

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL023-161	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/02/2020
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NAME OF PROVIDER OR SUPPLIER CARING WAY 118	STREET ADDRESS, CITY, STATE, ZIP CODE 118 CARING WAY SHELBY, NC 28150
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(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	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 1/2/20. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Individuals of all Disability Groups/Intellectual Developmental Disability.</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</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>with a physician.</p> <p>This Rule is not met as evidenced by: Based on observation, interview, and record review the facility failed to keep the MAR current and ensure prescription drugs were administered as ordered by the physician for 2 of 3 audited clients (#1, #2). The findings are:</p> <p>Observation on 1/2/20 at 9:35am of the medications for Client #1 included: -Prednisone AC 1% eye drops 2 times daily.</p> <p>Review on 12/31/19 and 1/2/20 of the record for Client #1 revealed: -Admission date of 5/30/14 with diagnoses of Schizophrenia-paranoid type, Mild Intellectual Developmental Disability, Hypertension, Hyperlipidemia and Gastro Esophageal Reflux Disease. -Physician order dated 12/2/19 decrease Prednisone AC 1% eye drops to once daily.</p> <p>Review on 12/31/19 and 1/2/20 of the October, November and December 2019 MAR for Client #1 revealed: -Prednisone AC 1% eye drops administered 2 times daily 12/3/19-12/31/19.</p> <p>Observation on 1/2/20 at 9:50am of the medications for Client #2 included: -Ketoconazole 2% shampoo 2 times weekly.</p> <p>Review on 12/31/19 and 1/2/20 of the record for Client #2 revealed: -Admission on 7/1/14 with diagnoses of Moderate</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Intellectual Developmental Disability, Autism, Hypothyroidism, Hypertension, Obesity and Hyperlipidemia. -Physician order dated 10/11/19 for Ketoconazole 2% Shampoo 2 times weekly.</p> <p>Review on 12/31/19 and 1/2/20 of the October, November and December 2019 MAR for Client #2 revealed: -Ketoconazole 2% Shampoo not documented on 12/2/19, 12/10/19 and 12/19/19, shampoo was administered 1 time each week.</p> <p>Interview on 12/31/19 with Client #1 and Client #2 revealed: -They received medications. -Client #2 used his shampoo.</p> <p>Interview on 1/2/20 with the Group Home Manager revealed: -She was not aware the eye drops for Client #1 were changed. -Staff failed to document the shampoo. -She was responsible for oversight of medications, however if she was off it was the responsibility of staff on shift to ensure changes were made. -The day program staff would usually take clients to medical appointments and they should communicate any changes. -The Qualified Professional would review the MAR at the end of the month.</p>	V 118		