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	MHL098-126	A. BUILDING: _____ B. WING _____	12/04/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BAILEY'S RESPITE CARE	516 LEE STREET WILSON, NC 27893

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V 000	INITIAL COMMENTS An annual and complaint survey was completed on December 4, 2018. The complaint was substantiated (intake #NC00144846). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5100, Community Based Respite Services for Individuals of All Disability Groups.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure fire and disaster drills were held at least quarterly and repeated on each shift. The findings are: During interview on 12/3/18 the facility Supervisor stated the facility had three shifts during the week	V 114		

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V 114	Continued From page 1 (Monday - Friday) 1st shift 8:00 am - 4:00 pm, 2nd shift 4:00 pm - 11:00 pm, and 3rd shift 11:00 pm - 8:00 am. There were two 12-hour shifts on the weekends (Saturday -Sunday), 8:00 am - 8:00 pm and 8:00 pm - 8:00 am. Review on 12/3/18 of the facility's fire and disaster drill reports for January - November 2018 revealed: - No documented fire for the weekday 2nd shift for the first quarter (January - March) 2018. - No documented fire or disaster drills for any weekday shift for the second quarter (April - June) 2018. - No documented disaster drills for the weekday second shift for the third quarter (July - September) 2018. - No documented fire or disaster drills for the 8:00 am - 8:00 pm weekend shift for the first quarter (January - March) 2018. - No documented fire or disaster drills for either weekend shift for the third quarter (July-September) 2018. During interview on 12/4/18 the Director/Owner stated sometimes staff worked hours other than the normal shift hours. There were brief periods when no clients were being served at the facility. She would ensure staff were re-trained regarding completion of fire and disaster drills.	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	V 118		

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V 118	Continued From page 2 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. This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to administer medications on the written order of a physician affecting 1 of 1 current client (client #1) and 2 of 2 former clients (FC) (FC#2 & FC#3), and failed to administer medications as ordered affecting 1 of 1 current client (#1). The findings are: Review on 12/3/18 of client #1's record revealed: - 35 year old male, most recently admitted to the	V 118		

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V 118	Continued From page 3	V 118		

facility 12/2/18.
- Diagnoses included Moderate Intellectual/Developmental Disability, Seizures.
- Physician's order dated 7/6/18 for benztropine (anti-tremor, can be used to treat side effects of other medicaitons) 1 milligram (mg), one tablet twice daily as needed, and risperidone (antipsychotic) 1 milligram (mg) one tablet at bedtime.
- Physician's orders signed 11/30/18 for benztropine 1 mg, one tablet twice daily as needed; to discontinue risperidone 1 mg, one tablet at bedtime and begin risperidone .5 mg, one tablet at bedtime.
- No other signed physician's orders.

Review on 12/3/18 of client #1's MARs for December 2018 revealed:
- Transcribed entries for divalproex (anti-convulsant), 250 mg, three tablets at bedtime, levetiracetam (anti-convulsant) 750 mcg one tablet daily, benztropine 1 mg, one tablet twice daily, risperidone 1 mg, one tablet at bedtime, and topiramate (anti-convulsant) 100 mg, one tablet twice daily.
- Staff initials signified benztropine was administered twice daily.
- Staff initials signified other medications were administered as listed.

During interview on 12/3/18 client #1 stated he took his medications daily with staff assistance. He lived in an alternative family living facility and visited the respite facility every month because he liked spending time with staff #2. He chose to go to the respite facility for his birthday in October rather than going on a cruise.

It was unclear if client #1 had experienced any side effects of his medications (such as tremors

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V 118	Continued From page 4	V 118		

or muscle spasms) necessitating administration of his benztropine twice daily.

Review on 12/3/18 of FC#2's record revealed:
- 33 year old female, last admitted to the facility 10/18/18 and discharged 10/22/18.
- Diagnoses included Mild Intellectual/Developmental Disability, Traumatic Brain Injury, Anxiety Disorder, not otherwise specified, Depression, Hypothyroidism, asthma, borderline diabetes, polycystic ovarian syndrome and skin neuropathy.
- Signed physician's orders dated 8/14/18 for tapentadol (a narcotic used to treat severe pain) 250 mg one tablet every 12 hours, and dated 10/4/18 for levothyroxine (a hormone used to treat hypothyroidism) 100 mg one tablet daily.
- No other signed physician's orders.

Review on 12/3/18 of FC#2's MAR for October 2018 revealed:
- Transcribed entries for cetirizine (antihistamine) 10 mg, one tablet daily, levothyroxine 100 mg one tablet daily, diphenhydramine (antihistamine) 25 mg one tablet as needed, olopatadine (antihistamine eye drops) .2% , instill 1 drop into each eye daily, spironolactone (diuretic, used to treat high blood pressure and fluid retention) 100 mg, one tablet every morning, tapentadol 250 mg, one tablet every 12 hours, albuterol (a bronchodilator) 2 puffs every 4 hours as needed, and fluticasone (used to prevent asthma attacks) 50 micrograms, 1 spray each nostril as needed.
- Staff initials signified medications were administered as listed during FC#2's respite stays 10/3/18 - 10/5/18 and 10/18/18 - 10/22/18.

Review on 12/3/18 of FC#3's record revealed:
- 28 year old female last admitted to the facility 11/21/18 and discharged 11/22/18.

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V 118	Continued From page 5 - Diagnoses included Severe Intellectual/Developmental Disability, Cerebral Palsy, Congenital Microcephaly, Spastic Quadriplegia, Seizure Disorder, cortical blindness, and dysphagia. - No signed physician's orders. Review on 12/3/18 of FC#3's MAR for November 2018 revealed: - Transcribed entries for clonidine (anti-hypertensive) .1 mg, two tablets in the morning and at 2:00 pm, and three tablets at bedtime, clonazepam (treats seizures, panic disorder and anxiety) .5 mg, two tablets in the morning and at noon, and one tablet in the evening, clindamycin benzoyl peroxide (topical used to treat acne) apply to affected area on face twice daily, ketoconazole 2% cream (antifungal) apply to affected area twice daily, levetiracetam (anti-convulsant) 250 mg, one tablet in the morning, two tablets at bedtime, mirtazapine (anti-depressant) 7.5 mg, one tablet at bedtime, and omeprazole (treats gastro-esophageal reflux) 20 mg, one tablet daily. - Staff initials signified medications were administered as listed during FC#3's most recent respite stay. During interview on 12/3/18 the facility Supervisor stated she could not find the missing physicians' orders though she knew she was required to have current orders on file. She was responsible for typing and printing MARs for clients prior to their admission to the facility. She did not always have current medication orders when preparing MARs. Clients' guardians brought medications to the facility. Staff who received the client for admission was responsible for checking the MAR against the pharmacy label to ensure accuracy of the MAR. She understood the requirement to	V 118		

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V 118	Continued From page 6 have current medication orders and for the orders, the MAR transcriptions, and pharmacy labels to correspond. She would get current medication orders for clients. During interview on 12/4/18 the Director/Owner stated she was a Registered Nurse and she understood medication requirements. The staff who received client #1 for admission on 12/2/18 failed to compare the pharmacy label to the MAR and thus was not aware of the discrepancy in the frequency of administration of his benztropine. She did not understand why there were no current physician's orders on file for the audited clients. She would make sure all staff were re-trained in medication administration, including documentation on the MARs. Review on 12/4/18 of the Plan of Protection written by the Director/Owner on 12/4/18 revealed: "What will you immediately do to correct the above rule violation in order to protect clients from further risk or additional harm? All staff who give medications will be re-trained in medication administration which will include from entering a consumer to be admitted, giving & documenting meds [medications] to discharging consumer from respite. Immediately retrain staff on schedule & complete by Friday 12/7/18. Immediately verify all doctors orders for scheduled consumers." "Describe your plans to make sure the above happens. All staff will be called & made mandatory training. All doctors orders will be verified for accuracy." The facility failed to obtain current physicians' orders prior to respite admissions for three of three audited clients (1 current client, and 2	V 118		

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V 118	Continued From page 7 former clients). Each of the audited clients had multiple previous admissions to the facility. Facility staff prepared and printed MARs for each client prior to admission based on MARs from previous stays and without current medication orders. Without current physicians' orders, facility staff did not authoritatively verify if there were any medication changes from previous respite admissions. Medications were provided to the facility by clients' guardians at the time of each respite admission. Staff who received clients for admission were responsible for comparing the MAR to the pharmacy label to ensure the accuracy of the MAR. Medications were administered according to the MAR transcriptions, which resulted in the current client receiving one of his medications twice daily instead of twice daily as needed for side effects such as tremors and muscle spasms. Without current physicians' orders, the facility had no way of knowing if the medications were being administered as ordered. Based on the facility's failure to obtain current medication orders prior to every respite admission and the inability to ensure medications were administered as ordered, this deficiency constitutes a Type A2 violation for substantial risk of harm and must be corrected within 23 days. No administrative penalty has been assessed. If the violation is not corrected within 23 days, an administrative penalty of $500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.	V 118		