STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL084-097	A. BUILDING: _____ B. WING _____	R 07/30/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MOUNTAIN PLACE	619 MOUNTAIN PLACE ALBEMARLE, NC 28001

(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	INITIAL COMMENTS An annual and follow up survey was completed on July 30, 2021. Deficiences were cited. This facility is licensed for the following service:10A NCA 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
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 checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.	V 118		

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V 118	Continued From page 1 This Rule is not met as evidenced by: Based on observation and record review and interviews the facility failed to ensure medications were available to be administered as prescribed by the physician affecting one of two audited clients (#1). The findings are: Review on 7/27/21 of the facility license for 2021 revealed: -Change of ownership effective 3/1/21. -New license listed RHA Health Services NC, LLC. Review on 7/27/21 of Client #1's record revealed: -Admission date of 6/1/04. -Diagnoses of Down Syndrome, Moderate Intellectual Disability, Hypothyroidism, Hyperlipidemia, Impulse Disorder and Developmental Disorder of Speech and Language. Review on 7/27/21 of Client #1's physicians orders revealed the following dates: -Orders all dated 12/22/20. -Cetirizine (allergies) 10milligram (mg)- Take 1 tablet daily. -Fluticasone (allergies) 50mg- Inhale one spray in each nostril. -Levothyroxine (hypothyroidism) 75mg- Take 1 tablet every morning before food/medication. -Melatonin (sleep) 3mg- Take 2 tablets at bedtime. -Meloxicam (arthritis) 15mg- Take 1 tablet daily	V 118		

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V 118	Continued From page 2	V 118		

with food.
-Minerin Cream (itchy skin)- Apply topically to feet twice a day
-Antifungal Powder (fungal skin irritations) - Apply topically to feet twice daily as needed with foot scaling after Minerin cream

Observation on 7/21/21 at 12:25pm of Client #1's medication revealed:
-Meloxicam 15mg was not available.

Review on 7/27/21 of Client #1's MAR for July 2021 revealed the following:
-Staff documented "Not in the Home" on the back of the Medication Administration Record (MAR) for each date medication not available.
-Meloxicam was not available starting July 8, 2021 thru July 27, 2021.

Interview on 7/27/21 with Staff #2 revealed:
-Medication had been out for a while.
-Unsure why Meloxicam was not available to administer.
-The Former Team Leader (RTL) was the person notified to order med for clients.
-She stated Not in Home meant medication not in the group home and TL was therapeutic leave of client not being in the home.

Interviews on 7/27/21, 7/28/21 and 7/30/21 with Program Manager revealed:
-She was not aware of Meloxicam not being in the home.
-She contacted the Qualified Professional (QP) who said Meloxicam was ordered on 7/6/21.
-QP thought Meloxicam had been delivered to the group home.
-The Former RTL recently resigned from position.
-Former RTL was informed by other direct care staff of the need for the medication.

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V 118	Continued From page 3 -Former RTL was responsible for medication being in the home. -The Qualified Professional was the backup person. -Previous pharmacy was Pharmacy #1. -Pharmacy #1 changed to Pharmacy #2 when new licensed changed. -There were no prescription refills to transfer. -The physician was contacted for a refill. -The Meloxicam had been ordered. Interview on 7/30/21 with the Qualified Professional revealed: -She ordered the Meloxicam on 7/8/21. -Pharmacy #2 did not inform her they needed a new script and Meloxicam was never delivered to the home. -She ordered Meloxicam again on 7/28/21. Interview on 7/30/21 with the Director of Operations revealed: -Former RTL quit with no notice and created drop of medication not in the home. -Medication will be in the home today. -If medication not confirmed to arrive by noon, will contact back up pharmacy. -The backup pharmacy was located in Albemarle.	V 118		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (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.	V 131		

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V 131	Continued From page 4 This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure the Health Care Personnel Registry (HCPR) was accessed prior to employment affecting one of one former staff (Former Staff #3) and one of three current staff (Qualified Professional). The findings are: Review on 7/28/21 of Former Staff #3's personnel record revealed: -Date of hire was 4/1/21. -Date of resignation was 7/16/21. -She was employed as a Residential Team Lead. -HCPR was completed on 5/11/21. Review on 7/28/21 of Qualified Professional (QP) personnel record revealed: -Date of hire was 5/3/21 -She was employed as a Qualified Professional. -HCPR was completed on 6/11/21. Interview on 7/30/21 with the Director of Operations revealed: -She believed this deficiency had been previously noted during a previous survey. -She confirmed the HCPR was not completed for Former Staff #3 and Qualified Professional prior to hire. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days	V 131		