Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL063-081	A. BUILDING: _____ B. WING _____	09/09/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PORT HEALTH SERVICES - ABERDEEN	204 B PINE STREET ABERDEEN, NC 28315

(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 September 9, 2022. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600D Supervised Living for Minors with Substance Abuse Dependency. This facility is licensed for 9 and currently has a census of 7. The survey sample consisted of audits of 3 current clients.	V 000	Supervision was provided on 9/12/22 specificially reviewing documentation requirements for medication admin with the staff persons reviewed in the survey. Additionally, the program supervisor will review the audit findings including med admin documentation at the next scheduled staff meeting on 9/15/22. The program supervisor will utilize internal peer auditing as a mechanism to ensure documentation compliance. This will occur weekly and findings will be shared with peers with instructions when needed to meet compliance standards.	9/12/22; and ongoing for continued supevision
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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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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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 reviews and interviews, the facility failed to keep the MARs current affecting three of three current audited clients (#1, #2 and #3). The findings are: a. Review on 9/8/22 of client #1's record revealed: -Admission date of 6/6/22. -Diagnoses of Cannabis Use Disorder, Stimulant Use Disorder-Amphetamine type substance, Attention Deficit Hyperactivity Disorder, Posttraumatic Stress Disorder and Oppositional Defiant Disorder. -She was 18 years old. Review on 9/8/22 of physician's orders revealed: -Order dated 8/30/22 for Guanfacine 2 milligrams (mg) (ADHD), one tablet at bedtime; Hydroxyzine Hydrochloride 50 mg (Anxiety), one tablet at bedtime and Trazodone 50 mg (Depression), one tablet at bedtime. -Order dated 8/2/22 for Ferrous Sulfate 324 mg (Iron Deficiency), one tablet twice daily. Review on 9/8/22 of the September 2022 MAR for client #1 revealed: No staff initials as administered on 9/6/22 for the	V 118		

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V 118	Continued From page 2 following medications -Guanfacine 2 mg -Hydroxyzine Hydrochloride 50 mg -Trazodone 50 mg -Ferrous Sulfate 324 mg b. Review on 9/8/22 of client #2's record revealed: -Admission date of 3/8/22. -Diagnoses of Cannabis Use Disorder, Stimulant Use Disorder-Amphetamine type substance, Attention Deficit Hyperactivity Disorder, Conduct Disorder and History of Asthma. -He was 18 years old. Review on 9/8/22 of physician's orders revealed: -Order dated 8/17/22 for Guanfacine 2 mg, one tablet at bedtime and Trazodone 50 mg, one tablet at bedtime. Review on 9/8/22 of the September 2022 MAR for client #2 revealed: No staff initials as administered on 9/6/22 for the following medications -Guanfacine 2 mg -Trazodone 50 mg c. Review on 9/8/22 of client #3's record revealed: -Admission date of 7/5/22. -Diagnoses of Opioid Use Disorder, Cannabis Use Disorder, Posttraumatic Stress Disorder, Conduct Disorder and Seasonal Allergies. -He was 17 years old. Review on 9/8/22 of physician's orders revealed: -Order dated 8/1/22 for Cetirizine 10 mg (Allergies), one tablet at bedtime and Melatonin 5 mg (Sleep Disorders), one tablet at bedtime. Review on 9/8/22 of the September 2022 MAR	V 118		

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V 118	Continued From page 3 for client #3 revealed: No staff initials as administered on 9/6/22 for the following medications -Cetirizine 10 mg -Melatonin 5 mg Interview on 9/8/22 with staff #1 revealed: -There were no issues with the clients getting their prescribed medications. -Staff forgot to sign off the medications were administered on 9/6/22 for clients #1, #2 and #3. -She confirmed staff failed to keep the September 2022 MARs current for clients #1, #2 and #3. Interview on 9/9/22 with the Program Supervisor confirmed: -Staff failed to keep the MARs current for clients #1, #2 and #3. Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician	V 118	T	
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interviews, the facility	V 736		

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V 736	Continued From page 4 failed to ensure facility grounds were maintained in a safe, clean, attractive and orderly manner. The findings are: Observation on 9/8/22 at approximately 12:30 pm revealed: -Client #6's bedroom-Walls were stained and had a putty like substance on them. There was a hole approximately eight inches long and eight inches wide on all four sides. The dresser had drawings and writing on top of it. The ceiling had peeling paint and a pink substance on it. -Client #3's bedroom-Walls had writing, stains and a putty like substance on them. The dresser and two night stands had writing and drawings on top of them. -Clients #1 and #5 bedroom-Walls were stained and had a putty like substance on them. -Clients #4 and #7 bedroom-Walls were stained and had a putty like substance on them. Both sets of blinds were broken. -Client #2's bedroom-Walls were stained and had a putty like substance on them. The paint on the ceiling was peeling. -Male bathroom-Walls were stained and had a putty like substance on them. Step up to shower had black stains. The paint on the ceiling was peeling. Bathroom door had faded paint. Interview on 9/8/22 with staff #1 revealed: -They were aware of the issues with the facility. -The agency did not own the facility. They had a hard time trying to get the owner of the building to make the needed repairs. -The client bedrooms were constantly being painted. -She confirmed the facility failed to ensure facility grounds were maintained in a safe, clean, attractive and orderly manner.	V 736	As a result of the survey, the walls/ceiling will be repainted and repaired. A request was submitted to the agency Operations Department on 9/14/22 With regard to the dressers, the staff will sand and paint the them as bed availability allows.	11/1/22

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V 736	Continued From page 5 Interview on 9/9/22 with the Program Supervisor revealed: -She was aware of the maintenance issues with the facility. -They were constantly painting the walls throughout the facility. -Sometimes it takes the owner of the building a while to make the requested repairs within a timely manner. -She confirmed the facility failed to ensure facility grounds were maintained in a safe, clean, attractive and orderly manner.	V 736		