

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL024-108</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>11/23/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ENZOR HOUSE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>6089 HINSON'S CROSSROADS FAIR BLUFF, NC 28439</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on November 23, 2022. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></p> <p><b>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</b></p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure fire and disaster drills were held at least quarterly (Q) and repeated on each shift. The findings are:</p> <p>Interview on 11/22/22 the Group Home Manager</p>	V 114		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 114	<p>Continued From page 1</p> <p>stated the facility shifts were as follows: - 1st shift was 7:30am- 4pm. - 2nd shift was 4pm- 11:59pm. - 3rd shift was 12am-8am</p> <p>Review on 11/22/22 of facility fire and disaster drills from 10/1/21 - 9/30/22 revealed: -Q: 10/01/21- 12/31/21: No disaster drills documented on the 1st shift and 2nd shift. -Q: 1/1/22-3/31/22: No disaster drills documented on the 1st shift and 3rd shift. -Q: 4/1/22-6/30/22: No disaster drill documented on the 3rd shift and no fire drill documented on the 2nd shift. -Q: 7/1/22-9/30/22: No disaster drills documented on the 1st, 2nd, or 3rd shift.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>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</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>current. Medications administered shall be recorded immediately after administration. The MAR is to include the following:</p> <ul style="list-style-type: none"> <li>(A) client's name;</li> <li>(B) name, strength, and quantity of the drug;</li> <li>(C) instructions for administering the drug;</li> <li>(D) date and time the drug is administered; and</li> <li>(E) name or initials of person administering the drug.</li> </ul> <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: Based on record review, observation, and interview, the facility failed to ensure medications were administered as ordered and accurately recorded immediately after administration effecting 2 of 3 clients audited (#2, #3). The findings are:</p> <p>Finding #1: Review on 11/22/22 of client #3's record revealed: -34 year old male admitted 11/1/15. -Diagnoses included autism spectrum disorder, disruptive behavior disorder, profound intellectual developmental disabilities, absence seizures, grand mal seizures, legally blind, acne, and constipation. -Physician orders dated 3/2/22 included: - Clindamycin 1% lotion applied daily to face. (acne) -Saline Mist 0.65% nasal spray, 3 drops in</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>each nostril daily. (dryness of nasal passages) -Vitamin D3 2,000 units every morning. (supplement) -Zegerid 40 mg (Milligrams) every morning (heartburn symptoms) -Allegra 60 mg twice daily (allergy relief) -Cetaphile gentle skin cleanser twice daily (acne) -Docusate 100 mg, 2 capsules twice daily (constipation) -Lamotrigine 300mg twice daily at 8am and 1pm (seizures, bipolar disorder) -Erythromycin 2% gel twice daily (acne) -Fluticasone 50 mcg (micrograms) nasal spray, 2 sprays in each nostril twice daily (allergy relief) -Risperidone 1.5mg at 8am and 1pm (bipolar disorder and irritability caused by autism) -Polymyxin eye drops, 1 drop in both eyes every 3 hours (antibiotic) -Lorazepam 1 mg 3 times daily as needed for serial seizures -Tiagabine HCL 16 mg 3 times daily (seizure control) -Valium 5mg times daily as needed for anxiety and prior to procedure.</p> <p>Review on 11/22/22 of client #3's for September 2022 MARs from 9/1/22 - 11/22/22 revealed: -No documentation the following medications had been administered as ordered/scheduled for 8am on 9/29/22: - Clindamycin 1% lotion applied daily to face. -Saline Mist 0.65%, 3 drops in each nostril daily. -Vitamin D3 2,000 Units -Zegerid 40 mg -Allegra 60 mg -Cetaphile gentle skin cleanser twice daily -Docusate 100 mg, 2 capsules</p>	V 118		

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V 118	<p>Continued From page 4</p> <ul style="list-style-type: none"> <li>-Lamotrigine 300mg</li> <li>-Erythromycin 2% gel</li> <li>-Fluticasone 50 mcg nasal spray</li> <li>-Risperidone 1.5mg</li> </ul> <p>-No documentation Polymyxin eye drops had been administered for the following dosing times: 11pm from 9/15/22-9/18/22, 2am and 5 am on 9/15/22 &amp; 9/18/22.</p> <p>Observation on 11/22/22 at 1pm and 3pm revealed:</p> <ul style="list-style-type: none"> <li>-Client #3's medications scheduled to be administered at 1 pm were still in the facility at 1 pm, but client #3 was not in the facility.</li> <li>-Client #3's 1 pm medications on hand were Risperidone 0.5mg tablets and 1 mg tablets used to administer the order 1.5mg at 1 pm, Tiagabine HCL 16 mg, and Lamotrigine 150 mg tablets (2 tablets).</li> <li>-At 2:30 pm client #3 returned to the facility and staff administered his 1pm medications at approximately 3 pm.</li> <li>-There was no Erythromycin 2% or valium 5 mg, or Lorazepam 1 mg on site.</li> </ul> <p>Finding #2: Review on 11/22/22 of client #2's record revealed:</p> <ul style="list-style-type: none"> <li>-76 year old male admitted 11/1/15.</li> <li>-Diagnoses included mild intellectual developmental disabilities, traumatic brain injury (TBI), personality change due to TBI; mood disorder, and history of seizures.</li> <li>-Order dated 10/25/21 for Olopatadine 0.1%, 1 drop in each eye daily at 8am. (eye itching)</li> </ul> <p>Review on 11/22/22 of client #2's MARs for November 2022 revealed all doses of Olopatadine 0.1% eye drops had been documented at 8am daily for 11/20/22 - 11/22/22.</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>Observation of medications on hand at 1:50 pm on 11/22/22 revealed no Olopatadine 0.1% eye drops on hand.</p> <p>Interview on 11/22/22 the group home manager stated: -The facility had been out of client #2's Olopatadine 0.1% eye drops since 11/20/22. -Staff should not have documented client #2's eye drops had been administered since 11/20/22. -Most likely client #3's medications not documented on 9/29/22 had been given but staff failed to document. -Client #3 had never had a seizure and required the as needed seizure medications that were not on hand.</p> <p>Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician.</p>	V 118		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a clean, attractive and orderly manner. The findings are:</p>	V 736		

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V 736	<p>Continued From page 6</p> <p>Observations on 11/22/22 between 9:30 am and 10 am of the facility revealed:</p> <ul style="list-style-type: none"> <li>-Paint worn from the window sill over the kitchen sink exposing bare wood.</li> <li>-Finish on lower cabinets worn exposing bare wood surface near the kitchen sink.</li> <li>-Spatter of grease behind stove.</li> <li>-Kitchen cabinet finishes worn and darkened near pulls.</li> <li>-Dust visible along horizontal surface of cabinet door front mounted over the dishwasher and in the vertical space between this door and lower cabinet to the left.</li> <li>-Rust colored pitting of Toaster on kitchen counter.</li> <li>-Filing cabinets in the eat in area of the kitchen surfaces had rust colored areas of worn paint present.</li> <li>-Smoke detector located near doorway between the kitchen and living room was chirping.</li> <li>-Paint worn on door facing between the kitchen and living room.</li> <li>-Painted surface on the top of the chest freezer was almost completely worn away and covered in rust.</li> <li>-Bathroom adjacent to the utility room: Dust visible on base boards below sink area, red stains present on the door, and dark staining and paint worn off the door at the level of the door knob.</li> <li>-2nd Bathroom: Paint worn from corner near tub; paint discolored and worn around the door knob; dust visible on base boards.</li> </ul> <p>Interview on 11/22/22 the Group Home Manager stated:</p> <ul style="list-style-type: none"> <li>-She had put in a request for a new freezer.</li> <li>-The red colored stains on the bathroom door were food stains.</li> <li>-She agreed there were some updates and</li> </ul>	V 736		

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V 736	Continued From page 7  painting needed. -She would make sure the cleaning issues were corrected.	V 736		