Pseudobulbare; -no physician's order for Vitamin D one tablet daily present in the record.</p> <p>Observation on 8/9/18 at 3:00pm of client #1's medications on site revealed Vitamin D one tablet daily dispensed on 7/9/18.</p> <p>Review on 8/9/18 of client #1's MARs from 6/1/18-8/9/18 revealed Vitamin D one tablet daily documented as administered from 6/1/18-8/9/18 at 8am.</p> <p>Finding #2:</p>	V 118		

Division of Health Service Regulation

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V 118	<p>Continued From page 3</p> <p>Review on 8/9/18 of client #2's record revealed: -admission date of 1/10/18; -diagnoses of Traumatic Brain Injury, Schizoaffective Disorder, Hyperlipidemia, Gastritis and Megaloblastic Anemia; -no physician's order for Meropenem/Vancomycin/Tobramycin powder footbath present in the record.</p> <p>Observation on 8/9/18 at 2:45pm of client #2's medications on site revealed Meropenem/Vancomycin/Tobramycin apply 3 1/2 scoops to affected area twice daily via footbath dispensed on 7/17/18.</p> <p>Review on 8/9/18 of client #2's MARs from 6/1/18-8/9/18 revealed Meropenem/Vancomycin/Tobramycin apply 3 1/2 scoops to affected area twice daily via footbath documented as administered from 6/1/18-8/9/18 at 4pm and 8pm.</p> <p>Interview on 8/9/18 with the Group Home Manager revealed: -he had not obtained the two physicians' orders for the Vitamin D and the footbath powder; -he will make sure he obtains the two missing physicians' orders as soon as possible.</p>	V 118		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p>	V 131		

Division of Health Service Regulation

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V 131	<p>Continued From page 4</p> <p>This Rule is not met as evidenced by: Based on records review and interviews, the facility failed to access the Health Care Personnel Registry (HCPR) prior to hire for 1 of 2 staff (#2) and the Qualified Professional (QP). The findings are:</p> <p>Review on 8/10/18 of personnel records revealed the following: -the QP was hired on 4/4/17 and the HCPR was accessed on 1/5/18; -staff #2 was hired on 3/10/16 and there was no HCPR documentation present in the record.</p> <p>Interview on 8/9/18 with staff #2 revealed: -been with agency since 2016; -been at the facility since January 2018.</p> <p>Interview on 8/10/18 with the QP revealed: -been with the agency over one year; -been the QP for the facility since January 2018.</p> <p>Interview on 8/10/18 with the Chief Operating Officer revealed: -used a company for checking criminal records and HCPR for new hires; -the company would check the HCPR but did not provide the HCPR form for the personnel files; -will pull own HCPR checks and ensure HCPR forms will be in the personnel files.</p>	V 131		