

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL040-007</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/20/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>DOGWOOD</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>212 DOGWOOD LANE SNOW HILL, NC 28580</b>	<b>RECEIVED</b> <small>By DHSR - Mental Health Lic. &amp; Cert. Section at 9:06 am, Apr 10, 2019</small>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up 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	<p><u>V114</u> While this is an issue which plagued our agency throughout 2018, the installation of a new Safety Officer has mitigated this deficiency dramatically. To prevent these deficiencies, the Safety Officer has developed and published a Schedule for Dogwood that Alerts staff when fire/disaster drills must be conducted. Once conducted, a copy of the Drill Report must be submitted to the Safety Officer as confirmation the drill was conducted as scheduled. If no report is turned into the Safety Officer the day after the scheduled date, they will reach out to the Dogwood Team Leader</p>	4/5/19
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></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 review and interview the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings are:</p> <p>Review on 03/20/19 of facility records from April 2018 thru present revealed: -April 2018-June 2018 no 1st or 2nd shift fire drill and no 1st or 3rd shift disaster drill documented. -July 2018-September 2018 no 3rd shift fire drill</p>	V 114		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Calvin King*

TITLE

*Director of Operations*

(X6) DATE

*4/5/19*

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V 114	Continued From page 1  and no 2nd or 3rd shift disaster drill documented. -October 2018-December 2018 no 2nd or 3rd shift fire drill documented and no 1st or 3rd shift disaster drill documented.  During interview on 03/20/19 client #2 and #3 stated they participated in fire and disaster drills.  Interview on 03/21/19 the Qualified Professional stated safety drills would be discussed with staff in the facility.	V 114	to request the Copy, or to Verify the need for a drill to be Conducted on the Assigned Shift Within 24 hours. We feel as though this Additional layer of Supervision & Verification will ensure this issue doesn't persist into the future. In fact, after a review of Q1 drills, all drills were Conducted on the Scheduled dates. This will be monitored by the Safety officer & will be reviewed for Compliance in the Quarterly Safety Committee Meetings.	
V 118	27G .0209 (C) Medication Requirements  10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (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. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (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. (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: (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	V 118	to request the Copy, or to Verify the need for a drill to be Conducted on the Assigned Shift Within 24 hours. We feel as though this Additional layer of Supervision & Verification will ensure this issue doesn't persist into the future. In fact, after a review of Q1 drills, all drills were Conducted on the Scheduled dates. This will be monitored by the Safety officer & will be reviewed for Compliance in the Quarterly Safety Committee Meetings.	4/15/19

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V 118	<p>Continued From page 2</p> <p>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> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to keep the MARs current affecting two of three clients (#2 and #3). The findings are:</p> <p>Finding #1: Review on 03/19/19 of client #2's record revealed: -45 year old male. -Admission date of 03/03/15. -Diagnoses of Schizophrenia, Moderate Mental Retardation, Seizure Disorder, Insomnia, Hypertension, Hyponatremia, Anemia, and Vitamin D Deficiency.</p> <p>Review on 03/19/19 of client #2's Physician orders revealed: 10/04/18 -Chlorpromazine 100mg Take 2 tablets by mouth 3 times daily. -Lorazepam 1mg Take 1 tablet by mouth every night at bedtime. -Ferrous Sulfate 325mg Take 1 tablet by mouth twice daily.</p> <p>Review on 03/19/19 of client #2's February 2019 MAR revealed the following blanks: -Chlorpromazine 100mg-02/12/19 at 2:00pm. -Ferrous Sulfate 325mg-2/26/19 at 8:00pm. -Lorazepam 1mg 02/06/19, 02/07/19.</p>	V 118	<p><u>V118</u> With the implementation of the e-MAR System in the use of Recording Medication Administration, We have seen great success and an increase in the Accuracy of our Med Admin Recording Practices. That being said, as with any new technology, sometimes "bugs" exist in the system. These "bugs" can result in staff members being "locked out" of the system, individuals receiving medication not showing up in the system, or initials not being recorded when a med is scanned in via Bar-code and recorded as passed. After an issue is identified, the CNA immediately contacts the</p>	4/15/19
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V 118	<p>Continued From page 3</p> <p>During interview on 03/20/19 client #2 stated he received his medication daily.</p> <p>Finding #2 Review on 03/19/19 of client #3's record revealed: -78 year old male. -Admission date of 06/08/93. -Diagnoses of Schizophrenia Disorder, Obesity, Moderate Mental Retardation, Hearing Loss, Allergic Rhinitis, Hypokalemia, Cardiomyopathy, Hypercholesterolemia.</p> <p>Review on 03/19/19 of client #3's Physician orders revealed: 04/02/18 -Lorazepam 1mg Take 1 tablet by mouth at bedtime. 07/02/18 -Risperidone 1mg Take 1 tablet by mouth at bedtime. 10/25/17 -Rosumastatin 10mg Take 1 tablet by mouth at bedtime.</p> <p>Review on 03/19/19 of client #3's February 2019 MAR revealed the following blanks: -Lorazepam 1mg-02/04/19, 02/06/19, 02/07/19, 02/12/19, 02/26/19. -Risperidone 1mg-02/04/19, 02/06/19, 02/07/19, 02/12/19, 02/26/19. -Rosumastatin 10mg-02/04/19, 02/06/19, 02/07/19, 02/12/19, 02/26/19.</p> <p>During interview on 03/20/19 client #2 stated he received his medication daily.</p> <p>During interview on 03/20/19 the Certified Medical Assistant stated:</p>	V 118	<p>System operator to make them aware of this issue. to ensure the issue is resolved promptly, and avoided in the future. While these "bugs" are uncommon, Ambleside has put protections in place to ensure Meds Admin can still be recorded despite systems issues. In order to ensure the Med Admin is recorded @ the time of Administration, we keep up-to-date paper MARs in the dogwood home. These also assist in the event of power or internet outages. We are confident that the medication identified in this report was administered as prescribed due to the fact staff had recorded the Admin of these meds on the paper MARs available in the home. <del>The</del> We feel confident this issue was due to a system "bug". The "bug" was promptly reported to the Quick MAR System Admin and as of this date (4/5/19) the issue has been resolved. Ambleside</p> <p style="text-align: right;">4/5/19</p>	



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V 118	<p>Continued From page 4</p> <ul style="list-style-type: none"> <li>-All the facilities are using the electronic MAR.</li> <li>-The computer system does not always record the initials.</li> <li>-She was going to contact the pharmacy to get the issues corrected.</li> </ul> <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	<p>Will Continue to Monitor this system on a daily basis for "Bugs" ? Continue to keep up-to-date and Accurate Paper MARs in the Dogwood home in case system issues arise. This system will be monitored daily by the Ambleside CMA &amp; Issues will be immediately reported to the e-MAR Systems Admin</p>	4/5/19