


Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0411095	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/09/2019
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NAME OF PROVIDER OR SUPPLIER PALM HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 3212 PRESLEY WAY GREENSBORO, NC 27405
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 4/9/19. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults whose Primary Diagnosis is a Developmental Disability.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>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:</p> <p>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.</p>	V 114	<p>On 4/15/2019 during staff monthly meeting AP and Owner Traci Martin went over the standard for fire and disaster drills. Staff were refreshed about the expectation on quarterly disaster drills. We also discussed that one drill need to be done for each shift during the quarter..</p> <p>During the meeting JMJ reminded the staff of our expectation that one fire drill need to done on different shifts each week and that disaster drills needs to be done once per month on each shift. During the meeting the owner also went over what hours make up 1,2 and 3rd shift. We also went over the correct way to fill out the fire and disaster form.</p> <p>At the beginning over every month the AP/QP will write on the calendar the days and shifts the fire and disaster drill are to be done. AP//QP will check on a monthly basis to make sure that drills are done and are recorded.</p> <p>Starting 4/17/2019 the AP/QP have reorganize the paperwork and have a designated place is it should be kept. This is done so that any staff filling in would know where important paperwork will be. Notebooks were completed by 05/01/2019</p>	<p>04/14/2019</p> <p>04/17/2019</p>

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Traci Martin

owner/Director

06/01/2019

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V 114	<p>Continued From page 1</p> <p>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.</p> <p>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)."</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>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,</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>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:</p> <p>(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.</p> <p>(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.</p> <p>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:</p> <p>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.</p> <p>Review on 4/9/19 of client #2's MAR's for the</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>months of March and April 2019 revealed Benzaclin had been administered daily.</p> <p>Observation on 4/9/19 of medications on hand revealed 1 container of Benzaclin that had expired on 3/19/19.</p> <p>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.</p> <p>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.</p> <p>Observation on 4/9/19 of medications on hand revealed 1 container of Clindamycin Phosphate that had expired on 2/28/19.</p> <p>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.</p> <p>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.</p>	V 118	<p>Owner contacted the PCP on 4/10/2019 and made an appt for the two clients prescription where out of date. Owner informed the doctor that PA that prescribed the medication was no longer working and that the medication had expired. The doctor discounted the medication for one client and refilled it for the other.</p> <p>During the staff meeting on 4/14/2019 we revisited checking expiration dates on the medication every-time that it is given.</p> <p>The AP/QP is responsible for checking expiration date of medication and reporting it to the doctor or pharmacy during their weekly medication audits</p> <p>Owner Traci Martin told staff to take all expired medication out of the med box and leave it in a separate locked container so that the AP/QP could pick-it up and take it to the pharmacy so that they could dispose of it properly</p>	04/14/2019