

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-964	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/15/2019
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NAME OF PROVIDER OR SUPPLIER LORD BERKLEY HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 116 LORD BERKLEY ROAD RALEIGH, NC 27610
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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 08/15/19. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</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		

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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 interviews, 1 of 3 staff completing paperwork for the physician to sign failed to demonstrate competency (Lead Staff). The findings are:</p> <p>Review on 08/15/19 of the facility's record for the Lead Staff revealed: -Hired: prior to December 2018 -Medication Administration Training completed prior to December 2018</p> <p>Review on 08/14/19 of client #1's record revealed: -Admitted: prior to December 2018 -Diagnoses: Moderate Intellectual Developmental Disability and Down Syndrome -Prescription dated January 2019 listed Synthroid 175 mg every other day and 150 mg on alternative day (used to treat hypothyroidism) -May-August 2019 MARs reflect Synthroid administered alternating 175mg and 150 mg tablets every other day</p> <p>Review on 08/14/19 of the facility's Healthcare Consultation for client #1 dated 07/09/19 and 08/13/19 listed: -Synthroid 175 mg and 150 mg daily -This form was signed by the physician</p> <p>During interview on 08/14/19, Lead Staff reported: -Group home staff completed the medication list including dosage and frequency on the facility's Healthcare Consultation form -She completed the 07/09/19 and 08/13/19</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Healthcare Consultation Form for client #1 -Prior to interview, she was not aware of the error with Synthroid on the Healthcare Consultation Form</p> <p>During interview on 08/14/19, the Nurse at the Physician's Office reported: -The correct physician's order for client #1's Synthroid medication is to alternate 175 mg and 150 mg every other day -When the physician signed the Healthcare Consultation Form, normally, the medications written by the staff were not reviewed for accuracy. -The physician signed the document to note changes in medications or plan of actions. -She would follow up with the physician to develop a plan moving forward.</p> <p>During interview on 08/15/19, the Qualified Professional reported: -Staff should document the medications on the Healthcare Consultation Form as prescribed by the physician -She would reiterate with the staff that the Healthcare Consultation Form was a physician's order</p>	V 118		