STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL067-052	A. BUILDING: _____ B. WING _____	R 10/03/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GREENBRIAR-J	211 GREENBRIAR DRIVE JACKSONVILLE, NC 28540

(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 October 3, 2019. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
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 (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.	V 118		

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V 118	Continued From page 1	V 118		

This Rule is not met as evidenced by:
Based on record reviews, observation, and interviews, the facility failed to keep the MARs current affecting two of three current clients (#1 and #2). The findings are:

Finding #1:
Review on 10/03/19 of client #1's record revealed:
- 48-year old male.
- Admission date of 3/21/00.
- Diagnoses of Schizophrenia, Post-Traumatic Stress Disorder, Intellectual Disability (Moderate), Sleep-Wake Disorder, Depressive Disorder, and Intermittent Explosive Disorder.

Review on 10/03/19 of physician orders for client #1 dated 5/06/19 and 5/23/19 revealed:
5/06/19
- Combigan Solution 0.2%/0.5% (treats elevated intraocular pressure) - 1 drop in each eye twice daily.

5/23/19
- Urea Cream 20/40% (treats dry skin) - Apply to affected area twice daily.

Review on 10/03/19 of client #1's July 2019 through September 2019 MARs revealed the following blanks:
- Combigan Solution 0.2%/0.5% - 9/30/19 at 8:00pm.
- Urea Cream 20/40%- 7/16/19, 8/09/19, and 8/29/19.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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V 118	Continued From page 2 Interview on 10/03/19 client #1 stated: - He received his medications as ordered. Finding #2: Review on 10/03/19 of client #2's record revealed: - 51-year old male. - Admission date of 12/01/06. - Diagnoses of Intellectual Disability (Moderate), Intermittent Explosive Disorder, Hypothyroidism, Diabetes (II), and Microcephaly. Review on 10/03/19 of physician orders for client #2 dated 9/18/19 revealed: - Zocor (treats high cholesterol) 10 milligrams (mg) - 1 tablet daily. Review on 10/03/19 of client #2's July 2019 through September 2019 MARs revealed the following blanks. - Zocor 10mg - 7/30/19 at 8pm. Interview on 10/03/19 client #2 stated: - He received his medications as ordered. Due to the failure to accurately document medication administration it could not be determined if client #1 and client #2 received their medications as ordered by the physician.	V 118		