

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL026-812</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/20/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>RAINBOW OF SUNSHINE 2</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>307 CEDARWOOD STREET SPRING LAKE, NC 28390</b>
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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><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on March 20, 2019. 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		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></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 review, observation and interview, the facility failed to administer medications on the written order of a physician and failed to keep the MARs current affecting two of three clients (#1 and #4). The findings are:</p> <p>Finding #1: Review on 03/20/19 of client #1's record revealed: - 31 year old female. - Admission date of 02/03/08. - Diagnoses of Bipolar Disorder, Moderate Intellectual Developmental Disability (IDD), Diabetes Mellitus and Gastro Esophageal Reflux Disorder.</p> <p>Review on 03/20/19 of client #1's medication orders dated 01/03/19 revealed: - Check Finger Stick Blood Sugar (FSBS) values twice daily.</p> <p>Review on 03/20/19 of client #1's FSBS records for January 2019 and February 2019 revealed the following blanks: January 2019 - 01/16/19, 01/28/19 and 01/30/19 in the evening.</p> <p>February 2019 - 02/05/19 in the morning and 02/27/19 in the evening.</p> <p>Interview on 03/20/19 client #1 stated staff check her blood sugar values twice daily.</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Finding #2: Review on 03/20/19 of client #4's record revealed: - 38 year old male. - Admission date of 12/16/16. - Diagnoses of Moderate IDD, Attention Deficit Hyperactivity Disorder and Hypertension.</p> <p>Review on 03/20/19 of client #4's signed physician orders dated 01/03/19 revealed: - Vitamin D (treats vitamin D deficiency) 50,000 units - take one capsule weekly.</p> <p>Review on 03/20/19 of client #4's February 2019 and March 2019 MARs revealed the following : February 2019 - No staff initials to signify the Vitamin D was administered between 02/12/19 thru 02/27/19.</p> <p>March 2019 - No staff initials to indicate the Vitamin D was administered.</p> <p>Interview on 03/19/19 client #4 stated he received his medications as ordered.</p> <p>Interview on 03/20/19 the Licensee stated: - She understood the MARs for the clients needed to be kept current. - She would follow up on the identified medication issues.</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>	V 118		
V 736	27G .0303(c) Facility and Grounds Maintenance	V 736		

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V 736	<p>Continued From page 3</p> <p>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.</p> <p>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. The findings are:</p> <p>Observation on 03/19/19 at approximately 1:30pm revealed:</p> <ul style="list-style-type: none"> <li>- Client #1 and #2's bedroom revealed the window would not raise for egress. An approximately 7 foot by 2 foot unpainted white patched area on the wall. Two softball sized unpainted white patched areas on the wall.</li> <li>- Client #3's bedroom revealed an approximately 12 inch by 12 inch unpainted white patched area on the wall. The windows had plexiglass on the surface which impeded the ability to raise for an egress.</li> <li>- The hallway bathroom revealed a broken slat in the window blind.</li> </ul> <p>Interview on 03/20/19 the Licensee indicated she would have identified areas repaired.</p>	V 736		