STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL047009	A. BUILDING: _____ B. WING _____	R 08/25/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOKE COUNTY GROUP HOME #1	170 OAK STREET RAEFORD, NC 28376

(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 and follow-up was completed on August 25, 2022. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 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 drug.	V 118	This Page Intentionally Left Blank RECEIVED SEP 07 2022 DHSR-MH Licensure Sect	

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V 118	Continued From page 1 (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 records review, observations, and interviews the facility failed to: A) Have physician orders for administered medications affecting three of three audited clients (#1, #2 and #3); and B) Ensure medications were available for administration affecting one of three clients (#1) The findings are Review on 8/25/22 of Client #1's record revealed: -Admission date of 5/2/17. -Diagnosis of Intellectual Disability, Severe; Arthritis; Asthma; Chronic constipation; Esophageal Reflux; Urinary and Bowel Incontinence; Obesity. Review on 8/25/22 of Client #1's physician's orders revealed: -There were no orders for: -Ammonium lactate lotion 12%, Spread a pea size amount topically to affected area twice a day. -Clotrimazole Cream 1%, Spread topically to affected area between toes at bedtime. -Topiramate 50 milligram (mg,) One tablet twice a day. -Vraylar 3 mg, One capsule once a day. Observation on 8/25/22 at 12:20 pm of Client #1's medications revealed:	V 118	**V 118** Residential Team Lead (RTL) will request Director of Nursing to print medication room audit form for Hoke #1 monthly for 3 months. RTL will review medication room audit form for accuracy and ensure all physician orders are signed and onsite for all medications monthly for 3 months. Residential Manager will provide an in-service to all staff to discuss the need to re-order medication before medication has run out.	10/24/2022 10/24/2022

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V 118	Continued From page 2 -Ammonium lactate lotion 12% was available. -Clotrimazole Cream 1% was not available. -Topiramate 50 milligram mg was available. -Vraylar 3 mg was available. Review on 8/25/22 of Client #1's MAR for June 2022 through August 25, 2022 revealed: -Ammonium lactate lotion 12% was marked as given. -Clotrimazole Cream 1% was marked as given. -Topiramate 50 milligram mg was marked as given. -Vraylar 3 mg was marked as given. Review on 8/25/22 of www.webmd.com revealed: -Ammonium lactate lotion 12% was used to treat xerosis (dry or scaly skin) and ichthyosis vulgaris (an inherited dry skin condition) in adults and children. -Clotrimazole Cream 1% was an antifungal medicine. It was used to treat skin infections caused by a fungus (yeast). -Topiramate 50 milligram mg was used to treat certain types of seizures. -Vraylar was used to treat mixed or manic episodes in adults with bipolar I disorder. Review on 8/25/22 of Client #2's record revealed: -Admission date of 5/5/14. -Diagnoses of Schizophrenia; Controlled Type 2 Diabetes; Mild Intellectual Disability; Nocturnal Enuresis; Anxiety; History of Seizures. Review on 8/25/22 of Client #2's physician's orders revealed: -There were no orders for: -Divalproex 500 mg, Two tablets every evening. -Lithium Carbonate 300 mg, One tablet twice a day.	V 118	This Page Intentionally Left Blank	

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V 118	Continued From page 3 -Mirtazapine 30 mg, One tablet at bedtime. -Quetiapine 100 mg, One tablet in the morning. -Quetiapine 200 mg, One tablet at bedtime. -Sodium Fluoride 5000 Plus, Provide to brush teeth twice a day. -Urea Foot Cream Plus 2% Salicylic Acid, Spread topically to calluses twice a day. -Vraylar 6 mg, One capsule at bedtime. -Risperidone 3 mg, One tablet at bedtime. Observation on 8/25/22 at 12:00 pm of Client #2's medications revealed: -Divalproex 500 mg was available. -Lithium Carbonate 300 mg was available. -Mirtazapine 30 mg was available. -Quetiapine 100 mg was available. -Quetiapine 200 mg was available. -Sodium Fluoride 5000 Plus was available. -Urea Foot Cream Plus 2% Salicylic Acid was available. -Vraylar 6 mg was available. -Risperidone 3 mg was available. Review on 8/25/22 of Client #2's MAR for June 2022 through August 25, 2022 revealed: -Divalproex 500 mg was marked as given. -Lithium Carbonate 300 mg was marked as given. -Mirtazapine 30 mg was marked as given. -Quetiapine 100 mg was marked as given. -Quetiapine 200 mg was marked as given. -Sodium Fluoride 5000 Plus was marked as given. -Urea Foot Cream Plus 2% Salicylic Acid was marked as given. -Vraylar 6 mg was marked as given. -Risperidone 3 mg was marked as given. Review on 8/25/22 of www.webmd.com revealed:	V 118	This Page Intentionally Left Blank	

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V 118	Continued From page 4 -Divalproex was used to treat certain types of seizures. It was also used to treat the manic phase of bipolar disorder -Lithium Carbonate was used used to treat manic-depressive disorder (bipolar disorder). -Mirtazapine was used to treat depression. -Quetiapine was used to treat bipolar disorder (depressive and manic episodes) and schizophrenia. -Sodium Fluoride 5000 Plus was used to prevent cavities. -Urea Foot Cream Plus 2% Salicylic Acid was used to treat dry/rough skin conditions. -Vraylar was used to treat mixed or manic episodes in adults with bipolar I disorder. -Risperidone was used to treat schizophrenia, bipolar disorder, or irritability associated with autistic disorder. Review on 8/25/22 of Client #3's record revealed: -Admission date of 5/2/17. -Diagnoses of Intellectual Disability, Mild; GERD; Major Depressive Disorder. Review on 8/25/22 of Client #3's physician's orders revealed: -There were no orders for: -Ammonium lactate lotion 12%, Spread topically to dry skin twice a day. -Clotrimazole Cream 1%, Spread topically between toes at bedtime. -Ciclopirox Nail lacquer 8%, Apply topically to nails and cuticles daily -Quetiapine 400 mg, Two tablets in the evening. Observation on 8/25/22 at 12:20 pm of Client #3's medications revealed: -Ammonium lactate lotion 12% was available. -Clotrimazole Cream 1% was available.	V 118	This Page Intentionally Left Blank	

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V 118	Continued From page 5 -Ciclopirox Nail lacquer 8% was available. -Quetiapine 400 mg was available. Review on 8/25/22 of Client #3's MAR for June 2022 through August 25, 2022 revealed: -Ammonium lactate lotion 12% was marked as given. -Clotrimazole Cream 1% was marked as given. -Ciclopirox Nail lacquer 8% was marked as given. -Quetiapine 400 mg was marked as given. Review on 8/25/22 of www.webmd.com revealed: -Ammonium lactate lotion 12% was used to treat xerosis (dry or scaly skin) and ichthyosis vulgaris (an inherited dry skin condition) in adults and children. -Clotrimazole Cream 1% was an antifungal medicine. It was used to treat skin infections caused by a fungus (yeast). -Ciclopirox Nail lacquer was used to treat fungal infections of the fingernails and toenails. -Quetiapine was used to treat bipolar disorder (depressive and manic episodes) and schizophrenia. Interview on 8/23/22 with the House Manager revealed: -The Clotrimazole Cream ran out today. -She reordered a new Clotrimazole Cream today. -She confirmed the facility failed to have medications available for administration affecting one of three clients (#1.) Interview on 8/23/22 with the Team Leader/Qualified Professional revealed: -Doctors did not give them the medication orders anymore. They sent them directly to the pharmacy electronically. -She confirmed the facility failed to have physician orders for administered medications for	V 118	This Page Intentionally Left Blank	

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V 118	Continued From page 6 clients #1, #2 and #3.	V 118	This Page Intentionally Left Blank	

Monarch
Helping Dreams Take Flight

September 2, 2022

Edgar Garrido, Facility Compliance Consultant I
Mental Health Licensure and Certification Section
NC Division of Health Service Regulation
2718 Mail Service Center
Raleigh, NC 27699-2718

RE: Hoke County #1 / Annual & Follow-Up / August 25, 2022

Hello,

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

If you need additional information or have any questions, please contact me.

Sincerely,

Louise Winstead, RN

Louise Winstead, RN
Compliance Specialist – Plan of Corrections
louise.winstead@monarchnc.org
252-289-6512