

Division of Health Service Regulation

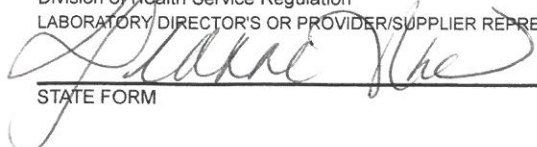
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0411016</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/19/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>NOWLIN HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2110 WILLOW ROAD GREENSBORO, NC 27406</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on August 19, 2022. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600B Supervised Living for Minors with Developmental Disability.</p> <p>This facility is licensed for 4 and currently has a census of 2. The survey sample consisted of audits of 2 current clients and 1 former client</p>	V 000		
V 117	<p><b>27G .0209 (B) Medication Requirements</b></p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(b) Medication packaging and labeling:</p> <p>(1) Non-prescription drug containers not dispensed by a pharmacist shall retain the manufacturer's label with expiration dates clearly visible;</p> <p>(2) Prescription medications, whether purchased or obtained as samples, shall be dispensed in tamper-resistant packaging that will minimize the risk of accidental ingestion by children. Such packaging includes plastic or glass bottles/vials with tamper-resistant caps, or in the case of unit-of-use packaged drugs, a zip-lock plastic bag may be adequate;</p> <p>(3) The packaging label of each prescription drug dispensed must include the following:</p> <p>(A) the client's name;</p> <p>(B) the prescriber's name;</p> <p>(C) the current dispensing date;</p> <p>(D) clear directions for self-administration;</p> <p>(E) the name, strength, quantity, and expiration date of the prescribed drug; and</p> <p>(F) the name, address, and phone number of the pharmacy or dispensing location (e.g., mh/dd/sa center), and the name of the dispensing</p>	V 117	<p><b>DHSR - Mental Health</b></p> <p><b>OCT 19 2022</b></p> <p><b>Lic. &amp; Cert. Section</b></p>	

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE



TITLE



(X6) DATE

9/1/22

Division of Health Service Regulation

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V 117	<p>Continued From page 1 practitioner.</p> <p>This Rule is not met as evidenced by: Based on observations, records review and interviews, the facility failed to ensure prescription medications had the required labeling information for 2 of 2 current clients (#1 and #2). The findings are:</p> <p>Observations on 8/17/22, at 1:37pm, of client #2's medications revealed: -A weekly pill container that had 7 compartments bins and 4 rows -Each row was a different color -The 1st row was yellow -The 2nd row was blue -The 3rd row was green -The 4th row was purple -Client #2's first name was handwritten on a label on the weekly pill container -Some of the prescription medications were in the compartment bins -There was no other identifying information on the container</p> <p>Observations on 8/17/22, at 2:07pm, of client #1's medications revealed: -A weekly pill container that had 7 compartments bins and 4 rows -Each row was a different color -The 1st row was yellow -The 2nd row was orange -The 3rd row was purple -The 4th row was dark blue</p>	V 117		

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V 117	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>-Client #1's first name was handwritten on a label on the weekly pill container</li> <li>-Some of the prescription medications were in the compartment bins</li> <li>-There was no other identifying information on the container</li> </ul> <p>Review on 8/18/22 of client #1's record revealed:</p> <ul style="list-style-type: none"> <li>-Physician's order dated 3/9/22 for Levocetirizine 5mg, one by mouth every night (1 po qhs)</li> <li>-Physician's orders dated 4/25/22 for Melatonin 5mg, 1 po qhs</li> <li>-Physician's orders dated 5/16/22 for Vitamin D3, 1 po qd</li> <li>-Physician's orders dated 6/27/22 for the following medications: Omeprazole DR 20 milligrams (mg), one by mouth daily (1 po qd), Olanzapine 10mg, one by mouth twice daily (1 po bid).</li> <li>-Physician's orders dated 7/5/22 for Saphris 0.2mg, 1 po qd and Clonidine HCL 0.25mg 1 po bid</li> </ul> <p>Review on 8/18/22 of client #2's record revealed:</p> <ul style="list-style-type: none"> <li>-Physician's orders dated 4/4/22 for the following medications: Fan apt 4mg 1 po bid</li> <li>-Physician's orders dated 5/11/22 for Desmopressin Acetate .2mg 1 po qd</li> <li>-Physician's orders dated 7/6/22 for Amitriptyline HCL 25mg 1 po qhs</li> <li>-Physician's orders dated 7/7/22 for Adderall XR 30mg 1 po qd, Aripiprazole 10mg 1 po qd, Vitamin D3 1,000 1 po qd, Clonidine HCL 0.1mg 1 po qhs. Trazodone 100mg 1 po qhs, Clonazepam 0.5mg 1 po bid, Guanfacine 2mg 1 po bid. , Risperidone 2mg 1 po bid and Mydaids-amphetamine 30mg 1 po qd</li> <li>-Physician's orders dated 7/13/22 for Catapres 0.1mg 1 po qhs and Klonopin 0.5mg 1 po bid</li> </ul> <p>Attempted interviews on 8/16/22 with clients #1</p>	V 117		

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V 117 Continued From page 3  
and #2 were not successful due to developmental disabilities.

Interview on 8/17/22 with staff #1 revealed:  
-Regarding client #2's medications "The yellow row held morning medications 8:00am, the blue row held 12:00pm medications, the green row held 4:00pm medications and the purple row held 8:00pm medications."  
-Regarding client #1's medications "the yellow row held morning medications (8:00am), the orange row held 12:00pm meds, the purple row was for 4:00pm meds and the dark blue row was for the bedtime (8:00pm) meds.

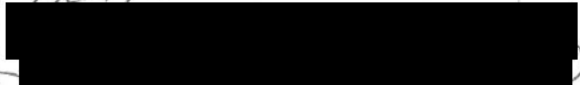
Further interview on 8/17/22 with staff #1 revealed:  
-"The pharmacy sends the bubble packs to the facility, then we call [the Owner] and let her know they are here. And she does the medications (removes them from the bubble packs and places them in the weekly pill containers) ... since she is out (medical leave), she will bring the medications over from next Sunday all the way to next Saturday ..."  
-Knew the medications names and for each clients' "by heart"

Interview on 8/19/22 with the Owner revealed:  
-Was aware the prescription medications were not to be re-dispensed into weekly pill containers  
-Would contact a registered nurse to retrain facility staff

V 117

*All staff members was retrain by a registered nurse on 9/27/22.*

*Will monitor and sure that all staff are returned yearly*



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

V 736

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V 736

Continued From page 4

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 observations and interviews, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are:

Observations on 8/17/22, at 12:32pm, of the facility revealed:  
-A strong odor of urine

Further observations on 8/18/22, at 9:33am, of the facility revealed:  
-A strong odor of urine  
-The empty bedroom had an odor of bleach

Observations on 8/19/22, from 8:49am to 9:12am, of the facility revealed:  
-A strong odor of urine  
-Several window brackets were broken in the living room  
-Several walls had been patched, but not painted  
-The carpet had stains throughout the facility  
-Client #1's bedroom had two 3 inch by 3 inch urine stains on the mattress  
-The window in client #2's bedroom has a torn screen  
-Client #2's bedroom had a 6 inch by 6 inch hole in the dry wall under the window  
-The chest of drawers in client #2's bedroom had drawers that would not close properly  
-The kitchen counter had several scuff marks  
-One the side of the facility, a broken metal gate leaned up against the facility

V 736

*The carpet in the room where the urine odor appeared was replaced with hard wood flooring on 10/17/22.*

*Window brackets was replaced on 8/30/22*

*The carpet was cleaned throughout the facility.*

*The mattress in client room #1 was taken out.*

*Client's #2 bedroom hope was fixed + new dresser drawer.*

*The metal gate was put out for trash.*



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V 736

Continued From page 6

V 736

Interview on 8/19/22 with the Owner revealed:  
 -Client #1 wet and defecated on himself.  
 -"He wears a pull-up and we must clean up after him. We wash his sheets daily. Our protocol is to put his used pull-ups in a grocery bag and put them in the outside trash. We also spray his mattress, take it outside and let it air out ..."  
 -Client #2 got mad and kicked a hole in his bedroom wall.  
 -"It is hard to get people to come out to patch up the wall. His social worker is aware of what happened and will reimburse me ...I even talked to the home owner and he said 'I'll get to it.' That was over 2 weeks ago ..."  
 -Planned to replace the carpet with wood floors  
 -The people that cut the grass at the facility, would pick up the gate because it was not secured. They remove it, put it back, remove it ...so we just put it on the side of the house ...we don't take the clients outside where the gate is ..."