STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL045-140	A. BUILDING: _____ B. WING _____	09/02/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COX FAMILY CARE	1615 WILLOW ROAD HENDERSONVILLE, NC 28739

(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 9/2/22. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Individuals of all Disability Groups/Alternative Family Living. This facility is licensed for 2 and currently has a census of 2. The survey sample consisted of audits of 2 current clients.	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	V 118		

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V 118	Continued From page 1 drug. (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. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to keep the MAR current for 1 of 2 clients (Client #1). The findings are: Review on 9/2/22 of Client #1's record revealed: -Date of Admission-10/13/19 -Diagnoses Mild Intellectual Disability, Hypertension, Sleep Apnea -Physician ordered medications for Client #1 included: -Cartia (diltiazem) 120mg(milligrams) (for hypertension) one capsule daily ordered on 2/11/22. An additional Physician's order on 8/23/22 increased dosage to 240mg daily. Review on 9/2/22 of MARs from June to August 2022 revealed: -On August MAR, medication section, noted Cartia 120mg one daily, along with note added in parenthesis "increase to 2" dated 8/24/22. The MAR was initialed continuing on the same line through 8/31/22. -There was no additional line or section created on the MAR to show the increase in dosage and it's administration. Interview on 9/2/22 with the Qualified	V 118		

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V 118	Continued From page 2 Professional revealed: -Staff #1 should have known to record the medication increase on a new line. -Will review that process with Staff #1 and monitor.	V 118		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure each staff member had no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry (HCPR) prior to hire for 1 of 3 audited staff (Staff #1). The findings are Record review on 9/2/22 for Staff #1 revealed: -Date of Hire-7/5/17 -Date of HCPR verified: 7/5/17 Interview on 9/2/22 with the Qualified Professional revealed: -The facility served only one client initially and was not licensed until a few years later. They had	V 131		

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V 131	Continued From page 3 not previously been surveyed. -She was not aware the HCPR was completed on the date of hire. -Will make sure the correct process is followed.	V 131		