

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/28/2021  
FORM APPROVED  
OMB NO. 0938-0391

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                 |  | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>34G192</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br><br>B. WING _____  |                      | (X3) DATE SURVEY COMPLETED<br><br><b>04/14/2021</b> |
|--|--|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>FORSYTH GROUP HOME #2</b> |  |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>8460 BELEWS CREEK ROAD<br/>BELEWS CREEK, NC 27009</b>               |                      |   |
| (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) COMPLETION DATE |   |
| W 368  | <p><b>DRUG ADMINISTRATION</b><br/>CFR(s): 483.460(k)(1)</p> <p>The system for drug administration must assure that all drugs are administered in compliance with the physician's orders.</p> <p>This STANDARD is not met as evidenced by:<br/>Based on observations, record review and interview, the system for drug administration failed to assure all drugs were administered according to physician's orders for 2 of 6 clients (#1, #6). The finding is:</p> <p>Observations in the group home on 4/14/21 at 7:05 AM revealed client #1 to enter the medication room with staff to prepare for his medication administration. Continued observations revealed client #1 to receive the following medications: Levothyroxine 125mcg, vitamin D3 2000IU, B12 100 mcg, Loratidine 10 mg, Aspirin 81 mg, Fluticasone 50 mcg and anti-fungal foot spray. Further observations at 7:15 AM revealed client #1 to exit the medication room and sit at the dining table and immediately participate in the breakfast meal. Observations at 7:40 AM revealed client #1 to place his dishes in the kitchen sink and transition to the next activity. At no point during the breakfast meal was client #1 prompted to wait 30 minutes after his medication administration.</p> <p>Subsequent observations in the group home on 4/14/21 at 7:15 AM revealed client #6 to enter the medication room with staff to prepare for his medication administration. Continued observations revealed client #6 to receive the following medications: Levothyroxine 50 mcg, Lactulose 15ml, Benzotropine 1 mg, Divalproex</p> | W 368   |   |                      |   |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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| W 368  | <p>Continued From page 1</p> <p>250 mg, Propranolol 80 mg and Vitamin D3 2000 IU. Further observations at 7:30 AM revealed client #6 to exit the medication room and to sit at the dining table and immediately participate in the breakfast meal. At no point during the breakfast meal was client #6 prompted to wait 30 minutes after his medication administration.</p> <p>Review of the record for client #1 on 4/14/21 revealed a person-centered plan (PCP) dated 6/18/20. Further review of the record revealed a physician's order dated 1/25/21 which indicates that client #1 should have his medications dispensed at 7:00 AM. Continued review of the physician's order revealed that client #1 should take his Levothyroxine on an empty stomach by mouth daily and wait 30 minutes before a meal.</p> <p>Subsequent review of the record for client #6 on 4/14/21 revealed a person-centered plan (PCP) dated 3/25/20. Further review of the record revealed a physician's order dated 1/25/21 which indicates that client #6 should have his medications dispensed at 7:00 AM. Continued review of the physician's order revealed that client #6 should take his Levothyroxine on an empty stomach by mouth daily and wait 30 minutes before a meal.</p> <p>Interview with the facility nurse and interim qualified intellectual disabilities professional (QIDP) on 4/14/21 verified that clients #1 and #6 should have had their Levothyroxine medications on an empty stomach and staff should have waited 30 minutes prior to allowing clients to participate in the breakfast meal. The facility nurse and QIDP also verified that client #1's and #6's physician's orders are current. The facility nurse and QIDP confirmed that client #1 and #6</p> | W 368   |   |                      |   |

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| W 368  | Continued From page 2<br>should receive all of their medications as prescribed.  | W 368   |   |                      |   |