

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>mhl026-654</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>08/22/2018</b>
NAME OF PROVIDER OR SUPPLIER  <b>GRACELAND MANOR DDA #1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>600 DOWFIELD DRIVE FAYETTEVILLE, NC 28301</b>		
(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 .5600C Supervised Living for Adults with Developmental Disabilities.	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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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 review, observation and interview, the facility failed to administer medications on the written order of a physician and failed to keep the MARs current affecting two of three audited clients (#1 and #3). The findings are:</p> <p>Finding #1: Review on 08/22/18 of client #1's record revealed: - 55 year old male. - Admission date of 01/31/03. - Diagnoses of Schizophrenia, Moderate Mental retardation, Hypertension, Diabetes, Seizure Disorder and Hypertension.</p> <p>Review on 08/22/18 of a signed FL-2 for client #1 dated 07/01/18 revealed Prilosec (Omeprazole-treats acid reflux) 20 milligrams (mg) - take one capsule every day and as needed for stomach issues.</p> <p>Review on 08/22/18 of client #1's August 2018 MAR revealed the following transcribed entry: - "Omeprazole 20mg PP take 1 capsule by mouth every morning and give additional dose in the evening if needed for stomach pains." - No staff initials to indicate the Omeprazole was administered as ordered from 08/01/18 thru 08/22/18.</p> <p>During interview on 08/22/18 client #1 stated he received his medications as ordered.</p>	V 118		

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V 118	Continued From page 2  Finding #2 Review on 08/22/18 of client #3's record revealed: -41 year old male. -Admission date of 05/01/03. -Diagnoses of Asthma, Traumatic Brain Injury, Mood Disorder, Mild Mental Retardation.  Review on 08/22/18 of client #3's Physician order dated 07/12/18 revealed: -Vitamin D3 50, 000 units Oral weekly.  Review on 08/22/18 of client #3's July and August 2018 MAR revealed: -The Vitamin D3 had not been transcribed on the MAR's and no initials were present to indicate the medication had been administered as ordered.  During interview on 08/22/18 client #3 stated he received his medications as ordered.  During interview on 08/22/18 the Licensee/Qualified Professional stated: - Clients received their medications as ordered. - Staff should initial the MARs when medications are administered. - She would speak with the staff to ensure medications were given to clients as ordered and ensure documentation on the MARs.	V 118		
V 120	27G .0209 (E) Medication Requirements  10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit;	V 120		

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V 120	<p>Continued From page 3</p> <p>(B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container;</p> <p>(C) separately for each client;</p> <p>(D) separately for external and internal use;</p> <p>(E) in a secure manner if approved by a physician for a client to self-medicate.</p> <p>(2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to keep refrigerated medication in a locked container affecting two of four audited clients (#1 and #2). The findings are:</p> <p>Observation on 08/22/18 at approximately 11:30am revealed:</p> <ul style="list-style-type: none"> <li>- The client refrigerator contained a metal box with a locking mechanism. The metal box was not locked.</li> <li>- The metal box contained Invega (anti-psychotic) labeled for client #1. The metal box also contained a Glucagon (treats low blood sugar) kit labeled for client #2's use.</li> </ul> <p>Interview on 08/22/18 the Licensee/Qualified Professional stated:</p> <ul style="list-style-type: none"> <li>- Staff are aware to keep medications in the client's refrigerator locked.</li> <li>- She would speak with staff about ensuring the medications were kept secure.</li> </ul>	V 120		

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V 121	Continued From page 4	V 121		
V 121	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(f) Medication review:</p> <p>(1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to obtain a drug regimen reviews for three of three audited clients (#1, #3 and #4) who received psychotropic drugs. The findings are:</p> <p>Review on 08/22/18 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>- 55 year old male.</li> <li>- Admission date of 01/31/03.</li> <li>- Diagnoses of Schizophrenia, Moderate Mental retardation, Hypertension, Diabetes, Seizure Disorder and Hypertension.</li> <li>- FL-2 dated 07/01/18 and did not contain an entire list of medications.</li> <li>- No 6 month drug regimen review for all of client #1's medications.</li> </ul> <p>Review on 08/22/18 of client #1's current drug</p>	V 121		

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V 121	<p>Continued From page 5</p> <p>regimen revealed:</p> <ul style="list-style-type: none"> <li>- Amlodipine (treats blood pressure).</li> <li>- Desmopressin (treats bed wetting and increased thirst).</li> <li>- Ketoconazole Cream (antifungal).</li> <li>- Loratadine (treats allergy symptoms).</li> <li>- Metformin (treats diabetes).</li> <li>- Paroxetine (treats depression).</li> <li>- Quetiapine (treats Schizophrenia).</li> <li>- Trazodone (treats depression).</li> <li>- Depakote (treats Seizure Disorder).</li> <li>- Atenolol (treats blood pressure).</li> <li>- HCTZ (treats fluid retention).</li> <li>- Invega (anti-psychotic).</li> <li>- Lisinopril (treats blood pressure).</li> <li>- Colace (stool softener).</li> <li>- Benztropine (treats Parkinson's symptoms).</li> <li>- Vitamin D (treats vitamin D deficiency).</li> </ul> <p>Review on 08/22/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> <li>-41 year old male.</li> <li>-Diagnoses of Asthma, Traumatic Brain Injury, Mood Disorder, Mild Mental Retardation.</li> <li>- FL-2 dated 01/05/18 and did not contain an entire list of medications.</li> <li>- No 6 month drug regimen review for all of client #3's medications.</li> </ul> <p>Review on 08/22/18 of client #3's current drug regimen revealed:</p> <ul style="list-style-type: none"> <li>-Fluoxetine (treats depression)</li> <li>-Montelukast (treats allergic symptoms)</li> <li>-Topiramate (treats seizures)</li> <li>-Trazodone (treats depression)</li> <li>-Triamterecin/HCTZ (treats high blood pressure)</li> <li>-Symbicort AER (treats asthma)</li> <li>-Tylenol (treats pain)</li> <li>-Xopenex HFA AER Inhaler (treats bronchospasm)</li> </ul>	V 121		

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V 121	<p>Continued From page 6</p> <p>Review on 08/22/18 of client #4's record revealed: -62 year old female. -Diagnoses of Moderate Mental Retardation, Psychosis Disorder, Chronic Constipation, Deaf. -No 6 month drug regimen review for all of client #4's medications.</p> <p>Review on 08/22/18 of client #4's current drug regimen revealed: -Amantadine (treat/prevent Influenza A) -Docusate (treats constipation) -Aspirin (treat pain/prevent heart attack) -Divalproex (treats Seizure Disorder) -Escitalopram (treats depression) -Fluticasone Spray -Loratadine (treats allergy symptoms) -Multivitamin -Olopatadine eyedrops (treats itching, redness, burning in eye) -Pravastatin (Lowers cholesterol) -Propranolol (treats high blood pressure) -Alphagan Solution (treats glaucoma) -BENZTROPINE (treats Parkinson's symptoms) -Risperidone (treats bipolar symptoms) -Glycolax (treats constipation) -Clonazepam (treats panic disorders) -Alendronate (treat osteoporosis)</p> <p>Interview on 08/22/18 the Licensee/Qualified Professional stated: - She had each clients' physician to sign a FL-2 every 6 months for drug regimen reviews. - She understood the drug regimen reviews must contain a complete list of medications administered. - She would ensure medication reviews were completed as required.</p>	V 121		