

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL026-723</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/05/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SHARPER IMAGES</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1700 BRIDGER STREET FAYETTEVILLE, NC 28301</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on December 5, 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 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></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 reviews, observations, and interviews, the facility failed to administer medications as ordered by the physician and maintain current MARs affecting 1 of 3 clients audited (client #2). The findings are:</p> <p>Review on 12/5/19 of client #2's record revealed: -66 year old male admitted 11/30/09. -Diagnoses included schizophrenia, paranoid type; dementia, not otherwise specified; mild mental retardation; coronary artery disease; hypertension; thype 2 diabetes; peripheral vascular disease; polyosteoarthritis, unspecified. -Physician order dated 9/10/19 for Lasix 20 mg daily. (reduce extra fluid in the body (edema) caused by conditions such as heart failure, liver disease, and kidney disease) -No order on chart for Lasix 40 mg daily. No discontinue orders for Lasix in the clients record. -Physician orders dated 1/15/19 for medications scheduled to be administered at 8 am daily were as follows:     -Amlodipine 10 mg daily (lowers blood pressure)     -Aspirin 81 mg (prevent a heart attack or a stroke)     -Pioglitazone 15 mg daily (control blood sugar in patients with type 2 diabetes)     -Hydroxyzine 25 mg twice daily (anxiety disorders and allergic conditions)     -Lisinopril 40 mg twice daily (lowers blood pressure)     -Metformin 500 mg twice daily (control high blood sugar)</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>-Risperdal 4 mg twice daily (mental/mood disorders i.e.schizophrenia and bipolar disorder)</p> <p>Review on 12/5/19 of client #2's MARs for September, October, November, and December 2019 revealed:</p> <p>-Lasix 40 mg daily was printed on the September and October 2019 MARs for administration at 7 am.</p> <p>-Lasix 20 mg daily was printed on the November, and December MARs for administration at 7 am.</p> <p>-The Lasix entries had been crossed off the MARs from September through December 2019.</p> <p>-No Lasix had been documented as administered in September, October, November, or December 2019.</p> <p>-The 7 medications listed above, ordered 1/15/19 and scheduled at 8 am, had been printed on the September, October, November, and December 2019 MARs and documented as administered daily.</p> <p>Observations on 12/5/19 of client #2's medications on hand at 2:36 pm revealed:</p> <p>-Medications were packaged in a bubble pack with all tablets in one bubble for each dosing time. There were 4 "bubbles" labled to be administered "morning, noon, evening, bedtime."</p> <p>-There were 8 tablets packaged in the bubble pack for the morning dose.</p> <p>Interview on 12/5/19 Staff #1 stated:</p> <p>-She was the "live in" staff for the facility and administered medications.</p> <p>-Client #2 should only be receiving the 7 medications documented as administered on the MARs (Amlodipine 10 mg; Aspirin 81 mg; Pioglitazone 15 mg; Hydroxyzine 25 mg; Lisinopril 40 mg; Metformin 500 mg; Risperdal 4 mg)</p> <p>-She had not noticed there were 8 tablets in the</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>morning bubble pack. She had administered all of the tablets in the bubble pack.</p> <p>Phone interview on 12/5/19 Pharmacy staff stated: -The pharmacy had packaged and dispensed Lasix 40 mg with the morning medications from January through October, 2019 for client #2. -The pharmacy had packaged and dispensed Lasix 20 mg in the morning medications from November through December, 2019 for client #2.</p> <p>Interview on 12/5/19 the Licensee stated: -She had not been pleased with the current pharmacy. -She was looking for other options for the clients.</p> <p>Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician.</p>	V 118		
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician</p>	V 120		

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V 120	<p>Continued From page 4</p> <p>for a client to self-medicate.</p> <p>(2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to store medications separately for each client affecting 4 of 6 current clients (clients #2, #3, #4, #6). The findings are:</p> <p>Observations on 12/5/19 at approximately 1:30 pm of medications on hand revealed Clients #2, #3, #4, and #6 had their medications packaged in bubble packs stored together in one plastic container.</p> <p>Interview on 12/5/19 Staff #1 stated she was not aware the medications had to be stored separately.</p>	V 120		
V 291	<p>27G .5603 Supervised Living - Operations</p> <p>10A NCAC 27G .5603 OPERATIONS</p> <p>(a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity.</p> <p>(b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management.</p>	V 291		

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V 291	<p>Continued From page 5</p> <p>(c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals.</p> <p>(d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to maintain coordination between the facility operator and the others responsible for the client's treatment, affecting 2 of 3 clients audited (clients #1 and #2). The findings are:</p> <p>Review on 12/5/19 of client #2's record revealed: -66 year old male admitted 11/30/09. -Diagnoses included schizophrenia, paranoid type; dementia, not otherwise specified; mild mental retardation; coronary artery disease; hypertension; type 2 diabetes; peripheral vascular disease; polyosteoarthritis, unspecified. -7/29/19 ophthalmologist appointment for "blurry vision." Physician documented he discussed blurry vision due to cataracts and "educated" client #2 that he should get glasses to see if it improved his vision, and if not to consider</p>	V 291		

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V 291	<p>Continued From page 6</p> <p>cataract surgery. -Order dated finger stick blood sugar (BS) testing 3 times daily.</p> <p>Review on 12/5/19 of client #1's record revealed: -45 year old male admitted 5/22/09. -Diagnoses included chronic schizophrenia, unspecified intellectual disorder, diabetes, hypertension, hypercholesterolemia. -Order for finger stick blood sugar testing 3 times daily.</p> <p>Interview on 12/5/19 Staff #1 stated: -Client #2's appointment on 7/29/19 was for a diabetic eye exam. -Client #2 was not taken for a vision exam or for glasses. She thought it was because there was no payer source. -Client #2 had not gotten glasses after his 7/29/19 appointment to see if this could help with his blurry vision. -Clients #1 and #2 performed their own BS testing and the staff recorded the results. -There were no physician orders to identify parameters/guidelines for monitoring BS ranges/results that would require action. -She would look for a policy for BS monitoring and, if one was in place, send to the surveyor by facsimile.</p> <p>There were no policy or guidelines for monitoring BS results received by facsimile as of 12/9/19.</p>	V 291		