

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>mhl013-142</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>08/11/2021</b>
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

**WINDERMERE GROUP HOME**

**2158 WINDERMERE DRIVE**

**KANNAPOLIS, NC 28083**

(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 survey was completed on August 11, 2021. Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.	V 000		
V 119	27G .0209 (D) Medication Requirements  10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge.	V 119		

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**DHSR - Mental Health**

**SEP 10 2021**

**Lic. & Cert. Section**

Division of Health Service Regulation

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

TITLE

(X6) DATE

*Gausei Winstead, RN, Compliance Specialist* \_\_\_\_\_ *09/08/2021*

STATE FORM

6899

JY2811

If continuation sheet 1 of 6

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER  <b>WINDERMERE GROUP HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2158 WINDERMERE DRIVE KANNAPOLIS, NC 28083</b>		
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V 119	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure all expired medication was disposed of in a manner that guards against diversion or accidental ingestion affecting 1 of 4 clients (#2). The findings are:</p> <p>Review on 8/10/21 of client #2's record revealed: -admission date of 10/5/15; -diagnoses of Unspecified Bipolar and related PTSD (Post Traumatic Stress Disorder), and ADHD (Attention Deficit Hyperactivity Disorder); -Medication order dated 7/22/21 for Lorazepam 0.5 milligram (mg) one tablet by mouth daily; -Medication order dated 05/20/20 for Lorazepam 0.5mg one tablet by mouth daily as needed.</p> <p>Observation on 8/11/21 at 3:48pm of the controlled medication black plastic lock box revealed: -client #2's Lorazepam 0.5mg one tablet by mouth daily as needed dispensed on 7/17/20 with one pill left; -date of expiration on bubble pack of Lorazepam 0.5mg was 7/16/21.</p> <p>Review of client #2's Medication Administration Record (MAR) on 8/10/21 and 8/11/21 revealed: -Lorazepam 0.5mg one tablet by mouth daily as needed administered to client #1 on 7/23/21 at 8:13pm and 7/24/21 at 7:32pm.</p> <p>Interview on 8/11/21 with the Qualified Professional (QP) revealed: -he was not aware that there was an expired medication in the box; -he will take care of it to ensure it is disposed of.</p>	V 119	<p>The Residential Manager will implement an on-site Medication Disposal Process. The Residential Manager will check the med closet at least 1 x Monthly and will document review on the LTSS medication checklist submitted to the LTSS Director of Nursing at least monthly for review.</p>	9/30/21

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V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(e) Medication Storage:</p> <p>(1) All medication shall be stored:</p> <p>(A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit;</p> <p>(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;</p> <p>(C) separately for each client;</p> <p>(D) separately for external and internal use;</p> <p>(E) in a secure manner if approved by a physician for a client to self-medicate.</p> <p>(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 observation, record reviews and interviews, the facility failed to ensure medications were stored separately per client affecting 2 of 4 clients (#2 and #4). The findings are:</p> <p>Review on 8/10/21 of client #2's record revealed: -admission date of 10/5/15; -diagnoses of Unspecified Bipolar and related PTSD (Post Traumatic Stress Disorder), and ADHD (Attention Deficit Hyperactivity Disorder);</p>	V 120	<p>The Residential Manager immediately corrected the problem by individually bagging each person's controlled-medications and labelling with their name, birthdate and internal medication on the outside. The Residential Manager will check the med closet at least 1 x monthly and will document review on the LTSS med checklist submitted to the LTSS Director of Nursing at least monthly for review.</p>	8/11/21

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V 120	<p>Continued From page 3</p> <p>-Medication order dated 7/22/21 for Lorazepam 0.5mg(milligrams) one tablet by mouth daily; -Medication order dated 05/20/20 for Lorazepam 0.5mg one tablet by mouth daily as needed.</p> <p>Review on 8/11/21 of client #4's record revealed: -admission date of 10/11/13; -diagnoses of Schizoaffective Disorder Bipolar Type, Unspecified trauma and stressor-related disorder; -Medication order dated 1/6/21 for Diazepam 5mg one tablet three times per day.</p> <p>Observations on 8/10/21 at 2:30pm and 8/11/21 at 3:28pm of controlled medication black plastic lock box revealed: -Client bubble packs of controlled medications for client #2 and client #4 stored together; -Some of the client #2 and client #4's bubble packs of controlled medications had a rubber band around it with a medication count sheet folded over the bubble pack; Medications for client #2: -Lorazepam 0.5mg one tablet by mouth daily as needed dispensed on 7/17/20 with one pill left, expired 7/16/21; -Lorazepam 0.5mg one tablet by mouth daily as needed dispensed on 8/27/20 with one pill left, expires 8/26/21; -Lorazepam 0.5mg one tablet by mouth daily as needed dispensed on 6/3/21 Quantity (Qty): 15, 15 pills left, 1 refill; -Lorazepam 0.5mg one tablet by mouth daily as needed dispensed on 3/18/21 Qty: 15, 15 pills left, 1 refill; -Lorazepam 0.5mg one tablet by mouth daily dispensed on 7/22/21 Qty: 30 pills, 18 left, 0 refills; -Lorazepam 0.5mg one tablet by mouth daily as needed dispensed on 7/22/21. Qty 15, 15 pills</p>	V 120	<p>Residential Manager and Residential Team Leader will train staff at Windemere on this rule at the next staff meeting on or before 09/30/2021. Training will be documented in each person's training record.</p>	9/30/21

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V 120	<p>Continued From page 4</p> <p>left, 0 refills; -Lorazepam 0.5mg one tablet by mouth daily as needed dispensed on 5/4/21 Qty: 15, 15 pills left, 2 refills. Medications for client #4: -Diazepam 5mg one tablet three times daily dispensed on 7/24/21 with hand written on bubble pack "bedtime;" -Diazepam 5mg one tablet three times daily dispensed on 7/24/21 hand written on bubble pack "morning"; -Diazepam 5mg one tablet three times daily dispensed on 7/24/21 hand written on bubble pack "afternoon."</p> <p>Interview on 8/11/21 with the Residential Manager revealed: -controlled medications stored in the locked box unless medications need to be refrigerated; -have a locked box for refrigerator; -usually the medications are sectioned off. "Kinda in disarray." Because had some client discharges; -usually have client #2's medications at the bottom of the box, keep client #4's on the top; -keep controlled count sheet wrapped around bubble pack to keep up whose is whose; -didn't know that they had to be stored separately in the locked box. She can get a zip lock bag to fix it. Will fix it immediately.</p> <p>Observation on 8/11/21 at 3:52pm revealed: -Residential Manager putting controlled medications in large zip lock bags per client to separate controlled medications.</p> <p>Interview on 8/11/21 with the Qualified Professional revealed: -he reviews the MARS when he does authorization requests; -he tries to check the MARS once per month;</p>	V 120	Page Intentionally Left Blank	

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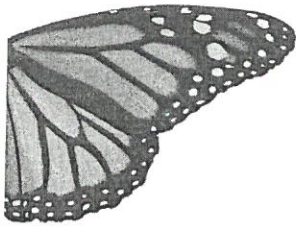
V 120

Continued From page 5  
-the Residential Manager reviews the MARS.

V 120

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September 8, 2021

Gina McLain, Facility Compliance Consultant I  
Michelle Goyeau, Facility Compliance Consultant I  
Mental Health Licensure and Certification Section  
NC Division of Health Service Regulation  
2718 Mail Service Center  
Raleigh, NC 27699-2718

DHSR - Mental Health

SEP 10 2021

Lic. & Cert. Section

RE: Windemere / Annual Survey / 8-11-21

Hello,

Please find enclosed the Plan of Correction for deficiencies cited during the survey referenced above.

If you need additional information or have any questions, please contact me directly at the number below.

Sincerely,

A handwritten signature in cursive script that reads "Louise Winstead, RN".

Louise Winstead, RN  
Compliance Specialist – Plan of Corrections  
[louise.winstead@monarchnc.org](mailto:louise.winstead@monarchnc.org)  
252-289-6512

