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	MHL067168	A. BUILDING: _____ B. WING _____	R 06/07/2019

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EDNA'S PLACE	131 SUFFOLK CIRCLE JACKSONVILLE, NC 28546

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V 000	INITIAL COMMENTS A complaint and follow up survey was completed on June 7, 2019. The complaint was substantiated (intake #NC00151778). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C, Supervised Living for Adults with Developmental Disabilities.	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	V 118		

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V 118	Continued From page 1 file followed up by appointment or consultation with a physician. This Rule is not met as evidenced by: Based on record reviews, observation, and interviews, the facility failed to assure medications were administered as ordered by the physician and maintain accurate MARs for two of three clients audited (#1 and #2). The findings are: Finding #1 Review on 6/5/19 of client #1's record revealed: - 47 year old female. - Admission date of 7/18/11. - Diagnoses of impulse control disorder, paranoid schizophrenia, intellectual and developmental disabilities (moderate), cerebral palsy, and seizure disorder. Review on 6/5/19 of a standing medical order form dated 1/30/19 for client #1 revealed: - Ibuprofen 200mg (milligram) - 2 tablets orally every 6 hours as needed. (anti-inflammatory used to relieve pain and fever) - Robitussin DM 10mls (milliliters) - Every 6 hours (not exceed 4 doses in 24 hours). (cough and congestion relief) - Tylenol 500mg - 1 tablet by mouth every 6 hours as needed. If temperature is above 101 call Physician's Assistant (PA-C). - Benadryl 25 mg - Take 1 tab orally twice a day until resolved. (antihistamine used to relieve allergy and common cold symptoms.) Review on 6/5/19 of client #1's March, April, May,	V 118		

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and June 2019 MARs revealed:
- Ibuprofen 600 mg Tab -Take 2 tablets by mouth every 6 hours as needed.
- Tussin Dm Clear Liquid - Take 10 mls by mouth every 6 hours as needed. Do not exceed 4 doses in 24 hours. No longer than 48 hours. Notify PA.
- Pain relief 500mg caplet - Take 1 tablet by mouth every 6 hours as needed if temp above 101 call PA-C.
- Diphenhist 25mg Tab - 1 Tab by mouth twice daily until resolved.

Observation on 6/5/19 at approximately 1:00pm of client medications revealed:
- There was no Ibuprofen 600mg or 200mg tab on hand to be administered.
- The medication label for Tussin DM read as follows: "Take 30 mls every 6 hours as needed. Not to exceed 5 doses in 24 hours. No longer then 48 hours then notify PA."
- There was no Tylenol/pain relief 500mg tab on hand to be administered.
- There was no Diphenhist/Benadryl 25mg Tab on hand to be administered.

During interview on 6/4/19 client #1 stated she received her medication daily and had not missed any needed medications.

Finding #2
Review on 6/4/19 and 6/5/19 of client #2's record revealed:
- 48 year old male.
- Admission date of 8/22/08.
- Diagnoses included schizophrenia, paranoid type; dementia due to anoxia; unspecified neuro developmental disorder; hearing loss; compromised immune system, traumatic brain injury, and asthma.
- Note posted in record read, "If [client #2] does

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not have a bowel movement for 2 consecutive days med tech (medication technician) needs to be notified. @ 1-5-17."
-No documentation the medication technician or Qualified Professional were notified when client #2 did not be a BM for more than 2 consecutive days.

Review on 6/5/19 of client #2's Individual Service Plan dated 11/1/18 revealed:
- Client #2 continued to have problems with constipation and bowel impaction and had required treatment in the emergency room during the past year.
- In the prior plan year (2016 -2017) client #2 had a colonoscopy for impacted bowels.
- Staff tracked his bowel movements.
- Client #2 did not always let staff see his bowel movements.

Review on 6/4/19 and 6/5/19 of client #2 orders revealed:
- Order dated 8/23/18 for Miralax 17 gms (grams), 1 capful, titrate to 3-4 BMs (bowel movements) per day. (Constipation)
- Order dated 1/9/19 (FL2) for Miralax 17 gms with 8 oz (ounces) of water PRN (as needed) daily. No order to clarify when the medication was to be given (i.e. length of time without confirming client had a BM.)
- Order dated 4/11/09 for Miralax 17 gms with 8 oz of water, juice, soda, coffee, or tea. (This was written as a routine order.)
- Order dated 5/3/19 for Miralax 17 gms with 8 oz of water, juice, soda, coffee, or teas PRN (as needed) for constipation. No order to clarify when the medication was to be given (i.e. length of time without a BM)
- Order dated 5/30/18 for Milk of Magnesia 2 tablespoons (30 ml) every night at bedtime PRN.

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V 118	Continued From page 4 If no BM in 12 hours call physician. No order to clarify when the medication was to be given (i.e. length of time without a BM). (Constipation) - Order dated 1/10/19 for Proair HFA (hydrofluoroalkane) 2 puffs every 4-6 hours PRN. (quick-relief (rescue) inhaler used to prevent and treat wheezing and shortness of breath caused by breathing problems such as asthma, chronic obstructive pulmonary disease.) - Order dated 5/30/18 for Tylenol 325 mg every 6 hours PRN temperature; if above 101 call physician. - Orders dated 8/6/18 and 1/10/19 for Tylenol 325 mg, take 2 tablets TID (3 times daily) as needed. (pain or fever) - Ondensetron 4 mg TID as needed for nausea. Review of client #2's log of BMS From 3/1/19 - 6/3/19 revealed: - March: No BMs documented from 3/05/19 -3/9/19 and 3/13/19 -3/17/19 - April: No BMs documented from 4/18/19 -4/24/19 - May: No BMs documented from 5/06/19 -5/20/19 Review on 6/4/19 and 6/5/19 of client #2's March, April, May, and June 2019 MARs revealed: - March 2019 MAR: 8/23/18 order for Miralax (1 capful, titrate to 3-4 BMs per day was transcribed. The more recent order dated 1/9/19 (FL2) had not been transcribed. Miralax had been documented daily on 3/16/19 - 3/18/19 - April 2019 MAR: 8/23/18 order for Miralax (1 capful, titrate to 3-4 BMs per day was transcribed. The more recent orders dated 1/9/19 (FL2) and 4/11/9 had not been transcribed. Miralax had not been documented daily on 4/4/19, 4/14/19, or 04/30/19 as per order dated 4/11/19 to administer the medication daily.	V 118		

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V 118	Continued From page 5 - May 2019 MAR: Miralax 17 gms was documented daily on 5/13/19 - 5-15-19 without results. - Milk of Magnesia had not been documented as administered during the months of March, April, or May, 2019. - Order transcribed for Tylenol read to administer 325 mg (1 tablet) every 6 hours PRN temperature. Order dated 8/6/18 and 1/10/19 for Tylenol 325 mg, take 2 tablets TID as needed had not been transcribed to the MARs. Observation on 6/5/19 at 12:07 pm of client #2's medications on hand revealed: - No Tylenol 325 mg tablets on hand. - No Ondensetron 4 mg on hand. - 2 Proair HFA inhalers on hand. Unable to interview client #2 on 6/4/19 due to communication difficulties with answering questions. Interview on 6/6/19 client #2's Day Worker stated: - He did not have an inhaler with him at the Day Program. - She took him into the community often and she never had an inhaler with them. - He had not had any breathing problems when he had been with her. Interview on 6/6/19 the Former Medication Technician stated: - She was the "Med Tech" from May 2018 until about 2 weeks prior. - She made sure prescriptions were up to date. - She would contact the physicians if a medication order needed to be clarified. - Staff were to call the Qualified Profession and then herself if clients were having problems with constipation. Staff communicated to her via	V 118		

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V 118	Continued From page 6 email. - She had not received any recent emails about client #2 not having bowel movements. Interview on 6/4/09 the Qualified Professional stated: - She did not know why medications ordered for clients were on on hand. - She could not explain why the Tylenol order for client #2 had not been updated to the most recent order. - She was not sure when the staff should administer the Milk of Magnesia order for client #2. [This deficiency constitutes a re-cited deficiency and must be corrected with 30 days.]	V 118		
V 121	27G .0209 (F) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (f) Medication review: (1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated. (2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable. This Rule is not met as evidenced by:	V 121		

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V 121	Continued From page 7 Based on record reviews and interviews, the facility failed to assure that 3 of 3 client's physicians were informed of the results of their drug regimen reviews when medical intervention was indicated. The findings are: Finding #1: Review on 6/5/19 and 6/6/19 of client #1's record revealed: - 47 year old female. - Admission date of 7/18/11. - Diagnoses of impulse control disorder, paranoid schizophrenia, intellectual and developmental disabilities (moderate), cerebral palsy, and seizure disorder - Orders for psychotropic medications were as follows: - Celexa 20mg (milligrams), 1 tablet by mouth 2 times daily (used in the treatment of depression). - Depakote 500mg, 3 tablets by mouth at bedtime (used in the treatment of bipolar disorder). - Zyprexa 20mg, 1 tablet by mouth every evening (used in the treatment schizophrenia and mania). - Propranolol 10mg, 1 tablet by mouth 3 times daily (off label use in treatment of anxiety). - Seroquel XR (extended release) 400mg, 1 tablet by mouth ever evening (used in treatment of schizophrenia and mania). Review on 6/5/19 and 6/6/19 of client #1's drug regimen reviews dated 11/8/18 and 5/17/19 revealed: - Drug regimen reviews were performed by a pharmacist. - 11/8/18 drug regimen review included a recommendation for most recent lab values (Depakote, Phenobarbital) and request to obtain blood pressure readings on daily basis. Previous dated labs identified as 3/2/17 in assessment section of review.	V 121		

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V 121	Continued From page 8 - 5/17/19 drug regimen review included a recommendation for most recent lab values (Depakote, Phenobarbital). Previous dated labs identified as 3/2/17 in assessment section of review and blood pressure readings noted as not provided. Finding #2: Review on 6/4/19 and 6/5/19 of client #2's record revealed: - 48 year old male. - Admission date of 8/22/08. - Diagnoses included schizophrenia, paranoid type; dementia due to anoxia; unspecified neuro developmental disorder; hearing loss; compromised immune system, traumatic brain injury, and asthma. - Orders for psychotropic medications were as follows: Escitalopram 20 mg at bedtime; Lithium Carbonate 300 mg in the morning and 600 mg in the evening with meals; Clozapine 100 mg in the morning and 400 mg at bedtime; Depakote ER (extended release) 1,000 mg at bedtime. Review on 6/5/19 and 6/6/19 of client #2's drug regimen reviews dated 11/8/18 and 5/17/19 revealed: - Recommendations for review dated 11/18/18 read, "Obtain most recent lab values (ANC, Depakote, lithium). Recommend influenza vaccine pneumovax, and Tdap booster." - Recommendations for review dated 5/17/19 read, "Same as November." - No documentation the recommendations had been sent to client #2's physicians. Finding #3: Review on 6/5/19 and 6/6/19 of client #3's record revealed: - 45 year old male.	V 121		

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V 121	Continued From page 9 - Admission date of 1/19/13. - Diagnoses of impulse control disorder, autism, intellectual and developmental disabilities (severe). -Orders for psychotropic medications were as follows: - Olanzapine 15 mg, 1 tablet by mouth 3 times daily (used in the treatment schizophrenia and mania). - Paxil 20 mg, 1 tablet by mouth 2 times daily for anxiety. - Propranolol 10 mg, 3 tablets by mouth 3 times daily for anxiety. - Depakote 250 mg, 20 ml (milliliters) by mouth 3 times daily for anxiety. Review on 6/5/19 and 6/6/19 of client #1's drug regimen reviews dated 11/8/18 and 5/17/19 revealed: - Drug regimen reviews were performed by a pharmacist. - 11/8/18 drug regimen review included a recommendation for most recent lab values (Depakote, and vitamin-D) and diagnosis for bethanechol. Assessment section identified no lab values. -5/17/19 drug regimen review included a recommendation for most recent lab values and diagnosis for bethanechol. Assessment section identified no lab value results. Interview on 6/6/19 the Qualified Professional stated: - She was not sure if the pharmacist who completed the reviews sent results to the physicians. - She did not do this. - She was unable to identify any documentation the results of the drug regimen reviews had been sent to the clients' physicians.	V 121		

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V 121	Continued From page 10 [This deficiency constitutes a re-cited deficiency and must be corrected with 30 days.]	V 121		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals. (d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.	V 291		

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V 291	Continued From page 11 This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to maintain coordination between the facility operator and professionals who are responsible for the clients treatment, affecting 1 of 3 clients (#2). The findings are: Review on 06/04/19 and 06/05/19 of client #2's record revealed: - 48 year old male. - Admission date of 08/22/08. - Diagnoses included schizophrenia, paranoid type; dementia due to anoxia; unspecified neuro developmental disorder; hearing loss; compromised immune system, traumatic brain injury, and asthma. -Order dated 8/6/18 for Ensure High Protein - Muscle Liquid Drink 1 can up to 4 times a day as needed. (Nutritional supplement) -Order dated 5/22/19 for Ensure 1 can QID (4 times a day) as directed, diagnosis weight loss. Review on 6/5/19 of client #2's Individual Support Plan dated 11/1/18 revealed: -Client #2 had improved in stabilizing his weight. -His supplement, Ensure, had been prescribed "as needed" now. -Staff were to monitor his weight and provide the Ensure for weight fluctuations as needed when that occurred. Review of client #2's weight records from June 2018 to June 2019 revealed: -Average weight recorded from 6/1/18 - 8/31/18 = 162.8 pounds. -Average weight recorded for the month of February 2019 = 151 pounds. -Average weights recorded for March = 146.2 -Average weights recorded for April = 142 -Average weights recorded for May = 141	V 291		

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V 291	Continued From page 12 Review of March, April, May, and June 2019 Medication Administration Records (MAR) revealed: -March 2019: Ensure was given daily 17 days, given twice daily 8 days, and none administered on 6 days. -April 2019: Ensure was given daily 24 days, given twice daily 1 day, and none administered on 5 days. -May 2019: Ensure was given daily 5/1/19 - 5/3/19, 5/5/19, 5/6/19, and 5/18/19. No Ensure was documented on 5/4/19. Ensure was documented twice daily 5/7/19, 5/10/19, and 5/17/19. Ensure was documented 3 times on 5/16/19 and 4 times daily 5/8/19, 5/9/19, 5/11/19 - 5/16/19, 5/20/19 - 5/30/19. -New order dated 5/22/19 had been transcribed to the May 2019 MARs and the Ensure supplement was scheduled to be given at 8 am, 12 pm, 5 pm, and 8 pm. -June 2019: No documentation Ensure had been administered at 5 pm on 6/1/19 and 6/2/19. Interview on 6/4/19 the Qualified Professional stated: -They were alerted by client #2's psychiatric provider of his weight loss. -Client #2 saw his primary care physician about 1 month ago for the weight loss. -Client #2's Ensure had been changed from "as needed" to scheduled 4 times daily. -They had done "supervisions" with staff to make sure he was weighed daily and received his Ensure as scheduled.	V 291		