STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL064-088	A. BUILDING: _____ B. WING _____	11/30/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WELCOME HOME GROUP HOME II	1522 GLEN EAGLE COURT NASHVILLE, NC 27856

(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 A Follow Up and Complaint Survey was completed on November 30, 2021. The complaint was substantiated (Intake #NC00181574). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.	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	V 118		

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V 118	Continued From page 1 file followed up by appointment or consultation with a physician. This Rule is not met as evidenced by: Based on record review, observation and interview the facility failed to administer medication as prescribed and assure the MAR was current for one of two audited current clients (#1). The findings are: Review on 11/18/21 of client #1's record revealed: -Admitted: 8/3/21 -Diagnoses: Autism, Demetia, Intellectual Developmental Disability Borderline, Intermittent Explosive Disorder (D/O), Schizoaffective D/o, Generalized Anxiety D/O, Impaired Memory, Visual Impairment, Incontinenet bowel and bladder -FL-2 dated 8/17/21 listed medications which included Tenex 1 mg take three tablets at night (used to treat Attention Deficit Disorder and Hypertension) -September-November MARs listed Tenex as administered nightly Observation on 11/18/21 between 3:00 PM-7:00 PM of client #1's medications revealed -No Tenex. Interview between 11/18/21 and 11/19/21 the Licensee reported: -11/18/21: Medications were prepakcaged daily by the pharmacist. Client #1's Tenex was not placed inside the prepackaged medications for	V 118		

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V 118	Continued From page 2 this month. She would go to the pharmacist and obtain a 7 day supply of the Tenex for him. Client was given last pill on 11/17/21. She would go to the pharmacist to obtain the Tenex -11/19/21: When she went to the pharmacist, she was told they did not have the Tenex pills. She would follow up with the physician. She sent her son/staff #1 to the pharmacist to try to get the Tenex medication. She had contacted the prescribing physician to have the medication discontinued. Continued interview on 11/19/21, the Licensee reported: -Initialy, the doctor signed a discontinue order. Her son had the discontinue order in the car with him but he had left. When he stopped, he would take a picture via text to the Licensee. -Later, the pharmacist called and stated the physician changed his mind and decided to write the prescription for Tenex. The pharmacist provided enough pills to last for the remainder of the month/medication cycle. Interview on 11/22/21, the pharmacist reported: -Tenex 90 tablets were last dispensed August 3, 2021. This would equal to a month's supply as Tenex was administered three tablets at a time. -The physician did not respond to requests to update the Tenex order -The Licensee was contacted about this issue. -Per the records, no other dosages were dispensed or given to the group home since August 2021. -Tenex can not be obtained as an over the counter medication.	V 118		

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V 120	Continued From page 3	V 120		
V 120	27G .0209 (E) Medication Requirements 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. This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure medications were stored in a securely locked manner for one of one client (#3) whose medication required refrigeration. The findings are: Review on 11/30/21 of client #3's record revealed: -Admitted: 7/26/07 -Diagnoses: Intellectual Developmental Disability, Autism, Depression, Aortic Heart Valve, Mucopolysacchardosis (MPS) Type 1 and	V 120		

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V 120	Continued From page 4 memory loss -Doctor's order dated 3/12/21 listed infuse Aldurazyme-Genzyme 34.8 mg (milligram)/250 ml (milliliter) NS (normal saline) every 7 days via pump at the following ramping scheduled: Initial rate of 5 ml/hr (hour) for 15 minutes. If tolerated, increase rate to 10 ml/hr for 15 minutes If tolerated, increase rate to 20 ml/hr for 15 minutes If tolerated, increase rate to 40 ml/hr for 15 minutes If tolerated, increase rate to 80 ml/hr for remainder of infusion until bag is empty Observation on 11/19/21 between 12 Noon-1:00 PM of client #3's refrigerated medications revealed: -Refrigerator located in the bedroom he shared with a peer -No evidence the refrigerator was secured to prevent tampering of content -12 unopened packets of Aldurazyme-Genzyme 2.9 mg/5ml. Packaging noted refill date 11/15/21 and 4 dosages -Storage container inside with some packets of Aldurazyme-Genzyme inside. No evidence the storage container was secured from tampering Interview on 11/19/21, client #3 reported: -A nurse came and administered the medication (Aldurazyme-Genzyme) to him -Neither he nor his roommate opened the refrigerator Interview on 11/19/21, the Licensee reported: -She would assure the medication was secured or locked to reduce the risk of tampering	V 120		