

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601464	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 01/23/2023
NAME OF PROVIDER OR SUPPLIER ROPES, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 10721 GLENLUCE AVENUE CHARLOTTE, NC 28213		
(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>INITIAL COMMENTS</p> <p>A limited follow up survey for the Type A1 was completed on 01/23/2023. This was a limited follow up survey, only 10A NCAC 27G .0209 Medication Requirements (V116), 10A NCAC 27G .0209 Medication Requirements (V117), and 10A NCAC 27G .0209 Medication Requirements (V118), were reviewed for compliance. The following were brought back into compliance 10A NCAC 27G .0209 Medication Requirements (V116) and 10A NCAC 27G .0209 Medication Requirements (V117). 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>The 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 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept</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>current. Medications administered shall be recorded immediately after administration. The MAR is to include the following:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(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 observations, record reviews, and interviews, the facility failed to ensure medications were administered on the written order of a physician and failed to keep MARs current affecting 2 of 3 Clients (#1 and #2). The Findings are:</p> <p>Findings #1:</p> <p>Review on 12/14/2022 of Client #1's record revealed:</p> <p>-10-year-old male.</p> <p>-Admitted 08/30/2022.</p> <p>-Diagnosed with Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder (ADHD), Moderate Intellectual Developmental Disability (IDD), and Schizophrenia.</p> <p>Review on 12/14/2022 of Client #1's signed</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>physician orders revealed:</p> <ul style="list-style-type: none"> -Atomoxetine HCL (Hydrochloric Acid) (attention)- 25 milligram (mg)- take 1 capsule by mouth every morning dated 11/22/2022. -Guanfacine HCL (attention) 2 mg- take 1 tablet (tab) by mouth twice a day dated 11/22/2022. -Prazosin HCL (urinary retention) 1 mg- take 1 capsule (cap) by mouth every day at bedtime dated 11/22/2022. -Depakote Sprinkles (mood stabilizer) 125 mg- take 1 cap TID (three times a day) dated 11/22/2022. <p>Review on 12/14/2022 of Client #1's December 05, 2022-December 14, 2022, MAR revealed:</p> <p>No administration for;</p> <ul style="list-style-type: none"> -Atomoxetine HCL 25 mg on 12/10/2022 and 12/11/2022 at 8 am. -Guanfacine HCL 2 mg on 12/5/2022, 12/6/2022, 12/10/2022, 12/11/2022 for 8 am and 8 pm and 12/12/2022 at 8 pm. -Prazosin HCL 1 mg on 12/5/2022, 12/6/2022, 12/7/2022, 12/8/2022, 12/9/2022, 12/10/2022, 12/11/2022, and 12/12/2022 at 8 pm. -Depakote Sprinkles 125 mg on 12/5/2022, 12/10/2022 and 12/11/2022 for 8 am; 12/5/2022, 12/6/2022, 12/7/2022, 12/8/2022, 12/9/2022, 12/10/2022, 12/11/2022, and 12/12/2022 for 4 pm and 8 pm. <p>Findings #2:</p> <p>Review on 12/14/2022 of Client #2's record revealed:</p> <ul style="list-style-type: none"> -16-year-old male. -Admitted 11/08/2021. -Diagnosed with Disruptive Mood Disorder, Conduct Disorder, and Persistent Depressive Disorder. 	V 118		

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V 118	<p>Continued From page 3</p> <p>Review on 12/14/2022 of Client #2's signed physician orders revealed:</p> <ul style="list-style-type: none"> -Abilify 10 mg (antipsychotic)- take 1 tab by mouth every morning dated 11/30/2022. -Tegretol (mood stabilizer) 200 mg- take 1 tab by mouth twice daily dated 11/10/2022. -Concerta HCL ER (attention) 36 mg- take 1 tab daily dated 09/12/2022. -No order for Concerta HCL ER 27 mg. <p>Review on 12/14/2022 of Client #2's December 05, 2022-December 14, 2022 MAR revealed:</p> <p>No administration for:</p> <ul style="list-style-type: none"> -Abilify 10 mg on 12/11/2022 at 8 am. -Tegretol 200 mg on 12/11/2022 at 8 am. -Concerta HCL ER 36 mg on 12/14/2022 at 8 am. -No transcription for Concerta HCL ER 27 mg. <p>Review on 01/19/2023 of Client #2's December 05, 2022-December 14, 2022 MAR revealed:</p> <ul style="list-style-type: none"> -Error correction for Concerta HCL ER 36 mg to Concerta HCL ER 27 mg. -Staff initials added for; Abilify 10 mg on 12/11/2022 at 8 am, Tegretol 200 mg on 12/11/2022 at 8 am, and Concerta HCL ER 27 mg on 12/14/2022 at 8 am. <p>Observation on 12/14/2022 at approximately 12:30 pm-12:50 pm of Client #2's medications revealed:</p> <ul style="list-style-type: none"> -Bottle of Concerta HCL ER 27 mg dispensed from the pharmacy on 11/20/2022. -No Concerta HCL ER 36 mg. <p>Observation on 12/14/2022 during a phone interview with the Licensee (L)/Executive Director (ED)/Qualified Professional (QP) while on speaker phone, he was overheard instructing the Lead QP to initial the MARs.</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>Interview on 12/14/2022 with the Lead QP revealed: - "Staff must have forgotten to initial after giving meds (medications)." - Had provided current physician orders for Clients #1 and #2.</p> <p>Interview on 12/14/2022 with the L/ED/QP revealed: - "[Client #1] was in the hospital from 12/13/2022 to 12/17/2022. Staff should have initialed and circled and there should have been a note on the back of the MAR that said he was in the hospital and medications was not administered." - "The QP provide medication oversight and make sure meds are administered. We trained and retrained staff on the medication administration and we have our in-house training."</p> <p>Interview on 01/19/2023 with the Lead QP revealed: - Was the QP for the facility. - Was responsible for medication oversight. - "Maybe somebody forgot to sign them (MARs). I don't know what to say. We made sure everything was up to date. We are supposed to sign and date after we give them (meds)."</p> <p>Interview on 01/19/2023 with the L/ED/QP revealed: - Was not a Registered Nurse (RN). - Retrained the Lead QP on the medication process. - "The (Lead) QP is responsible for making sure everything match; the meds, MARs, and etc." - "Our process is for there to be two staff signatures on MARs." - "We have a nurse to come in every month to make sure the meds, MARs, and orders match." - "No, there is not a nurse."</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>-Would provide documentation to support staff retraining on medication administration processes.</p> <p>Interview on 01/23/2023 with the L/ED/QP revealed: -"I don't have the information (documentation to support staff retraining on medication administration processes)."</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> <p>Review on 01/23/2023 of the Plan of Protection written by the Licensee/Executive Director/Qualified Professional dated 01/23/2023 revealed: "What immediate action will the facility take to ensure the safety of the consumers in your care? *Medications given must be updated in the MAR Form immediately after administration. *Ropes has implemented a 2-party signature system which both the person administering and the witness must sign immediately. *Ropes will enforce by writing up/possible termination/reassignment of lead QP on staff if found out of compliance. *Ropes is also training on online MAR record system for off-site supervisor to be able to access at any moment. Describe your plans to make sure the above happens. *Lead QP must administer and initial each MAR before administration of next client/consumer. *Witness must also ensure MAR Form is signed immediately upon administration. *Witness must also ensure MAR Form is updated at the time of administration.</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>*Both signatures will ensure that MAR is updated at the time of administration.</p> <p>*Online MAR records are being implemented (2nd Quarter 2023) and ability to access by of site supervisors/clinical staff for immediate access to ensure MAR is updated in proper fashion."</p> <p>Client #1 was a 10-year-old male diagnosed with Autism Spectrum Disorder, ADHD, Moderate IDD, and Schizophrenia. Client #2 was a 16-year-old male diagnosed with Disruptive Mood Disorder, Conduct Disorder, and Persistent Depressive Disorder. Client #1 was prescribed Atomoxetine HCL, Guanfacine HCL, Prazosin HCL, and Depakote Sprinkles. Client #2 was prescribed Abilify, Tegretol, and Concerta HCL ER. The facility failed to administer and/or document administration of 24 medication dosages for Client #1 and 3 medication dosages for Client #2. On 12/14/2022, under the direction of the L/ED/QP, the Lead QP initialed the MARs after the fact for dates he did not administer medications to clients. In addition, facility failed to maintain current medication orders for Client #2. The facility administered a medication to Client #2 without a valid physician's order and failed to update the MAR to reflect the change in dosage. This deficiency constitutes a Continued Failure to Correct Type A1 rule violation originally cited for serious neglect. An administrative penalty of \$500.00 per day is imposed for failure to correct within 23 days.</p>	V 118		