

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>MHL011-103</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>C</b><br><b>04/29/2022</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>RIVERVIEW GROUP HOME</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>421 RIVERVIEW DRIVE<br/>ASHEVILLE, NC 28806</b> |
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|--------------------|--|---------------|---|--------------------|
| V 000              | <p><b>INITIAL COMMENTS</b></p> <p>A complaint survey was completed on April 29, 2022. The complaint was unsubstantiated (Intake #NC00187388). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>The survey sample consisted of audits of 1 current client.</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:<br/>Based on interview and record review the facility failed to ensure a client had physician's orders to self administer medications affecting one of one audited client (Client #1). The findings are:</p> <p>Review on 4/27/22 of Client #1's record revealed:<br/>-Admitted 2/2/16.<br/>-Diagnoses of Type 2 Diabetes Mellitus, Bipolar Mood Disorder, Depression, Insomnia, Gastro-Esophageal Reflux Disease, Chronic Pancreatitis, Pancreatic Disease and Abdominal Pain.</p> <p>Review on 4/27/22 of Client #1's physician orders included:<br/>-1/20/22 and 3/17/22 - Morphine 15 milligrams (mg) IR (immediate release) - 1 tablet @ 1:30 p.m. for break through pain.<br/>-4/7/22 - Discontinue Morphine 15 mg IR.<br/>-4/7/22 - Oxycodone 10 mg - 1 tablet every 6 hours for moderate pain.</p> <p>Review on 4/27/22 of Client #1's February through April 2022 Medication Administration Records (MARs) included:<br/>-Morphine 15 mg IR - 1 tablet @ 1:30 p.m. for break through pain was initialed by staff and the client as given daily.</p> | V 118         |   |                    |

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| V 118              | <p>Continued From page 2</p> <p>-Oxycodone 10 mg - 1 tablet every 6 hours was initialed by staff and client as given at 8:00 a.m., 2:00 p.m., 8:00 p.m. and 2:00 a.m. starting 4/8/22.</p> <p>Interview on 4/27/22 with Client #1 revealed:<br/>-He had suffered from chronic pain for many years.<br/>-On days he worked he took the 1:30 p.m. pill with him so he could take it at work.</p> <p>Review on 4/27/22 of Client #1's self-administration physician orders revealed:<br/>-1/9/22 - the client was authorized to self-administer his medications.<br/>-2/16/22 - the client "may self-administer non-controlled meds only."</p> <p>Interview on 4/27/22 with Staff #2 revealed:<br/>-On days Client #1 went to work he took his 1:30 p.m. Morphine tablet with him, and now he took his Oxycodone 2:00 p.m. dose with him.<br/>-He generally worked Monday, Wednesday, Friday, Saturday and sometimes on Thursday.</p> <p>Interview on 4/27/22 with the Registered Nurse revealed:<br/>-She just noticed the self-administration order that specified non-controlled medications only.<br/>-This was written by the nurse practitioner under the client's primary physician.<br/>-She would call and get a better understanding of the self-administration orders.</p> <p>Interview on 4/29/22 with the Qualified Professional revealed:<br/>-He was not aware of the order written on 2/16/22.<br/>-He would ensure this was clarified for Client #1.</p> | V 118         |   |                    |

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| V 118              | Continued From page 3<br><br>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.   | V 118         |   |                    |