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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-091	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 10/18/2019
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NAME OF PROVIDER OR SUPPLIER NANTUCKET	STREET ADDRESS, CITY, STATE, ZIP CODE 109 LINDSEY DRIVE JACKSONVILLE, NC 28540
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on October 18, 2019. Deficiencies were 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 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings are:</p> <p>Review on 10/18/19 of facility records from 10/1/18 - 9/30/19 revealed:</p> <ul style="list-style-type: none"> - 1st quarter (10/01/18- 12/31/18): No fire drills documented on the 3rd shift. - 1st quarter (10/01/18- 12/31/18): No disaster 	V 114	<p>Disaster Drills</p> <p>1. As evidenced from the review on 10/18/2019, it was determined that Nantucket Residential did fail to hold safety drills at least quarterly for each shift. After meeting with Manager of facility, the following steps have been implemented as of 11/3/2019:</p> <ul style="list-style-type: none"> a. The current scheduled calendar has been retrained and developed to follow; to ensure that all drills are held at least quarterly for each shift. b. The Program manager will review the safety drills monthly to ensure that drills are being conducted as scheduled. Program Manager will continue and follow up with discussing safety drills in monthly staff meetings. c. The manuals quarterly will be reviewed managers meetings as planned with QP and Vice President. <p>Program Manager will be responsible for ensuring that all staff follow the calendar plan and chart out drills as designed.</p> <p style="text-align: center;">DHSR-Mental Health</p> <p style="text-align: center; color: red;">NOV 19 2019</p> <p style="text-align: center;">Lic. & Cert. Section</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Cecilia Wilson* TITLE: *Vice President* (X6) DATE: *11-6-2019*

STATE FORM 6899 TGPQ11 If continuation sheet 1 of 5

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V 114	Continued From page 1 drills documented on the 3rd shift. - 2nd quarter (1/01/19- 3/30/19): No fire drills documented on the 1st shift. Interview on 10/18/19 the Group Home Manager stated: - 1st shift was 7:00am- 3pm. - 2nd shift was 3pm- 11pm. - 3rd shift was 11pm- 7am.	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 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	V 118		

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V 118	<p>Continued From page 2</p> <p>checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to keep the MARs current affecting two of three current clients (#1 and #2). The findings are:</p> <p>Finding #1: Review on 10/17/19 of client #1's record revealed: - 47-year old female. - Admission date of 12/31/06. - Diagnoses of Intellectual Disability (Moderate) and Epilepsy.</p> <p>Review on 10/17/19 of client #1's signed FL-2 form dated 6/17/19 revealed the following medication orders: - Zyrtec (treats allergies) 10 milligrams (mg) - 1 tablet daily. - Monodox (treats bacterial infections) 100mg - 1 tablet daily. - Flomax (treats bladder blockages) 0.4mg - 1 capsule daily. - Jolessa (prevents pregnancy) 30 micrograms (mcg) - 0.15mg - 1 tablet daily. - Onfi (treats seizures) 10mg - 1 tablet twice daily. - Carnitor (treats carnitine deficiency) 330mg - 1 tablet twice daily. - Keppra (treats seizures) 1000mg - 2 tablets twice daily. - Phenobarbital (treats seizures) 60mg - 2 tabs in the evening.</p>	V 118	<p>Y 118</p> <p>Medication requirements</p> <p>Action Plan: At any time, a medication is administered it is to be documented with initials on the MAR.</p> <p>Each Employee received a coaching and counseling on the importance of following the guidelines as written in policy and procedure.</p> <ul style="list-style-type: none"> • Program Manager will review MARs daily when scheduled to work (M-F) • All staff will attend another medication class. • Each on coming shift will review the MAR sheet along with count of medications handover. • Program Manager will review all shifts exchange information weekly. • Program Manager provided a coaching and counseling to the employees whom did not document properly and will from this point on provide Disciplinary action to employees who do not adhere to the policies as written and training that has been provided. • At any time, a client missing a dose of medication and incident report will be filed. • It was evident the medication was given based on the count, but not documented on the MAR. <p>This information will be shared with QP during Managers Meetings.</p>	

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V 118	<p>Continued From page 3</p> <ul style="list-style-type: none"> - Ivermectin Cream (treats rosacea) 1% - Apply to affected area on face daily. - Calcium D 600-400 (treats calcium D deficiency) - 1 tablet twice daily. <p>Review on 10/17/19 of client #1's July 2019 - October 2019 MARs revealed the following blanks:</p> <ul style="list-style-type: none"> - Zyrtec 10mg - 8/18/19 and 8/19/19 at 8am. - Monodox 100mg - 8/19/19 - 8/20/19 and 9/22/19 at 8am. - Flomax 0.4mg - 8/19/19 at 8am. - Jolessa 30mcg / 0.15mg - 7/19/19, 8/17/19 - 8/20/19 at 8am. - Onfi 10mg - 7/30/19-7/31/19 at 8am. - Onfi 10mg - 7/09/19 and 7/28/19 at 8pm. - Carnitor 330mg - 9/01/19 and 9/02/19 at 8pm. - Carnitor 330mg - 7/26/19 (no specified time). - Keppra 1000mg - 7/09/19 at 8pm. - Phenobarbital 60mg - 9/15/19, 9/18/19, and 9/26/19 at 8pm. - Ivermectin Cream 1% - 9/05/19, 9/08/19, 9/09/19, and 9/20/19 at 8am. - Calcium D 600-400 - 9/01/19 and 9/02/19 at 8pm. <p>Unable to interview client #1 due to limitations in verbal ability.</p> <p>Finding #2: Review on 10/17/19 of client #2's record revealed:</p> <ul style="list-style-type: none"> - 51-year old female. - Admission date of 7/03/08. - Diagnoses of Intellectual Disability (Profound) and Cerebral Palsy. <p>Review on 10/17/19 of physician orders for client #2 dated 10/03/19 revealed:</p> <ul style="list-style-type: none"> - Lubiprostone (treats irritable bowel syndrome) 	V 118		

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V 118	<p>Continued From page 4</p> <p>24mcg - 1 capsule twice daily. - Desyrel (treats depression) 300mg - 1 tablet in the evening.</p> <p>Review on 10/17/19 of client #1's July 2019 - October 2019 MARs revealed the following blanks: - Lubiprostone 24mcg - 8/07/19 at 8am. - Desyrel 300mg - 8/31/19 at 8pm.</p> <p>Unable to interview client #2 due to limitations in verbal ability.</p> <p>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.</p> <p>[This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.]</p>	V 118		