

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL032-267</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/06/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>DIXON ROAD GROUP HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3520 DIXON ROAD DURHAM, NC 27707</b>
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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><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on May 6, 2022. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 5 and currently has a census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></p> <p>(c) Medication administration:</p> <p>(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.</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>	V 118		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 118	<p>Continued From page 1</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>This Rule is not met as evidenced by: Based on observation, record reviews and interviews, the facility failed to keep the MAR current affecting two of three audited clients (#2 and #3) and failed to ensure medications were available for administration affecting two of three audited clients (#1 and #3). The findings are:</p> <p>The following is evidence the facility failed to keep the MAR current.</p> <p>a. Review on 5/5/22 of client #2's record revealed: -Admission date of 4/12/18. -Diagnosis of Moderate Intellectual or Developmental Disability.</p> <p>Review on 5/5/22 of physician's orders for client #2 revealed: -Order dated 10/6/21 for Calcium Phosphate Vitamin D3 250 milligrams (mg) (promote bone health) one tablet two times daily and Blood Pressure, check and record Blood Pressure once a week.</p> <p>Observation on 5/6/22 at approximately 11:00 am of the medication area revealed: -The Calcium Phosphate Vitamin D3 250 mg was available for client #2.</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Review on 5/5/22 of a MAR for client #2 revealed: -April 2022-There were blank boxes on 4/29 and 4/30 for Calcium Phosphate Vitamin D3 250 mg. There were blank boxes on 4/22 and 4/29 for the Blood Pressure checks.</p> <p>b. Review on 5/5/22 of client #3's record revealed: -Admission date of 6/5/07. -Diagnoses of Mild Intellectual or Developmental Disability, Down's Syndrome, Oppositional Defiant Disorder, Dementia, Psychosis, Sleep Apnea and Gout.</p> <p>Review on 5/5/22 of physician's orders for client #3 revealed: -Order dated 5/10/21 for Resistance Knee Extension, perform 3 sets of 10 repetitions twice a day and Stretch Gastroc Uni Standing Exercises, perform 1 set of 3 repetitions twice a day.</p> <p>Review on 5/5/22 of a MAR for client #3 revealed: -April 2022-There was a blank box on 4/26 pm for the Knee Extension exercises. There were blank boxes on 4/26 pm and 4/27 am for the Stretch Gastroc Uni Standing Exercises.</p> <p>"Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician"</p> <p>Interview on 5/5/22 with the Division Director revealed: -She thought there was a substitute staff working in that home towards the end of April 2022. -There were no issues with the clients not getting there medications and/or other treatments as</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>prescribed.</p> <p>-She confirmed staff failed to keep the MAR's current for clients #2 and #3.</p> <p>Interview on 5/6/22 with the Assistant Director confirmed:</p> <p>-Staff failed to keep the MAR's current for clients #2 and #3.</p> <p>The following is evidence the facility staff failed to ensure medication was available for administration.</p> <p>a. Review on 5/5/22 of client #1's record revealed:</p> <p>-Admission date of 11/29/16.</p> <p>-Diagnoses of Autism Spectrum Disorder, Generalized Anxiety Disorder, Mood Disorder, Obsessive Compulsive Disorder Hypothyroidism and High Blood Pressure.</p> <p>Review on 5/5/22 of physician's orders for client #1 revealed:</p> <p>-Order dated 3/21/22 for Tylenol Extra Strength 500 mg (pain relief), two tablets every 6 hours as needed and Neosporin (minor wounds), apply as needed.</p> <p>Observation on 5/6/22 at approximately 10:32 am of the medication area revealed:</p> <p>-The Tylenol Extra Strength 500 mg expired March 2021, therefore could not be administered.</p> <p>-Neosporin was not available for client #1.</p> <p>Review on 5/5/22 of MAR's for client #1 revealed:</p> <p>-May, April and March 2022-The Tylenol Extra Strength 500 mg and Neosporin were both listed.</p> <p>b. Review on 5/5/22 of physician's orders for client #3 revealed:</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>-Order dated 5/10/21 for Ibuprofen 800 mg (pain relief), one tablet every 8 hours as needed; Mucinex DM ER 600 mg (cough relief), one tablet every 12 hours as needed; Mylanta Liquid (reduce stomach acid), 15 cubic centimeter (cc) every 6 hours as needed and Neosporin, apply twice daily as needed.</p> <p>Observation on 5/6/22 at approximately 11:18 am of the medication area revealed: -The Ibuprofen 800 mg expired February 2021, therefore could not be administered. -Mucinex DM ER 600 mg, Mylanta Liquid and Neosporin were not available for client #3.</p> <p>Review on 5/5/22 of MAR's for client #3 revealed: -May, April and March 2022-The Ibuprofen 800 mg, Mucinex DM ER 600 mg, Mylanta Liquid and Neosporin were all listed.</p> <p>Interview on 5/6/22 with staff #1 revealed: -She was not sure why the medications and/or other treatments were not available for clients #1 and #3. -She confirmed facility staff failed to ensure medications were available for administration.</p> <p>Interview on 5/6/22 with the Assistant Director confirmed: -Facility staff failed to ensure medications were available for administration.</p>	V 118		
V 119	<p>27G .0209 (D) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that</p>	V 119		

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V 119	<p>Continued From page 5</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observation, record reviews and interviews the facility staff failed to dispose of prescription medications in a manner that guards against diversion or accidental ingestion affecting two of three audited clients (#1 and #3). The findings are:</p> <p>Observation on 5/6/22 at approximately 10:45 am of the medication area revealed: -Two bottles of Tussin DM (cough and chest congestion) expired December 2021</p>	V 119		

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V 119	<p>Continued From page 6</p> <ul style="list-style-type: none"> <li>-Allergy Relief tablets (relieve allergy symptoms) expired April 2021</li> <li>-Dulcolax (constipation) expired August 2020</li> <li>-Acetaminophen 500 milligrams (mg) (pain relief) expired March 2021</li> <li>-Multivitamins (vitamin deficiencies) expired January 2021</li> <li>-Ibuprofen 200 mg (pain relief) expired February 2021</li> <li>-Kaopectate 262 mg (diarrhea, nausea, heartburn, gas and upset stomach) expired July 2021</li> </ul> <p>a. Review on 5/5/22 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 11/29/16.</li> <li>-Diagnoses of Autism Spectrum Disorder, Generalized Anxiety Disorder, Mood Disorder, Obsessive Compulsive Disorder Hypothyroidism and High Blood Pressure.</li> </ul> <p>Review on 5/5/22 of a physician's order for client #1 revealed:</p> <ul style="list-style-type: none"> <li>-Order dated 3/21/22 for Tylenol Extra Strength 500 mg, two tablets every 6 hours as needed.</li> </ul> <p>Review on 5/6/22 of Medication Administration Records (MAR's) for client #1 revealed:</p> <ul style="list-style-type: none"> <li>-May, April, March 2022 the Tylenol Extra Strength 500 mg was not administered.</li> </ul> <p>b. Review on 5/5/22 of client #3's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 6/5/07.</li> <li>-Diagnoses of Mild Intellectual or Developmental Disability, Down's Syndrome, Oppositional Defiant Disorder, Dementia, Psychosis, Sleep Apnea and Gout.</li> </ul> <p>Review on 5/5/22 of a physician's order for client</p>	V 119		

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V 119	<p>Continued From page 7</p> <p>#3 revealed: -Order dated 5/10/21 for Ibuprofen 800 mg, one tablet every 8 hours as needed.</p> <p>Review on 5/6/22 of MAR's for client #3 revealed: -May, April, March 2022 the Ibuprofen 800 mg was not administered.</p> <p>Interview on 5/6/22 with staff #1 revealed: -She didn't realize those medications had expired. They check the house stock of over the counter medications every few months. -She confirmed facility staff failed to ensure medications were disposed of in a manner that guards against diversion or accidental ingestion.</p> <p>Interview on 5/6/22 with the Assistant Director revealed: -She didn't realize there were expired medications at the group home. -The agency had a nurse that would normally check all medications. -She thought the nurse had not been in that group in over a year due to Covid. -She confirmed facility staff failed to ensure medications were disposed of in a manner that guards against diversion or accidental ingestion</p>	V 119		