

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL097-003</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/30/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SHIRLEY BLACKBURN RANDLEMAN CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>118 PEACE STREET NORTH WILKESBORO, NC 28659</b>
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(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	<p><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on November 30, 2022. The complaint was unsubstantiated (intake #NC 00194802). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 5000 Facility Based Crisis Service for Individuals of All Disability Groups.</p> <p>This facility is licensed for 16 and currently has a census of 5. The survey sample consisted of audits of 2 current clients and 1 former client.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></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 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;</p>	V 118		

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

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V 118	<p>Continued From page 1</p> <p>(D) date and time the drug is administered; and (E) name or initials of person administering the drug.</p> <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 reviews and interview, the facility failed to keep the MARs current for 2 of 3 audited clients (Client #1 and Client #2). The findings are:</p> <p>Review on 11/29/22 of Client #1's record revealed: -Date of admission: 11/27/22. -Diagnoses: Opiate Use Disorder, Severe; Opiate Withdrawal. -Physician's orders dated 11/27/22 included the following: Neurontin/gabapentin 300 milligrams (mg) four times per day used to treat seizures and/or pain, Sinemet/carbidopa and levodopa 25/240 mg three times per day used to treat movement disorder, and Vivitrol/naltrexone 3 mg daily used to treat opioid addictions.</p> <p>Review on 11/29/22 of Client #1's November 2022 MAR revealed: - Neurontin/gabapentin 300 milligrams (mg) four times per day used to treat seizures and/or pain, Sinemet/cabidopa and levodopa 25/240 mg three times per day used to treat movement disorder, and Vivitrol/naltrexone 3 mg daily used to treat</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>opioid addictions were transcribed without complete instructions to include the route of administration, or the quantity of each medication.</p> <p>Review on 11/29/22 of Client #2's record revealed: -Date of admission: 11/25/22. -Diagnoses: Stimulant Use Disorder, Severe; Stimulant Withdrawal. -Physician's orders dated 11/25/22 included Vistaril/hydroxyzine 25 mg every 4 hours as needed for anxiety.</p> <p>Review on 11/29/22 of Client #2's November 2022 MAR revealed: -Vistaril/hydroxyzine 25 mg every 4 hours as needed for anxiety was transcribed without complete instructions to include the route of administration, or the quantity of the medication.</p> <p>Interview on 11/29/22 with the Unit Manager revealed: -Client MARs would be reviewed to ensure that each medication had complete instructions.</p>	V 118		