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VOCA-8TH AVENUE	212 8TH AVENUE N W HICKORY, NC 28601

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V 000	INITIAL COMMENTS An annual survey was completed on 9/14/18. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Individuals of All Disability Groups.	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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This Rule is not met as evidenced by:
Based on observation, interview, and record review the facility failed to keep Medication Administration Records (MARs) current and failed to record the medication immediately after administration affecting 3 of 3 clients audited (Clients #1, #2 and #3). The findings are:

Review of Client #1's record revealed:
-admission date 10/31/91
-diagnoses of Borderline Hyperchol, Hypothyroid, Hypertension, Obsessive Compulsive Disorder, Dementia, Neuroleptic Induced Parkinsonism, Schizoaffective Disorder, and Moderate Intellectual Developmental Disability.
-physician's orders dated 9/11/18 included:
Pramipexole 1 milligram (mg) - 2 tablets three times a day;
Vitamin B-12 1000 micrograms (mcg) - 1 sublingually a day;
Olanzapine 15 mg - 1/2 tablet every morning;
Levothyroxin 50 mcg - one tablet daily;
Lamotrigine 100 mg - one tablet 2 times a day;
Folic Acid 1,000 mcg - one tablet daily;
Finasteried 5 mg - one tablet daily;
Fanapt 4 mg - one tablet 2 times a day;
Donepezil 10 mg - one tablet daily;
Calcium D 600-400 - 2 tablets 2 times a day;
B1 Tablet 100 mg - one every morning;
Fluticasone spray 50 mcg - 2 sprays each nostril, 2 times a day.
-July, 2018 MAR listed the above medications were to be given at 7:00 a.m.
-July, 2018 MAR was not initialed to indicate the

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V 118	Continued From page 2 above medications were given on 7/1/18 at 7:00 a.m. Review of Client #2's record revealed: -admission date 6/29/98 -diagnoses of Asthma, Hearing Loss, Hypertension, Bronchitis, Chronic Obstructive Pulmonary Disease; Eczema, Mild Intellectual Developmental Disability; BiPolar, Seizure Disorder, Reflux, and Borderline Diabetes Mellitus. -physician's orders dated 9/11/18 included: -Levothyroxin 75 mcg - one tablet daily; -Fenofibrate 134 mg - one tablet daily; -Bupropin XL - 300 mg - one every morning; -Sumbicort HFA Inhaler 160/4.5 mcg - 2 puffs two times a day; -Spiriva Respimat 2.5 mcg - 1 puff one time a day; -Buspirone 10 mg - one three times a day; -Oxcarbazepin 300 mg - one three times a day; -Aripipraxole 30 mg - 1/2 tablet 2 times a day; -Minocycline 100 mg - 2 times a day; -Omeprazole 20 mg - one 2 times a day; -Simvastatin 40 mg - one a day; -Losartan Potassium 50 mg - one time a day; -Nystatin Powder 100,000 topically 2 times a day; -Hydrocort Lotion 2.5% - apply to scalp 1 time a day; -Benzoyl Peroxide Liquid 10% wash - apply 1 time a day. -July, 2018 MAR listed the following medications to be given at 7:00 a.m. and was not initialed as given 7/1/18: -Levothyroxin 75 mcg - one tablet daily; -Fenofibrate 134 mg - one tablet daily; -Bupropin XL - 300 mg - one every morning;	V 118		

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-Sumbicort HFA Inhaler 160/4.5 mcg - 2 puffs two times a day;
-Spiriva Respimat 2.5 mcg - 1 puff one time a day;
-Buspirone 10 mg - one three times a day;
-Oxcarbazepin 300 mg - one three times a day;
-Aripipraxole 30 mg - 1/2 tablet 2 times a day;
-Minocycline 100 mg - 2 times a day;
-Omeprazole 20 mg - one 2 times a day;
-Simvastatin 40 mg - one a day;
-Losartan Potassium 50 mg - one time a day.

Review of Client #2's July, August and September 2018 MARs revealed the following medications were not initialed to indicate they were given as ordered on:
-Nystatin Powder 100,000 topically 2 times a day- 7/1; 7/6; 7/9; 8/6; and 9/6
-Hydrocort Lotion 2.5% - apply to scalp 1 time a day- 7/1 through 7/10; 7/24; 8/6; 8/16; and 8/20
-Benzoyl Peroxide Liquid 10% wash - apply 1 time a day - 7/24; 8/16 and 8/20

Review of Client #3's record revealed:
-admission date 9/8/15;
-diagnoses BiPolar Disorder, Moderate Intellectual Developmental Disability, Type II Diabetes Mellitus, and High Cholesterol
-physician's orders dated 9/11/18 included:
-Senna 8.6 mg - one tablet daily;
-Potassium Chloride Extended Release 20 milliequivalents (mEq) - one tablet daily;
-Metoprol 25 mg - one tablet 2 times a day;
-Mag Oxide 400 mg - one tablet 2 times a day;
-Isosorb Mono 30 mg - one tablet daily;
-Ferrous Sulfate 325 mg - one 2 times a day;
-Famotidine 20 mg - one 2 times a day;
-Clonidine 0.2 mg - one 2 times a day;

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-Aspirin - Low Enteric Coated 81 mg - one daily;
-Amlodipine 10 mg - one daily;
-Ketoconazole Cream 2% - apply to affected area once daily;
-Polyeth Glycol Powder 3350 17 grams - 8.5 grams daily mixed with 8 ounces of water;
-Paliperidone Extended Releast 6 mg - 1 tablet every morning;
-Aldactone 25 mg - 1 every morning.

On 9/13/18 at 9:30 a.m. observation of Client #3's medications revealed Aldactone 25 mg was not present.

Review of Client #3's September 2018 MAR revealed under exceptions:
-Aldactone 25 mg - "Withheld Per DR/RN orders."

-July, 2018 MAR listed the following medications to be given at 7:00 a.m. and was not initialed as given 7/1/18:
-Senna 8.6 mg - one tablet daily;
-Potassium Chloride Extended Release 20 milliequivalents (mEq) - one tablet daily;
-Metoprol 25 mg - one tablet 2 times a day;
-Mag Oxide 400 mg - one tablet 2 times a day;
-Isosorb Mono 30 mg - one tablet daily;
-Ferrous Sulfate 325 mg - one 2 times a day;
-Famotidine 20 mg - one 2 times a day;
-Clonidine 0.2 mg - one 2 times a day;
-Aspirin - Low Enteric Coated 81 mg - one daily;
-Amlodipine 10 mg - one daily;
-Polyeth Glycol Powder 3350 17 grams - 8.5 grams daily mixed with 8 ounces of water;

Review of Client #3's July, August and September 2018 MARs revealed the following

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V 118	Continued From page 5 medications were not initialed to indicate they were given as ordered on: -Ketoconazole Cream 2% - apply to affected area once daily -7/1, 7/6, 7/9, 8/6 -Paliperidone Extended Release 6 mg - 1 tablet every morning- 9/1 through 9/7, 9/9 and 9/10 -Valproic Acid Oral Solution 250 mg/5 millimeters - 2 teaspoonful every 8 hours - 9/6 Interview on 9/12/18 with Staff #2 revealed: -Client's #3's Aldactone was discontinued over a year ago; -all of the sudden it just started showing up on the MAR; -the pharmacy printed new MARs for them every month that was to reflect the current orders for the clients' -she was unsure why the MARs for Client's #1, #2, and #3 were blank for the 7/1 morning dose; -sometimes "fill-in staff" forgot to initial the MARs; especially the Treatment Administration Records which was where the shampoo's and cream's were located. Interview on 9/13/18 with Staff #4 revealed: -since the pharmacy switched to electronic MARs about 6 months ago, she had noticed a problem with the MARs being accurate as well as getting the clients' routine medications on times; -she did not know why Client's #1, #2, and #3 missed their morning doses on 7/1 but suspected it was due to the pharmacy not getting the medications to them until later that morning.	V 118		
V 536	27E .0107 Client Rights - Training on Alt to Rest. Int. 10A NCAC 27E .0107 TRAINING ON	V 536		

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V 536	Continued From page 6 ALTERNATIVES TO RESTRICTIVE INTERVENTIONS (a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions. (b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented. (c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered. (d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course. (e) Formal refresher training must be completed by each service provider periodically (minimum annually). (f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule. (g) Staff shall demonstrate competence in the following core areas: (1) knowledge and understanding of the people being served; (2) recognizing and interpreting human behavior; (3) recognizing the effect of internal and external stressors that may affect people with	V 536		

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V 536	Continued From page 7 disabilities; (4) strategies for building positive relationships with persons with disabilities; (5) recognizing cultural, environmental and organizational factors that may affect people with disabilities; (6) recognizing the importance of and assisting in the person's involvement in making decisions about their life; (7) skills in assessing individual risk for escalating behavior; (8) communication strategies for defusing and de-escalating potentially dangerous behavior; and (9) positive behavioral supports (providing means for people with disabilities to choose activities which directly oppose or replace behaviors which are unsafe). (h) Service providers shall maintain documentation of initial and refresher training for at least three years. (1) Documentation shall include: (A) who participated in the training and the outcomes (pass/fail); (B) when and where they attended; and (C) instructor's name; (2) The Division of MH/DD/SAS may review/request this documentation at any time. (i) Instructor Qualifications and Training Requirements: (1) Trainers shall demonstrate competence by scoring 100% on testing in a training program aimed at preventing, reducing and eliminating the need for restrictive interventions. (2) Trainers shall demonstrate competence by scoring a passing grade on testing in an instructor training program. (3) The training shall be competency-based, include measurable learning	V 536		

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objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.
(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.
(5) Acceptable instructor training programs shall include but are not limited to presentation of:
(A) understanding the adult learner;
(B) methods for teaching content of the course;
(C) methods for evaluating trainee performance; and
(D) documentation procedures.
(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.
(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.
(8) Trainers shall complete a refresher instructor training at least every two years.
(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.
(1) Documentation shall include:
(A) who participated in the training and the outcomes (pass/fail);
(B) when and where attended; and
(C) instructor's name.
(2) The Division of MH/DD/SAS may request and review this documentation any time.
(k) Qualifications of Coaches:
(1) Coaches shall meet all preparation

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V 536	Continued From page 9 requirements as a trainer. (2) Coaches shall teach at least three times the course which is being coached. (3) Coaches shall demonstrate competence by completion of coaching or train-the-trainer instruction. (l) Documentation shall be the same preparation as for trainers. This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure staff received training annually on alternatives to restrictive intervention for 1 of 3 audited staff (Staff #2). The findings are: Review on 9/12/18 of the employee record for Staff #2 revealed: -hire date 10/17/05; -approved curricula for de-escalation strategies and restrictive interventions entitled, "You're Safe, I'm Safe" expired 5/3/17. Interview on 9/12/18 with the Qualified Professional revealed: -she was not sure why Staff #2 had not completed the annual training yet; -she was going to the training that was scheduled to be held "this week."	V 536		