STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL096-225	A. BUILDING: _____ B. WING _____	08/22/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLAIBORNE PLACE	404 SOUTH CLAIBORNE STREET GOLDSBORO, NC 27533

(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	INITIAL COMMENTS An annual survey was completed on August 22, 2018. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A, Supervised Living for Adults with Mental Illness.	V 000		
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	Continued From page 1	V 118		

This Rule is not met as evidenced by:
Based on record review, observation and interview, the facility failed to (1) keep MARs current for 1 of 3 audited clients and (2) to obtain a physician's order for self-administration of finger stick blood sugar checks for 2 of 3 audited clients. The findings are:

Finding 1:
Review on 8/22/18 of client #1's record revealed:
- 69 year old male admitted to facility 10/29/09.
- Diagnoses included Paranoid Schizophrenia, Altered Mental Status, Type II Diabetes Mellitus, Hygroma, Coronary Artery Disease, Hyperlipidemia, Hypertension, lung nodule.
- Physician's order dated 5/10//17 for Synthroid (treats hypothyroidism) 75 micrograms, one tablet by mouth daily.
- FL-2 signed by the Physician dated 8/2/18 with order for Synthroid 88 micrograms, one tablet by mouth daily.

Review on 8/22/18 of client #1's MARS for May - August 2018 revealed printed transcription for Synthroid 88 mcg one tablet by mouth daily, with staff initials to signify the medication was administered as ordered.

Observation on 8/22/18 at 2:00 pm of client #1's medications on hand revealed a supply of Synthroid 75 mcg one tablet by mouth daily, dispensed 7/23/18.

Finding 2:
Review on 8/22/18 of client #1's record revealed

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V 118	Continued From page 2 no Physician's for fingerstick blood sugar (FSBS) checks daily and no order for the client to self-administer FSBS checks. Client #1 declined to participate in an interview on 8/22/18. Review on 8/22/18 of client #5's record revealed: - 34 year old female admitted to the facility 6/30/17. - Diagnoses included Schizophrenia, Unspecified Depressive Disorder, Intellectual/Developmental Disability, mild, Diabetes Mellitus. - FL-2 signed by the Physician 11/30/17 with order to check FSBS daily. - No Physician's order for client #5 to self-administer FSBS checks. During interview on 8/22/18 client #5 stated that she checked her own blood sugars. Interview on 8/22/18 the Program Manager stated: - Client #1 went to the Veteran's Administration (VA) clinic for medication management and for medical care. - His sister took him to all of his appointments. - She did not know the Synthroid dosage had been changed. - The pharmacy had not changed the MAR when the dosage changed, the correct dosage was 75 micrograms. - No one had noticed the error on the MAR. - She was not aware a Physician's order was required for clients to check their own blood sugars. - She was told staff had to teach the clients how to perform their own FSBS checks since the facility did not have a CLIA (Clinical Laboratory Improvement Amendments of 1988) waiver.	V 118		

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V 118	Continued From page 3 - There was no Physician's order for client #1 to perform his own FSBS checks. - Staff taught client #1 to do his FSBS checks. - Client #5 performed her own FSBS checks prior to her admission to the facility, so they allowed her to continue to do so. - She thought client #5 had a physician's order to do her own FSBS checks, but she could not find the order. - Client records had recently been purged and the order may have been removed from the facility's copy of her record. - She would request Physician's orders for client #1 and client #5 to self-administer FSBS checks.	V 118		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interview the facility was not maintained in a safe, clean and orderly manner. The findings are: Observations of the facility on 8/22/18 at approximately 9:30 am revealed: - No globe over the light bulb over the kitchen sink. - Black stains to the carpet in the small den. - Unpainted repairs is to the wall at the toilet paper holder in the hall bath near the small den. - Damage to the side of the bathroom vanity.	V 736		

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V 736	Continued From page 4 - The water controls in the bath tub leaked. - The ceiling exhaust vent was dusty. - A door knob was missing from the door to the cabinet below the sink. - A large black stain to the carpet in the hallway. - Clothing cluttered the floor in client #2's bedroom. - Dark staining to the carpet in client #3's bedroom. - A light fixture in the bathroom across the hall from client #4's bedroom was not working. - The exhaust vent was dusty. - A wasp nest in the corner of the ceiling on the front porch. - A bucket on the front porch contained sand and cigarette butts. During interview on 8/22/18 the Program Manger stated: - They were aware of some of the issues cited. - The carpet stains were cited during the facility's recent inspection by the Construction Section. - The carpet stains had been reported to the HUD (Housing and Urban Development) authority. - The bathroom light bulb needed to be replaced; she would make sure a new bulb was installed in the fixture. - Client #2 changed clothes frequently throughout the day and would leave her clothes on the floor; she sometimes didn't want staff to be in her room and she would become agitated if staff asked her to clean her room. - She would call the exterminator to remove the wasp nest. - The clients sat on the front porch to smoke.	V 736		