STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL024-108	A. BUILDING: _____ B. WING _____	R 11/23/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ENZOR HOUSE	6089 HINSON'S CROSSROADS FAIR BLUFF, NC 28439

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V 000	INITIAL COMMENTS An annual survey was completed on November 23, 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 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use. 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: Interview on 11/22/22 the Group Home Manager	V 114		

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V 114	Continued From page 1 stated the facility shifts were as follows: - 1st shift was 7:30am- 4pm. - 2nd shift was 4pm- 11:59pm. - 3rd shift was 12am-8am 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. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 114		
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	V 118		

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V 118	Continued From page 2 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. (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, 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: 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	V 118		

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V 118	Continued From page 3	V 118		

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.

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

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V 118	Continued From page 4 -Lamotrigine 300mg -Erythromycin 2% gel -Fluticasone 50 mcg nasal spray -Risperidone 1.5mg -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 & 9/18/22. Observation on 11/22/22 at 1pm and 3pm revealed: -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. -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). -At 2:30 pm client #3 returned to the facility and staff administered his 1pm medications at approximately 3 pm. -There was no Erythromycin 2% or valium 5 mg, or Lorazepam 1 mg on site. Finding #2: Review on 11/22/22 of client #2's record revealed: -76 year old male admitted 11/1/15. -Diagnoses included mild intellectual developmental disabilities, traumatic brain injury (TBI), personality change due to TBI; mood disorder, and history of seizures. -Order dated 10/25/21 for Olopatadine 0.1%, 1 drop in each eye daily at 8am. (eye itching) 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.	V 118		

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V 118	Continued From page 5 Observation of medications on hand at 1:50 pm on 11/22/22 revealed no Olopatadine 0.1% eye drops on hand. 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. 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		
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 observations and interviews, the facility was not maintained in a clean, attractive and orderly manner. The findings are:	V 736		

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V 736	Continued From page 6 Observations on 11/22/22 between 9:30 am and 10 am of the facility revealed: -Paint worn from the window sill over the kitchen sink exposing bare wood. -Finish on lower cabinets worn exposing bare wood surface near the kitchen sink. -Spatter of grease behind stove. -Kitchen cabinet finishes worn and darkened near pulls. -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. -Rust colored pitting of Toaster on kitchen counter. -Filing cabinets in the eat in area of the kitchen surfaces had rust colored areas of worn paint present. -Smoke detector located near doorway between the kitchen and living room was chirping. -Paint worn on door facing between the kitchen and living room. -Painted surface on the top of the chest freezer was almost completely worn away and covered in rust. -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. -2nd Bathroom: Paint worn from corner near tub; paint discolored and worn around the door knob; dust visible on base boards. Interview on 11/22/22 the Group Home Manager stated: -She had put in a request for a new freezer. -The red colored stains on the bathroom door were food stains. -She agreed there were some updates and	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		