STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL041-994	A. BUILDING: _____ B. WING _____	06/13/2019

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QUALITY CARE III, LLC/HICKORY TREE HOME	4010 HICKORY TREE LANE GREENSBORO, NC 27406

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V 000	INITIAL COMMENTS An annual survey was completed on 6/13/2019. 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 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 reviews and interviews, the facility failed to conduct fire and disaster drills on each shift at least quarterly. The findings are: Review on 6/12/19 of the facility's fire and disaster drill for the period of 7/7/2018 - 6/3/2019 revealed: - Drills were a combination of "Fire/Severe Weather Drills". - July - September 2018: no fire and disaster	V 114		

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V 114	Continued From page 1	V 114		

drills on 3rd shift.
- October - December 2018: no fire and disaster drills on 1st or 3rd shift
- January - March 2019: no fire and disaster drills on 3rd shift.
- April - June 2019: no fire and disaster drills on 2nd shift.

Interview on 6/12/2019 with client #1 revealed:
- Fire drills had been conducted at the facility, but he could not recall whether other emergency drills had been conducted.

Interview on 6/12/2019 with client #2 revealed:
- Client #2's speech was very difficult to understand, he made occasional one-word, repetitive statements, and could not answer questions about fire or emergency drills.

Interview on 6/12/2019 at 4:30pm with client #3 revealed:
-Client #3 was minimally responsive during the interview and avoided eye contact by looking down and away during the interview.
-Client #3 reported that fire drills were conducted during the day and night.
-Client #3 did not know of any other kind of drills.

Interview on 6/13/2019 with staff #1 revealed:
- Staff #1 had not yet participated in any fire or emergency drills since his hire date of 5/9/2019;
- Staff #1 did know where the emergency exits were in the facility.

Interview on 6/13/2019 with the Qualified Professional (QP) on 6/13/2019 revealed:
- Fire and disaster/emergency drills were completed together at different times at least once monthly;
- Oversight of the fire and emergency drill

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V 114	Continued From page 2 schedule had been handled by the Owner/Director (O/D). Interview on 6/13/2019 with the O/O revealed: - Fire and disaster drills were conducted regularly at the facility.	V 114		
V 117	27G .0209 (B) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (b) Medication packaging and labeling: (1) Non-prescription drug containers not dispensed by a pharmacist shall retain the manufacturer's label with expiration dates clearly visible; (2) Prescription medications, whether purchased or obtained as samples, shall be dispensed in tamper-resistant packaging that will minimize the risk of accidental ingestion by children. Such packaging includes plastic or glass bottles/vials with tamper-resistant caps, or in the case of unit-of-use packaged drugs, a zip-lock plastic bag may be adequate; (3) The packaging label of each prescription drug dispensed must include the following: (A) the client's name; (B) the prescriber's name; (C) the current dispensing date; (D) clear directions for self-administration; (E) the name, strength, quantity, and expiration date of the prescribed drug; and (F) the name, address, and phone number of the pharmacy or dispensing location (e.g., mh/dd/sa center), and the name of the dispensing practitioner.	V 117		

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V 117	Continued From page 3 This Rule is not met as evidenced by: Based on observation, record review, and interviews the facility failed to ensure medications were not expired for 1 of 3 clients (#3). The findings are: Review on 6/13/2019 of Client #3's record revealed: -Admission date: 6/4/2018 -Diagnosis: Autism Disorder with accompanying intellectual impairment, moderate; Schizophrenia unspecified, Conduct Disorder, Gastroesophageal reflux disease (GERD); Allergic Rhinitis -Physician order dated 3/1/19 for Melatonin 5mg 1 tablet at bedtime. -Physician order dated 3/19/19 for Multivitamin Gummy 1 gummy daily. -Physician order dated 3/19/19 for Risperidone 3mg tablet daily as needed for outbursts, anger, and agitation. Observation at approximately 10:30AM on 6/13/2019 of Client #3's medications revealed: -1 bottle of Melatonin 5 mg tablets with an expiration date of 7/2018. -2 bottles of Multivitamin Gummies. 1 bottle had and expiration date of 11/2018. -1 bottle of Risperidone 3mg with an expiration date of 5/8/2019. Interview on 6/13/2019 with staff #1 revealed: - Staff #1 did not give out medications, and therefore could not provide information about expired medications.	V 117		

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V 117	Continued From page 4 Interview n 6/13/2019 with the Qualified Professional (QP) revealed: - The Owner/Director (O/D) was in charge of medication oversight. Interview on 6/13/2019 with the O/D revealed: - Client #3's expired multivitamin gummies had been purchased over-the-counter; - Some of client #3's expired medications may have been provided by client #3's parents; - The O/D would make sure that client #3's expired PRN Risperidone was replaced.	V 117		
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	V 118		

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V 118	Continued From page 5 (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 and interviews, the facility failed to ensure medications were administered as ordered and the MAR was kept current affecting 2 of 3 clients (#1 & #3). The findings are: Review on 6/13/2019 of client #1's record revealed: - Admission date: 2/17/2017 - Diagnoses: Traumatic Brain Injury; Dementia: High Blood Pressure; Hyperlipidemia; Onchomycosis, toenails (fungal infection); and Cerumen (earwax) impaction; - Physicians orders for the following medications: - Calcium citrate (vitamin D3) 1,000 milligrams (mg), one tablet ever day (QD), dated 4/3/2018, with an order to increase the dose to 2,000 mg QD dated 5/29/2019; - Hydroxyzine (Vistaril) 25 mg, 1 tablet three times a day (TID) as needed (PRN), dated 11/6/2018. Review on 6/13/2019 of client #1's MARs dated 3/1/2019 to 6/13/2019 revealed: - No documentation of the dosage increase for calcium citrate following the order change written on 5/29/2019; - Hydroxyzine administration instructions on the	V 118		

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V 118	Continued From page 6 March, May and June MARs noted that one tablet could be administered PRN, but did not indicate the frequency (TID) the medication could be administered; - Hydroxyzine was not listed on the April MAR; and - The spelling of hydroxyzine was truncated to "hydroxyz" on the May and June MARs. Review on 6/13/2019 of Client #3's record revealed: -Admission date: 6/4/2018 -Diagnosis: Autism Disorder with accompanying intellectual impairment, moderate; Schizophrenia -Physician orders dated 3/19/2019 for the following medications: -Fluoxetine 20mg 1 capsule daily. -Montelukast 10mg t tablet daily. - Omeprazole 40mg 1 capsule daily. -Latuda 120mg 1 tablet with food every evening. -Inositol 500mg 1 tablet at bedtime. -Olanzapine 20mg 1 tablet at bedtime. -Risperidone 3mg 1 tablet daily as needed for outbursts, anger, and agitation. -Multivitamin Gummy 1 gummy daily. - Melatonin 5mg 1 tablet at bedtime. -No physician orders preceding 3/18/19 were found. Review on 6/13/19 of Client #3's MAR revealed: -The following medications were administered 3/1/19-3/18/19 -Fluoxetine 20mg 1 capsule daily. -Montelukast 10mg t tablet daily. - Omeprazole 40mg 1 capsule daily. -Latuda 120mg 1 tablet with food every evening. -Inositol 500mg 1 tablet at bedtime. -Olanzapine 20mg 1 tablet at bedtime. -Multivitamin Gummy 1 gummy daily. -Melatonin 5mg 1 tablet at bedtime.	V 118		

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V 118	Continued From page 7 -Risperidone was administered 3/18/19. -Inositol 500mg was not listed on the June MAR. Interview on 6/12/2019 with client #1 revealed: - He did not know the names of his medications or what they were for. Interview on 6/12/2019 at 4:30pm with client #3 revealed: -Client #3 was minimally responsive during the interview and avoided eye contact by looking down and away during the interview. -He did not respond to questions about his medications. Interview on 6/13/2019 with the Qualified Professional (QP) revealed: - The Owner/Director (O/D) was responsible for oversight of the medications. Interview on 6/13/2019 with the O/D revealed: - The O/D was responsible for picking up medications and MARs from the pharmacy; - The O/D had not realized that client #1's doctor had written the order for the increased dose of calcium citrate when the O/D had taken client #1 to his appointment on 5/29/2019; - Client #1's doctor had not mentioned that the calcium citrate order was changed; - One of the facility staff probably wrote out the incomplete medication name and administration instructions for client #1's hydroxyzine; - The O/D had tried to obtain client #3's discontinuation orders for Inositol, but had not received them yet; - Client #3 had begun seeing a different doctor, who did not see the need for client #3 to continue taking the Inositol; - The facility did not have a discontinuation order	V 118		

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V 118	Continued From page 8 for client #3's Biotin.	V 118		
V 120	27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. This Rule is not met as evidenced by: Based on record review and observation, the facility failed to store internal and external medications separately affecting 1 of 3 clients (#2) the findings are: Review on 6/13/2019 of client #2's record revealed: - Admission date: 4/19/2016 - Diagnoses: Autism Spectrum Disorder; Moderate Intellectual Disabilities; and	V 120		

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V 120	Continued From page 9 Hypercholesterolemia; - A physician order for clotrimazole/betamet 1-0.005% topical cream, apply to affected area twice daily as needed (PRN), dated 3/7/2019; - Client #2 also had current medication orders for Abilify (aripiprazole) 15 milligrams (mg), one tablet every day (QD), and Prozac (fluoxetine) 20 mg, one tablet QD. Observation at approximately 10:25 AM on 6/13/2019 revealed: - Client #2's clotrimazole cream was stored with client #1's internal medications in a plastic box. Interview on Interview on 6/13/2019 with staff #1 revealed: - Staff #1 did not give out medications, and therefore could not provide information about medication storage. Interview n 6/13/2019 with the Qualified Professional (QP) revealed: - The Owner/Director (O/D) was in charge of medication oversight. Interview on 6/13/2019 with the O/D revealed: - The storage of client #2's internal and external medications together had been an oversight by the O/D and would be corrected immediately.	V 120		