

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL084-029 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 02/01/2019 |
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| NAME OF PROVIDER OR SUPPLIER DURRETT HOME | STREET ADDRESS, CITY, STATE, ZIP CODE 824 BLAKE ROAD ALBEMARLE, NC 28001 |
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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 2/1/19. A deficiency was cited.</p> <p>This facility is licensed for the following survey category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</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</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>file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure the Medication Administration Record (MAR) of all drugs administered to each client must be kept current and medications administered were recorded immediately after administration affecting 1 of 3 clients (#1). The findings are:</p> <p>Review on 2/1/19 of client #1's record revealed; -admission date of 11/1/11 with diagnoses of Autism Disorder, Epilepsy, Intellectual Developmental Disabilities-Moderate and Familial Cold Auto-Inflammatory Syndrome; -physicians' orders dated 12/1/18 for the following medications: Vitamin one tablet daily, Loestrin-28 one tablet daily, Calcium D3 one tablet twice daily, lamotrigine(generic for Lamictal) 100mg two tablets twice daily, levetiracetam(generic for Keppra) 750mg one tablet twice daily, omeprazole(generic for Prilosec) 20mg one tablet twice daily, phenytoin(generic for Dilantin) 100mg one tablet twice daily, Ursodiol 500mg one tablet twice daily, Vitamin B-6 100mg one tablet twice daily, diazepam(generic for Valium) 5mg one and one half tablet at bed, Dilantin 30mg one tablet at bed (with 100mg).</p> <p>Observations on 2/1/19 at 1:46pm of client #1's medications on site revealed: Vitamin one tablet daily, Loestrin-28 one tablet daily, Calcium D3</p> | V 118 | | |

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| V 118 | <p>Continued From page 2</p> <p>one tablet twice daily, lamotrigine 100mg two tablets twice daily, levetiracetam 750mg one tablet twice daily, omeprazole 20mg one tablet twice daily, phenytoin 100mg one tablet twice daily, Ursodiol 500mg one tablet twice daily, Vitamin B-6 100mg one tablet twice daily, diazepam 5mg one and one half tablet at bed, Dilantin 30mg one tablet at bed.</p> <p>Review on 2/1/19 of client #1's MARS from 11/2/18-1/31/19 revealed the following dosage dates left blank with no explanation documented: -11/30 in the am: Vitamin one tablet daily, Loestrin-28 one tablet daily, Ursodiol 500mg one tablet twice daily, Dilantin 30mg one tablet at bed; -11/15 in the pm: Calcium D3 one tablet twice daily, lamotrigine 100mg two tablets twice daily, levetiracetam 750mg one tablet twice daily, omeprazole 20mg one tablet twice daily, phenytoin 100mg one tablet twice daily, Ursodiol 500mg one tablet twice daily, Vitamin B-6 100mg one tablet twice daily, diazepam 5mg one and one half tablet at bed, Dilantin 30mg one tablet at bed.</p> <p>Unable to interview client #1 on 2/1/19 as she is nonverbal.</p> <p>Interview on 2/1/19 with the Residential Manager and the Qualified Professional revealed: -had storms and the internet was down; -staff unable to document in the computerized MAR system medications were administered; -staff supposed to document on the back up MAR paper forms; -staff did not document on back up MAR paper forms.</p> | V 118 | | |