STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL0411095	A. BUILDING: _____ B. WING _____	R 04/09/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PALM HOUSE	3212 PRESLEY WAY GREENSBORO, NC 27405

(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	INITIAL COMMENTS An annual and follow up survey was completed on 4/9/19. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults whose Primary Diagnosis is a Developmental Disability.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on interviews and record review, the facility failed to conduct disaster drills each shift quarterly. The findings are: Review on 4/9/19 of a disaster drill log revealed no disaster drills had been documented as conducted on 3rd shift for the months of April 2018 - March 2019.	V 114		

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V 114	Continued From page 1 Interview on 4/9/19 with the Associate Professional revealed: -There were 3 shifts during the week days and 2 shifts on the weekends; -She was aware that there was supposed to be a disaster drill conducted quarterly on each shift; -She was not aware the disaster drills had not been completed as required. Interview on 4/9/19 with the Owner revealed: -It was the responsibility of the Qualified Professional (QP) to ensure disaster drills were completed as required; -She had been filling in as the QP for the past month because the QP was out on leave; -She was not aware that disaster drills had not been completed on 3rd shift; -"[The QP out on leave] knows better;" -"I haven't done an audit on these books (binder that contained the completed disaster drills)." This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 114		
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,	V 118		

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V 118	Continued From page 2 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 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. This Rule is not met as evidenced by: Based on record reviews, observations and interviews the facility failed to administer medications on the written order of a physician affecting two of three clients (clients #2 and 3). The findings are: Review on 4/9/19 of client #2's record revealed: -Date of Admission: 8/9/14; -Diagnoses included Impulse Control Disorder, Attention Deficit Hyperactivity Disorder (ADHD), Moderate Intellectual Developmental Disability, Depression, Hypertension, Schizoaffective Disorder and Pica; -An order dated 3/1/19 for Benzaclin, used to treat acne, apply to face in the morning. Review on 4/9/19 of client #2's MAR's for the	V 118		

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V 118	Continued From page 3 months of March and April 2019 revealed Benzaclin had been administered daily. Observation on 4/9/19 of medications on hand revealed 1 container of Benzaclin that had expired on 3/19/19. Review on 4/9/19 of client #3's record revealed: -Date of Admission: 10/10/15; -Diagnoses included Oppositional Defiant Disorder, ADHD, Anxiety Disorder, Mild Intellectual Developmental Disability and Hyperlipidemia; -An order dated 8/9/18 for Clindamycin Phosphate, used to treat acne, apply twice daily. Review on 4/9/19 of client #3's MAR's for the months of March and April 2019 revealed Clindamycin Phosphate had been administered daily. Observation on 4/9/19 of medications on hand revealed 1 container of Clindamycin Phosphate that had expired on 2/28/19. Interview with staff #1 on 4/9/19 revealed: -She had administered the Benzaclin and the Clindamycin Phosphate to the clients since the medications had expired; -She had never checked the expiration dates of the medications she had administered. Interview on 4/9/19 with the Owner revealed she had checked the medications the week prior and must have missed the two medications that had expired.	V 118		