

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-814	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 08/13/2021
NAME OF PROVIDER OR SUPPLIER SUMMERHILL		STREET ADDRESS, CITY, STATE, ZIP CODE 6350 HAWFIELD DRIVE FAYETTEVILLE, NC 28303		
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V 000	INITIAL COMMENTS An annual, complaint and follow up survey was completed on August 13, 2021. The complaint was unsubstantiated (intake #NC00178629). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600B Supervised Living for Minors with Developmental Disability.	V 000	DHSR - Mental Health SEP 01 2021	
V 111	27G .0205 (A-B) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to: (1) the client's presenting problem; (2) the client's needs and strengths; (3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission; (4) a pertinent social, family, and medical history; and (5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs. (b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter referred to as the "plan," strategies to address the client's presenting problem shall be documented.	V 111	Lic. & Cert. Section	

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

Jama May Bishop
6899 8BG811

TITLE Director of Services

(X6) DATE 8/26/2021

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V 111	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to complete an admission assessment prior to the delivery of services for 1 of 1 former clients (FC #2). The findings are:</p> <p>Review on 8/10/21 of FC #2 record revealed: -16 year old male. -Admission date of 12/16/20. -Diagnoses of Autism Spectrum disorder, Mild Intellectual Disability, ADHD-Combined, and Conduct disorder. -No admission assessment. -No documentation of a presenting problem or identified strategies to meet the client's presenting needs.</p> <p>Interview on 8/10/21 the Qualified Professional stated: -An admission assessment was provided to FC #2's guardian. -FC #2's guardian had not returned the admission assessment when she provided paperwork.</p>	V 111		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>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> <p> </p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to administer medications as ordered by the physician and maintain an accurate MAR for 1 of 1 current clients(#1) and 1 of 1 former clients (FC #2). The findings are:</p>	V 118		
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V 118	<p>Continued From page 3</p> <p>Finding #1 Review on 8/10/21 of client #1's record revealed: -19 year old male. -Admission date of 9/7/17. -Diagnoses of Disruptive Mood Dysregulation Disorder, Conduct disorder, Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum disorder and Borderline Intellectual Functioning.</p> <p>Review on 8/10/21 of client #1's signed physician orders revealed: Orders dated 4/12/21 -Fluticasone propionate 50 mg (milligram) 1 puff daily. (allergies) Orders dated 7/13/21 -Citalapram hydrobromide 20 mg every morning at 8am. (Depression) -Guanfacine 1 mg 2 tablets in the morning and 2 at bedtime. (ADHD) -Quetiapine ER (Extended Release) 400 mg 2 tablets daily at 6pm. (mental/mood disorders)</p> <p>Review on 8/10/21-8/12/21 of client #1's MARs for May 2021 revealed: -Fluticasone propionate 50 mg, Citalapram hydrobromide 20 mg, Guanfacine 1 mg and Quetiapine Extended Release 400 mg were not documented as administered on 5/31/21.</p> <p>Interview on 8/10/21 client #1 stated he had received his medications daily.</p> <p>Finding #2 Review on 8/10/21 of FC #2 record revealed: -16 year old male. -Admission date of 12/16/20. -Diagnoses of Autism Spectrum disorder, Mild Intellectual Disability, ADHD-Combined, and Conduct disorder.</p>	V 118		
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V 118	<p>Continued From page 4</p> <p>Review on 8/10/21-8/12/21 of FC #2's signed physician orders revealed: Orders dated 6/7/21 -Guanfacine HCL (hydrochloride) ER 4 mg every morning. -Melatonin 3 mg 3 capsules daily at bedtime. (sleep) -Sertraline HCL 100 mg every evening. (mental/mood disorder) -Trazodone 150 mg daily every evening. (mental/mood disorder) Order dated 1/13/21 -Clindamycin PH (phosphate) Benzoyl Peroxide 1.2-5% apply daily at bedtime. (acne) Order dated 12/10/20 -Clindamycin PH 1% Solution apply twice daily. (acne)</p> <p>Review on 8/10/21-8/12/21 of FC #2's MARs for May and June 2021 revealed: May -Guanfacine HCL ER 4 mg, Melatonin 3 mg, Sertraline HCL 100 mg, Trazodone 150 mg, Clindamycin PH Benzoyl Perox 1.2-5% and Clindamycin PH 1% Solution were not documented as administered on 5/31/21. June -Clindamycin PH Benzoyl Perox 1.2-5% and Clindamycin PH 1% Solution were not transcribed on June MAR.</p> <p>Interview on 8/11/21 FC #2's guardian stated: -Staff had not applied topical cream to FC #2's back. -FC #2 was provided medication to apply himself and FC #2 was unable to reach his back. -The facility provided medications during home visit. -The facility did not provide enough medications for one home visit and she had to get the</p>	V 118		
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V 118	<p>Continued From page 5</p> <p>prescription filled.</p> <p>Interview on 8/10/21-8/12/21 the Qualified Professional stated:</p> <ul style="list-style-type: none"> -All medication had been administered as ordered. -All topical creams were applied by staff unless there was a self-administer order. -Neither client #1 or FC #2 had self-administration orders. -The facility had a sign in and sign out log for medications during home visits. -The medications were counted at sign out and sign in. -The facility provided extra medications in case of emergency and client had not returned when scheduled. -Client #1 and FC #2 were both on home visits on 5/31/21. 	V 118		

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Findings	Corrective Measures	Preventive Measures	Responsible Party/ How often	Time Frame
10A NCAC 27G . 0205 ASSESSMENT AND TREATMENT/ HABILITATION OR SERVICE PLAN	Train new administration staff on the importance of making sure everything is present and received during new admission screening	Agency will make sure that all forms are present, signed and located in individuals record before new admission arrives	Administration Staff During Screening	60 Days
10A NCAC 27G . 0209 MEDICATION REQUIREMENTS	Medication Training	Staff will double check to make sure that HV is on the MAR on days that medications is not given due to home visit	Staff Daily	60 Days

