

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL018044	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/13/2018
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SPECIAL UNION HOME

704 EAST UNION STREET
MAIDEN, NC 28650

RECEIVED

By DHSR - Mental Health Lic. & Cert. Section at 8:54 am, Jan 04, 2019

(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 December 13, 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 119 Disposing of expired meds, including controlled meds needing to be returned to office for proper disposal.	
V 119	27G .0209 (D) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge.	V 119	Extra lock boxes will be purchased for each home for meds needing to be returned to office; to keep them separate from other meds. Home Managers and House Assistants will take any meds which are in need of being returned to the office; as each Home Manager is at the office at least once a week.	

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Mary E Costner

Administrative

12/27/18

Division of Health Service Regulation

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V 119	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interviews, the facility failed to ensure all prescription and non-prescription medications were disposed of in a manner that guarded against diversion or accidental ingestion affecting 3 of 3 clients (Clients #1, #2 and #3). The findings are:</p> <p>Review on 12/13/18 of Client #3's record revealed: -9/16/18, physician order for diazepam (Valium) 2 milligram (mg), 1 tablet every morning for anxiety and ½ tab (1 mg) daily at 4:00 pm.</p> <p>Observation on 12/12/18 at 1:58 pm revealed: -1 diazepam pill pack labeled ½ tab (1 mg) daily at 4:00 pm with a dispense date of 10/28/18 and 1 diazepam pill present in the pack and found on the top middle shelf of the facility's medication closet with expired non-prescription medications and empty prescribed medication bottles; -3 expired non-prescription medications contained in a plastic bag were: -Neosporin, expired in 10/2018; -Benadryl itch stopping cream, expired in 11/2018; -A store brand Allergy Relief, expired in 12/2018; -1 bottle of Hydrogen Peroxide first aid antiseptic, expired in 4/2018.</p> <p>Interview on 12/12/18 with the Assistant House Manager revealed: -The protocol for expired house medications was to throw the expired medications away and buy new medications; -Expired prescription medications were to be</p>	V 119		

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V 119	Continued From page 2 turned into the main office for disposal; -She and the House Manager were responsible for going to the main office at least once weekly to pick up medications and to drop off any expired prescription medications for disposal; -"We were snowed in on the 9th and did not get the expired medications into the office;" -Client #3's diazepam was a controlled medication and should have been placed into a separate locked box until returned to the main office for disposal; -She would take care of locking the diazepam up separately. Interview on 12/13/18 with the House Manager revealed: -Client #3 missed her diazepam dose at 4:00 pm on 11/26/18 because she was at the local emergency room due to a fall; -The pill pack should have been secured in a separate lock box when the new pill pack was opened; -She had the Assistant House Manager put the diazepam pill pack in a separate locked medication box; -She and the Assistant House Manager came to the main office at least once a week; -She would follow up on the expired non-prescribed medications at the facility. Interview on 12/13/18 with the Administrator revealed: -The House Managers came to the main office weekly to turn in paperwork and could bring any medications to the office that needed to be disposed of.	V 119		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification	V 131		

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V 131	<p>Continued From page 3</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> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that before employment of personnel, the Health Care Personnel Registry (HCPR) be accessed and each incident of access be filed in the appropriate business file affecting 1 of 3 audited staff (Staff #5). The findings are:</p> <p>Review on 12/13/18 of Staff #5's personnel record revealed: Job position: Direct Support Associate Hire date: 3/19/18 -5/23/18 HCPR accessed.</p> <p>Interview on 12/13/18 with the Administrator revealed: -She was aware that the HCPR needed to be accessed prior to employment; -The company was transitioning to electronic records; -She would follow up to ensure the HCPR is accessed before staff employment.</p>	V 131	<p>V 131</p> <p>Health Care Personnel Registry was accessed after employment in 1 out of 3 staff who were audited. In September 2018 RHA transitioned to electronic records system. During this transition was some confusion in regards to the Nurses Aide Registry and the HCR. Several of the new hires were affected and date was keyed after hire date; this has been corrected.</p>	



December 27, 2018

Rebecca Hensley
Facility Compliance Consultant 1
Mental health Licensure & Certification Section

RE: Special Union Annual Survey
704 East Union Street, Maiden N.C. 28650
MHL #018-044

Dear Ms. Hensley:

Please find the attached plan of correction for the deficiencies cited in your recent survey on December 13, 2018 of Special Union Group Home, located at 704 East Union Street, Maiden, NC 28650. We thank you and your staff for your continued dedication to quality services. Please do not hesitate to call if you have any questions regarding plan of correction.

Regards,

Mary E. Costner
Administrator

Mary E. Costner
Administrator
RHA Health Services
1564-D Union Road
Gastonia NC 28054
704-864-3450