STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL023-203	A. BUILDING: ______ B. WING ______	R 05/30/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANN'S HOUSE	**423 MILSAP ROAD SHELBY, NC 28150**

(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 5/30/19. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1300 Residential Treatment for Children or Adolescents.	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 record review and interviews, the facility failed to hold disaster drills on each shift at least quarterly. The findings are: Review on 5/30/19 of fire and disaster drills from May 2018-April 2019 revealed: -No documentation of disaster drills conducted on 1st shift for February-April 2019. - No documentation of disaster drills conducted on 3rd shift for November 2018-January 2019.	V 114		

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V 114	Continued From page 1 Interview on 5/30/19 with the Executive Director/Qualified Professional revealed: -She created a tracking system for fire and disaster drills but she doesn't utilize it. -She let staff know when disaster drills needed to be run. This deficiency constitutes a recite 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, 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.	V 118		

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V 118	Continued From page 2 (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 observation, record review and interviews, the facility failed to follow the written order of a physician or keep the MARs current affecting 2 of 3 clients (Client #2 and #3). The findings are: Record review on 5/29/19 for Client #2 revealed: -Admission date of 6/24/18 with diagnosis of Oppositional Defiant Disorder. -Physician ordered medications included: --Concerta (ADHD) 36mg once daily ordered 3/8/19. --Risperidone (antipsychotic) 0.5mg once at bedtime ordered on 3/20/19. Review on 5/29/19 of MARs for February-May 2019 revealed: --Concerta was blank as not administered on 5/2/19 or 5/9/19. --Risperidone 0.5mg blank as not administered 5/19/19-6/1/19 with order dated 5/10/19 to "discontinue after EOGs" (end of grade testing) and begin 1mg once daily. --Risperidone 1mg was not administered at all. --Fluoxetine 20mg was initialed as administered once daily 2/21/19-3/31/19 without an order. --Amoxicillin 500mg was initialed as administered twice daily 3/11/19-3/16/19, 3/22/19 and 3/23/19 without an order. Record review on 5/29/19 for Client #3 revealed:	V 118		

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V 118	Continued From page 3	V 118		

-Admission date of 6/24/18 with diagnoses of Oppositional Defiant Disorder, Attention Deficit Hyperactivity Disorder (ADHD) and Marijuana Use Disorder.
-Physician ordered medications included:
--Ibuprofen 200mg 3 tabs every 6hrs as needed ordered 3/19/19 from Urgent Care for pain relief from fever.
Review on 5/29/19 of MARs for March-May 2019 revealed:
-No documentation of administration of Ibuprofen on the March MAR was made available.

Interview on 5/30/19 with Staff #1 revealed:
-She was the house manager and typically called in refills and kept medications in order.
-She administered medications according to doctors' orders.
-She followed instructions from urgent care after Client #3 was taken for flu like symptoms. She did not realize the instructions were not a doctor's order nor did she document the ibuprofen on the March MAR. She did not remember how much or how many days Client #3 received the ibuprofen.

Interview on 5/30/19 with Executive Director/Qualified Professional revealed:
-She was not aware Client #2 had run out of the 0.5mg dose of Risperidone before increasing the dose as ordered.
-Client #2 had come to the facility with Fluoxetine. She was not aware she did not have an order for it.
-She was not aware there was no order for Amoxicillin for Client #2.
-She was with Client #3 from 8am-2pm while he was home from school 3/19/19-3/22/19. She would have Staff #1 administer ibuprofen when she came in at 2pm.
-She and Staff #1 reviewed MARs and reordered

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V 118	Continued From page 4 medications. -She would need to pay closer attention to doctors orders. This deficiency constitutes a recite deficiency and must be corrected within 30 days.	V 118		