

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL036-328	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/11/2021
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NAME OF PROVIDER OR SUPPLIER BUCKINGHAM	STREET ADDRESS, CITY, STATE, ZIP CODE 5036 BROAD LEAF COURT DALLAS, NC 28034
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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 8-11-21. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G 5600C Supervised Living for Adults Whose Primary Diagnosis is a Developmental Disability.</p>	V 000		
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 for a client to self-medicate. (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 record review, observation and interview the facility failed to ensure that all</p>	V 120		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 120	<p>Continued From page 1</p> <p>medications were stored in a securely locked locked cabinet. The findings are:</p> <p>Observation on 8-10-21 at approximately 2:30 revealed:</p> <ul style="list-style-type: none"> -Large bin in kitchen pantry. Both the pantry and the bin were unlocked. -Bin contained medications including: Client #1's medications; Oxcarbazepine 300 Atorvastatin 40 mg, Symbicort 2 puffs 2x, Fycompa 4 mg, Divalproex 250 mg, and 500mg Briviact 100 mg., Onfi 10 mg Banzel 400, Cetrazine 10 mg Client #2; Januvia 25 mg, Lisinopril 10 mg, Cetrazine 10 mg, MetFormin, Mucinex Client #3; Clonazepam .25 mg, Fycompa, Trimethoprim. <p>Interview on 8-10-21 and 8-11-21 with the facility manager revealed:</p> <ul style="list-style-type: none"> -Medications was her responsibility. -The medications in the pantry were going to be returned to the pharmacy. -She understood that the medications were supposed to be in a locked location. -The medications had been removed from the facility and returned to the pharmacy. <p>Interview on 8-11-21 with the Qualified Professional revealed:</p> <ul style="list-style-type: none"> -He is at the facility frequently -The facility manager should have taken the medications to the pharmacy. 	V 120		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY</p>	V 131		

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V 131	<p>Continued From page 2</p> <p>(d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure the Health Care Personnel Registry was accessed prior to hire, effecting 1 of 4 audited staff (Staff #1). The findings are:</p> <p>Review on 8-11-21 of Staff #1's record revealed: -Hire date of 2-9-21. -Health Care Personnel Registry check completed 6-15-21.</p> <p>Interview on 8-11-21 with the Chief Operating Officer revealed: -Their former Human Resources staff had let some things slip when they were there. As soon as they noticed the error, they corrected it. -They had a new Human Resources staff at this time.</p>	V 131		