

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL026-889</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____		(X3) DATE SURVEY COMPLETED  <b>12/21/2018</b>
NAME OF PROVIDER OR SUPPLIER  <b>FRESH START RESIDENTIAL FACILITY, INC #3</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2639 DUMBARTON ROAD FAYETTEVILLE, NC 28306</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	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on December 21, 2018. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p>	V 000	<p><b><u>V114</u></b></p> <p>Findings related to Emergency plan and supplies from recent survey were discussed at staff meeting and staff were reminded of the requirement for fire and disaster drills to be conducted quarterly and repeated on each shift.</p> <p>Group Home Manager and QP will confirm fire and disaster drills are conducted quarterly and on each shift by reviewing file in which drills are stored monthly.</p> <p>Director and QA/QI team will review file in which drills are stored quarterly to confirm compliance.</p>	<p>01/14/19</p> <p>Ongoing</p> <p>Ongoing</p>

DHSR - Mental Health

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Division of Health Service Regulation

V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>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 quarterly and repeated on each shift. The findings are:</p> <p>Interview on 12/21/18 the Qualified Professional stated the facility shifts were 8 am - 4 pm (1st); 4 pm - 12 am (2nd); 12 am - 8am (3rd).</p> <p>Review on 12/21/18 of facility records</p>	V 114	
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Dormentay Mumford*

TITLE

Director

(X6) DATE

1/17/2019

STATE FORM

6899

54RS11

If continuation sheet 1 of 8

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V 114	<p>Continued From page 1 documenting fire and disaster drills from 10/1/17 through 9/30/18 revealed:</p> <ul style="list-style-type: none"> <li>-Quarter 10/1/17 - 12/31/17: No disaster drill documented for the 3rd shift.</li> <li>-Quarter 1/1/18 - 3/31/18: No fire or disaster drills documented for the 2nd shift.</li> <li>-Quarter 4/1/18 - 6/30/18: No fire drill documented for the 3rd shift. No disaster drill documented for the 2nd shift.</li> <li>-Quarter 7/1/18 -9/30/18: No disaster drill documented for the 2nd shift.</li> </ul> <p>Interview on 12/21/18 the Group Home Manager stated:</p> <ul style="list-style-type: none"> <li>-She thought fire and disaster drills were done on each shift each quarter.</li> <li>-She would follow up with staff to make sure fire and disaster drills were done on each shift each quarter.</li> </ul>	V 114	
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration:</p> <ol style="list-style-type: none"> <li>(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.</li> <li>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</li> <li>(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.</li> <li>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept</li> </ol>	V 118	

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V 118	<p>Continued From page 2 current. Medications administered shall be recorded immediately after administration. The MAR is to include the following:</p> <p>(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.</p> <p>This Rule is not met as evidenced by:                  Based on record reviews, observations, and interviews. the facility failed to administer medications as ordered by the physician and maintain an accurate MAR for 2 of 3 audited clients (#2, #3). The findings are:</p> <p>Finding #1:                  Review on 12/21/18 of client #2's record revealed:                  -41 year old female admitted 10/25/09.                  -Diagnoses included Cerebral Palsy with Impairment; Chronic Kidney Disease; Mental Retardation, Severe; Hypercholestrolemia; Joint Deformity                  -Order dated 8/23/18 for Lorazepam 0.5 mg (milligrams), 1 every morning and 1 in the afternoon as needed for anxiety.</p> <p>Review on 12/21/18 of client #2's MARs for October, November, and December 2018 revealed:</p>	V 118	
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V 118	<p>Continued From page 3</p> <p>-2 identical entries printed for order, Lorazepam 0.5 mg, 1 every morning and 1 in the afternoon as needed for anxiety, with a dosing time of 8 am printed by 1 entry each month, and no dosing time printed by the other entry.</p> <p>-On the October 2018 MAR a dosing time of 8 am had been hand written by the Lorazepam entry without a pre-printed dosing time.</p> <p>-Lorazepam 0.5 mg had been documented as given twice (once of each Lorazepam printed entry) at 8 am from 10/1/18 - 10/31/18.</p> <p><b>Finding #2:</b> Review on 12/21/18 of Client #3's record revealed: -23 year old female admitted 8/7/08. -Diagnoses included acne, Bipolar Disorder; Learning Disability; Mental Retardation, Moderate; Mood disorder; Seborrhic Dermatitis; Schizoffective disorder. -Order dated 12/26/17 for Fluocin Acetate Oil 0.01% Scalp oil (Same as Derma-Smothe Scalp Oil), apply to scalp at bedtime for 2 weeks. (A low to medium strength corticosteroid medication used to treat scalp psoriasis.) -FL-2 dated 2/22/18 order for Derma-Smothe Scalp Oil as needed (PRN). No frequency included in order. No order documented to clarify FL-2 order. -Order dated 12/20/17 for Ketoconazole Shampoo 2%, lather to scalp, leave for 5 minutes, and rinse; repeat once every week. (Dandruff)</p> <p>Review on 12/21/18 of client #3's MARs for October, November, and December 2018 revealed: -Order transcribed for Fluocin Acetate Oil 0.01% Scalp oil, apply to scalp at bedtime for 2 weeks. None documented in October 2018;</p>	V 118		
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<p>V 118</p>	<p>Continued From page 4 documented as administered daily at 8 pm from 11/23/18 - 12/5/18.</p> <p>-Order transcribed for Ketoconazole Shampoo 2%, lather to scalp, leave for 5 minutes, rinse; repeat once every week. Dosing times of 8 am and 8 pm hand written on each MAR. - Ketoconazole Shampoo 2% documented as administered on 3 consecutive days in October: 10/22/18 at 8 pm, 10/23/18 and 10/24/18 at 8 am.</p> <p>-Ketoconazole Shampoo 2% documented as administered 2 times during the last week of November: 11/24/18 at 8 am, and again on 11/27 at 8 pm.</p> <p>-Ketoconazole Shampoo 2% documented as administered on 12/9/18 at 8 pm, followed by 2 times the next day, 12/10/18, at 8 am and 8 pm.</p> <p>Observations on 12/21/18 at 11:35 am of client #3's medications on hand revealed a topical medication labeled Fluocin Acetate Oil 0.01%, Apply to scalp at bedtime for 2 weeks. Dispense date was 6/22/18.</p> <p>Interview on 12/21/18 the Group Home Manager stated: -She thought it was a documentation error on client #2's October MAR. -She would follow up on the orders for scalp oil and Ketoconazole shampoo for client #3.</p> <p>Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician.</p>	<p>V 118</p>	<p><b>V118</b></p> <p>Contact has been made with prescribing doctors and pharmacy to clear up discrepancies related to medication orders for all consumers. All documentation errors have been corrected in consumers MARs and any other documentation relating to medication orders.</p> <p>Home Manager will review consumers' MARs weekly to confirm accuracy of documentation and that medications are being administered as prescribed.</p> <p>QP will review consumers' MARs monthly to confirm accuracy of documentation and that medications are being administered as prescribed.</p> <p>QA/QI team and facility nurse will review consumers' MARs quarterly to confirm accuracy of documentation and that medications are being administered as prescribed.</p>	<p>12/27/18</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
<p>V 121</p>	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p>	<p>V 121</p>		

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<p>V 121</p>	<p>Continued From page 5</p> <p>(f) Medication review:                  (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.                  (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 interviews, the facility failed to assure that the client's physicians were informed of the results of their drug regimen reviews when medical intervention was indicated. The findings are:</p> <p>Finding #1:                  Review on 12/21/18 of client #2's record revealed:                  -41 year old female admitted 10/25/09.                  -Diagnoses included Cerebral Palsy with Impairment; Chronic Kidney Disease; Mental Retardation, Severe; Hypercholestrolemia; Joint Deformity.                  -Orders for psychotropic medications were as follows: Lorazepam 0.5 mg (milligrams), 1 every morning and 1 in the afternoon as needed for anxiety (ordered 8/23/18); Citalopram 30 mg daily (ordered 10/18/18); Risperidone 0.5 mg in the morning and 1.5 mg at bedtime (ordered 8/2/18); Guanfacine 1 mg twice daily (ordered 8/2/18).</p> <p>Review on 12/21/18 of client #2's drug regimen</p>	<p>V 121</p>		
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V 121	<p>Continued From page 6 reviews dated 6/7/18 and 12/13/18 revealed: -Drug regimen reviews were performed by a pharmacist.</p> <p>-6/7/18 drug regimen review included a recommendation for annual lab work to check client #2's Lipids and A1C (test for average blood glucose levels).</p> <p>-12/13/18 drug regimen review included a recommendation to consider Lorazepam order getting changed to "split scripts" for routine and PRN (as needed) dosing.</p> <p>Review on 12/21/18 of client #2's Medication Administration Records (MARs) for October 2018 revealed Lorazepam 0.5 mg had been documented as given twice at 8 am from 10/1/18 - 10/31/18. (Refer to V118 for additional information.)</p> <p>Finding #2: Review on 12/21/18 of client #3's record revealed: -23 year old female admitted 8/7/08. -Diagnoses included acne, Bipolar Disorder; Learning Disability; Mental Retardation, Moderate; Mood disorder; Seborrhic Dermatitis; Schizoffective disorder. -Orders for psychotropic medications were as follows: Quetiapine 200 mg at bedtime (ordered 2/7/18); Perphenazine 16 mg twice daily (ordered 5/2/18); Divalproex 750 mg extended release (ER) at bedtime (ordered 5/2/18, 8/1/18).</p> <p>Review on 12/21/18 of client #3's drug regimen review dated 6/7/18 revealed: -Drug regimen review was performed by a pharmacist. Recommendation made to consider checking client #3's VPA (valproic acid level), and AIC.</p>	V 121		
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<p>V 121</p>	<p>Continued From page 7</p> <p>Interview on 12/21/18 the Group Home Manager stated: -There was no process in place for her to to make sure recommendations from the drug regimen reviews were sent to the physician. -She could not find documentation that laboratory testing recommended by the pharmacist reviewer had been done for the clients.</p> <p>Interview on 12/21/18 the Qualified Professional stated: -She would have seen recommendations of the December pharmacy reviews during her December monthly review, but these had not been completed at the time of the survey. - She looked to see if labs for A1C and Lipid testing had been done for the clients with these recommendations, but could not find results on the record. -She could not identify any documentation the results of the drug regimen reviews had been sent to the clients' physicians.</p>	<p>V 121</p>	<p><u>V121</u></p> <p>Home Manager and QP have reviewed all consumers' drug regimen reviews and confirmed that recommendations have been addressed with consumers' physicians.</p> <p>Staff were informed to contact Home Manger and/or QP immediately upon notification of pharmacist reviewer's intent to come out to review consumers' MARS.</p> <p>Home Manager and QP will send recommendations from the drug regimen reviews to physicians in a timely manner following pharmacist reviewer's visit with verifying documentation filed in consumers' MARS.</p> <p>QA/QI team and facility nurse will review drug regimen reviews and verifying documentation quarterly to confirm regimen were reviewed and recommendations were sent to physicians in a timely manner.</p>	<p>02/18/19</p> <p>01/14/2019</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
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