

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601393</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/07/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MONTEITH JOHNSON HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>616 PECANWOOD ROAD CHARLOTTE, NC 28214</b>
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(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	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 8/7/19. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Alternative Family Living</p>	V 000		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(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>	V 118		

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

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V 118	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that all medications had a signed physician's order, affecting 1 of 3 clients (Client #1). The findings are:</p> <p>Observation on 8/7/19 of Client #1's medications revealed: - Lithium Carbonate 300mg, 1 tablet by mouth twice daily - Zyprexa 10mg, 1 tablet by mouth twice daily - Trazodone 100mg, 1 tablet by mouth at bedtime as needed</p> <p>Review on 8/7/19 of Client #1's MAR revealed: - Lithium Carbonate 300mg, 1 tablet by mouth twice daily - Zyprexa 10mg, 1 tablet by mouth twice daily - Trazodone 100mg, 1 tablet by mouth at bedtime as needed</p> <p>Review on 8/7/19 of Client #1's record revealed: - No physician's order for Lithium Carbonate 300mg - No physician's order for Zyprexa 10mg - No physician's order for Trazodone 100mg</p> <p>Interview on 8/7/19 with the AFL Provider revealed: - He did not know why the orders wasn't in the book</p>	V 118		