

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-192	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/23/2019
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NAME OF PROVIDER OR SUPPLIER FAITH THERAPEUTIC SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 1102 DUCHESS LANE HUBERT, NC 28539
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(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	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on January 23, 2019. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F, Supervised Living/Alternative Family Living.</p>	V 000		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <p>(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.</p>	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 reviews, observations, and interviews, the facility failed to ensure medications were given as ordered by the physician, and maintain accurate MARs for 1 of 1 clients audited (clients #1). The findings are:</p> <p>Review on 1/23/19 of client #1's record revealed: -18 year old male admitted 5/1/15. -Diagnoses included cerebral palsy, profound mental retardation, and seizure disorder. -Orders dated 7/29/18 included: -Levetiracetam take 7.5 mls (milliliters) twice daily. -Baclofen 5mg (milligrams)/ml, take 2 mls twice daily and 4 ml at bedtime.</p> <p>Review on 1/23/19 of client #1's MARs for January 2019 revealed: -Levetiracetam 100mg/7.5ml transcribed to the MAR. No documentation of how many mls had been administered. -Baclofen 5mg/ml, 4 ml at bedtime was not documented from 1/1/19 - 1/22/19.</p> <p>Observation on 1/23/19 at 2 pm of Levetiracetam liquid on hand revealed the label read the concentration was 100mg/ml with an order to administer 7.5 ml twice daily.</p> <p>Interview on 1/23/19 the Licensee stated: -She administered 7.5 mls of Levetiracetam twice daily. -It was a documentation error on the January 2019 MAR to not list the bedtime dose of</p>	V 118		

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V 118	Continued From page 2 Baclofen 4 mls. She administered the 4 ml every night. Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician.	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, attractive and orderly manner, free from offensive odor.. The findings are: Observations on 1/23/19 between 11:45 am and 12:45 pm revealed: -Kitchen/Dining room: -Open trash can and recycle bin filled with trash -Sink filled with dirty dishes -Crock pot on counter with liquid in bottom and dried food visible on sides -Brown spatter on lower cabinets -3 file cabinets covered with clutter of miscellaneous items (cleaning wipes, gloves, flash light, etc.) Front of cabinets had areas of rust and rust staining on floor -Laundry room: clothing stacked on dryer and	V 736		

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V 736	<p>Continued From page 3</p> <p>throughout the room</p> <ul style="list-style-type: none"> -Smoke detector chirping, located in kitchen area -Storage room located off den and facing the street: <ul style="list-style-type: none"> -Filled with numerous cardboard boxes -3 vertical windows covered with unmatched cloth hanging on cords, bunched at the top. Visible from the street view of the home. -Client #1's room: Clutter of miscellaneous items covered top of his 2 dressers. -Bi-fold door off the track at top. -Hall bath: Open trash can filled with soiled diapers. -Strong pungent odor, consistent with the smell of urine, could be smelled on entry to the home. <p>Interview on 1/23/19 the Licensee stated:</p> <ul style="list-style-type: none"> -She had a storage building destroyed during the September 2018 hurricane. The boxes were items that had been stored in that building. -She had left the recycled trash in the kitchen because she was expecting rain. -She would address the issues identified. 	V 736		