STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL092-859	A. BUILDING: _____ B. WING _____	08/29/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DESTINY FAMILY CARE HOME 2	1238 FAIRLANE ROAD CARY, NC 27511

(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 8/29/19. Deficiencies were cited. The facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living For Developmental Disability Adult.	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 conduct fire and disaster drills on each shift at least quarterly. The findings are: Review on 8/27/19 of the facility 's fire and disaster drills record revealed: -No documentation of fire or disaster drills conducted 7/10/18-8/27/19. Interview on 8/27/19 with Staff #1 revealed:	V 114		

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V 114	Continued From page 1 -She was the full-time live in staff. -Employed as of 2/1/19. -She was not aware fire and disaster drills had to be conducted on each shift at least quarterly. -"No one ever told me I had to do drills." -The Licensee may have been doing them when she worked. -If there was a storm, "I would jump into my shower." -If there was a fire, "I would get the clients out the front door, out of the house." Interview on 8/27/19 with Qualified Professional (QP) revealed: -She was not aware of where the fire and disaster drills were documented. -She reported they should be conducted each shift at least quarterly. -Will follow up with the Licensee to verify if these drills had been conducted. During interview on 8/27/19 clients #1, #2, #3 and #4 all stated: -They had not completed fire drills in the last few months. -They would go out the front door if there was a fire and go to the street. -They would go in their bathroom during a storm. -Had practiced what to do for drills a long time ago and at other homes they lived in.	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	V 118		

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V 118	Continued From page 2 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. (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, interview and record review, the facility failed to ensure medications were not present for one of three audited clients. The findings are: Review on 8/27/19 of client #3's record revealed: - admission date 10/10/12 - diagnoses of Mild Mental Retardation and Anxiety Disorder.	V 118		

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V 118	Continued From page 3 Review on 8/27/19 client #3's physician order dated 7/26/19 revealed: -Xanax .25 milligram(mg) to be administered one tablet by mouth at bedtime as needed (used to treat anxiety and panic disorder). -Abilify 2mg to be administered one tablet by mouth every day as needed (used to treat symptoms of psychotic conditions). Review on 8/27/19 of client #3's MAR for July 2019 revealed: -Xanax .25mg was given on 7/21/19, 7/24/19, 7/26/19, 7/30/19. -Abilify 2mg had no documentation to reflect medication was administered. -MAR for August 2019 had no documentation to reflect the Xanax .25mg and Abilify 2mg medications were administered. Observation on 8/27/19 at 10:15am of client #3's medication revealed Xanax .25mg and Abilify 2mg were not present. During an interview on 8/27/19, staff #1 stated: -She had not seen client #3's medications since being on her seven-day rotation. -She worked two weeks on and two weeks off. During an interview on 8/27/19, the Qualified Professional (QP) stated: - the Xanax .25mg and Abilify 2mg medications should be present in the home. -She contacted the pharmacy and they had delivered eight pills the first week of August 2019. -Completed medication checks in the home two weeks ago and they were present at the time. -Staff or Licensee may have stored the new order in a different location in the home that she is not aware of. -Will follow up with the Licensee and other staff	V 118		

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V 118	Continued From page 4 who worked in the home. -The pharmacy is going to deliver a new order as soon as possible.	V 118		