STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL011-287	A. BUILDING: _____ B. WING _____	R 06/05/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DAWN FORREST HOME	29 GRANDVIEW CIRCLE ASHEVILLE, NC 28806

(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 6/5/19. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Individuals of all Disability Groups/Alternative Family Living.	V 000		
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 drug. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation	V 118		

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V 118	Continued From page 1 with a physician. This Rule is not met as evidenced by: Based on observation, interview, and record review the facility failed to maintain the MAR current and ensure prescription drugs were administered as ordered by the physician for 1of 2 audited clients (#2). The findings are: Observation on 6/5/19 at 9:10am of the medications for Client #1 included: -Ranitidine HCl 150mg two times daily. Review on 6/5/19 of the record for Client #1 revealed: -Admission date of 12/1/99 with diagnoses of Moderate Intellectual Development Disability, Hypertension and Chronic Obstructive Pulmonary Disease. -Physician order dated for Ranitidine HCL 150mg two times daily dated 3/11/19. Review on 6/5/19 of the March 2019 MAR revealed: -No documentation of Ranitidine being administered from 3/12/19-3/31/19. Interview on 6/5/19 with the Alternative Family Living Provider (AFL) revealed: -The Ranitidine should be on the MAR for the month of March. -It was an oversight the Ranitidine was not added to the MAR. -The Ranitidine was administered from 3/14/19 through 3/31/19 but not documented. -She was now getting electronic MARS from the	V 118		

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V 118	Continued From page 2 pharmacy as of 4/1/19. -The pharmacy will send a new MAR for any changes to medications made by the physician. Interview on 6/5/19 with the Qualified Professional revealed: -She confirmed the Ranitidine was not documented from 3/12/19-3/31/19. -She would review the MAR each month but did not compare them to the physician orders. -The facility was now receiving electronic MARS from the pharmacy. -The electronic MAR should prevent future documentation errors. This deficiency constitutes a recited deficiency and must be corrected within 30 days.	V 118		