

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-404	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 11/07/2019
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NAME OF PROVIDER OR SUPPLIER DON'S ADULT CARE GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1925 APEX HIGHWAY DURHAM, NC 27707
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on November 7, 2019. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</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 observation, record reviews and interview, the facility failed to follow the physician's orders for one of three clients (#1) and failed to ensure a client had a self administration order for medication affecting one of three clients (#2). The findings are:</p> <p>1. The following is evidence the facility failed to follow the physician's order.</p> <p>Review on 11/7/19 of client #1's record revealed: -Admission date of 10/20/09. -Diagnoses of Schizophrenia-Paranoid Type, Hypertension and Anoxic Encephalopathy. -Physician's order dated 6/13/19 for Vitamin B-1 100 mg, one tablet daily. -November 2019 MAR indicated client #1 was administered the Vitamin B-1 100 mg daily.</p> <p>Observation on 11/7/19 at approximately 11:58 AM of the medication area for client #1 revealed: -All the prescribed medications for client #1 were packaged in pill packs. -The medications were dispensed from the pharmacy on 10/14/19. -The Vitamin B-1 100 mg medication was not in the one of the pill packs.</p> <p>Interview with staff #1 on 11/7/19 revealed: -He did not realize client #1's Vitamin B-1 100 mg medication was not in the pill pack. -He did normally check the medication to ensure they received all medications from the pharmacy. -He confirmed staff failed to follow the physician's</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>orders for client #1.</p> <p>2. The following is evidence the facility failed to ensure a client had a self administration order for medication.</p> <p>Review on 11/7/19 of client #2's record revealed: -Admission date of 7/2/18. -Diagnoses of Schizophrenia, Cannabis Use Disorder, Cocaine Use Disorder and Alcohol Use Disorder. -Physician's order dated 6/26/19 for Ventolin HFA, inhale two puffs into lungs every six hours as needed. -There was no order for client #2 to self administer the Ventolin HFA inhaler.</p> <p>Observation on 11/7/19 at approximately 11:40 AM of the medication area for client #2 revealed: -The Ventolin HFA inhaler was missing from his medication drawer.</p> <p>Interview with staff #1 on 11/7/19 revealed: -Client #2 did have the Ventolin HFA inhaler. -The Ventolin HFA inhaler was not in client #2's medication drawer. -Client #2 would normally take the Ventolin HFA inhaler to his day program. -He confirmed there was no order for client #2 to self administer medication.</p>	V 118		
V 121	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (f) Medication review: (1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug</p>	V 121		

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V 121	<p>Continued From page 3</p> <p>regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to obtain drug reviews every six months for one of three clients (#2) who received psychotropic drugs. The findings are:</p> <p>Review on 11/7/19 of client #2's record revealed: -Admission date of 7/2/18. -Diagnoses of Schizophrenia, Cannabis Use Disorder, Cocaine Use Disorder and Alcohol Use Disorder. -Physician's order dated 6/26/19 for Trazodone HCL 100 mg, two tablets daily and Haloperidol Decanoate 100mg/ml, inject intramuscularly every month. -The November 2019 MAR revealed client #2 was administered the above medications. -There was a six months psychotropic drug review for client #2 dated 9/27/18. -There was no evidence of a current six months psychotropic drug review for client #2.</p> <p>Interview with staff #1 on 11/7/19 revealed: -Clients' #1 and #3 received there medications from the same pharmacy. -Client #2 received his medications from another local pharmacy. -Client #2's pharmacy had not completed his</p>	V 121		

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V 121	Continued From page 4 psychotropic drug review for 2019. -He confirmed the six months psychotropic drug review for client #2 was not completed.	V 121		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure facility grounds were maintained in a safe, clean, attractive, orderly manner and kept free from offensive odor. The findings are: Observation on 11/7/19 at approximately 10:10 AM of the facility revealed the following issues: -Bathroom #1-The shower curtain was torn. The door was peeling. There was a hole in the wall about the size of an orange. -Staff's bedroom area-There were two holes in the wall. One hole was about the size of a large cantaloupe melon and the other was about the size of a medium watermelon. There were black marks on the wall. -Bathroom #2-There was a urine odor. The shower curtain had paint on it and the fabric was pulling. The toilet bowl, tank and tank cover was cracked. -Kitchen area-The stove door, door handle and knobs had a grease build up and food debris. The refrigerator had food debris on it. The dining table	V 736		

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V 736	<p>Continued From page 5</p> <p>was sticky. One the dining chairs had a broken arm. The dish drying rack on the counter had food debris on it.</p> <p>-Clients' #1 and #3 bedroom-There was a build up of dust on the baseboards. There was a putty like substance on the wall. There were nail holes in the wall. The dresser was peeling on top. Client #1 comforter was dingy, faded and torn. The vent on the ceiling was loose. The paint was peeling on the ceiling.</p> <p>-Client #2's bedroom-There was a set of broken blinds and television had a build up of dust on top.</p> <p>-Walls throughout the group home had grease and dirt stains on them.</p> <p>-Carpet throughout the group home had faded spots on it.</p> <p>Interview with staff #1 on 11/7/19 revealed:</p> <p>-Management was aware of the majority of the issues with the home.</p> <p>-He confirmed the facility was not maintained in a safe, clean, attractive, orderly manner and kept free of offensive odor.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		