

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL001-094	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/11/2023
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NAME OF PROVIDER OR SUPPLIER SPRING HILL GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 154 HUFFINE STREET GIBSONVILLE, NC 27249
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V 000	<p>INITIAL COMMENTS</p> <p>Ann annual and follow-up survey was completed on April 11, 2026. 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 6 and currently has a census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</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 interview the facility failed to conduct fire and disaster drills on every shift at least quarterly. The findings are:</p> <p>Review on 4/11/23 of the facility's fire drills record revealed:</p>	V 114		

Division of Health Service Regulation 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>-No fire drills were conducted for 2nd and 3rd shift for the 1st quarter of 2023. -No fire drills were conducted for 2nd shift for the 4th quarter of 2022.</p> <p>Review on 4/11/23 of the facility's disaster drills record revealed: -No disaster drills were conducted for 1st, 2nd or 3rd shift for the 1st quarter of 2023. -No disaster drills were conducted for 1st, 2nd or 3rd shift for the 4th quarter of 2022. -No disaster drills were conducted for 1st, 2nd or 3rd shift for the 3rd quarter of 2022.</p> <p>Interview on 4/11/23 with the Vice President and the Qualified Professional revealed: -They were not aware that the drills had not been conducted appropriately. -They confirmed the facility had not conducted fire and disaster drill on every shift and for each quarter.</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</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>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; (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.</p> <p>This Rule is not met as evidenced by: Based on records review and interview the facility failed to administer medications on the written order of a physician for two of three clients (#2 and #3) and failed to keep the MAR current for 2 of 3 clients (#2 & #3). The findings are:</p> <p>Review on 4/11/23 of client #2's record revealed: -Admission date of 5/15/14. -Diagnoses of Psychotic Disorder, Not Otherwise Specified; Mood Disorder, Not Otherwise Specified; Attachment Disorder; Unilateral Deafness; Sickle Cell Trait; Constipation; Vascular Septal Defect; Moderate Intellectual and Developmental Disabilities.</p>	V 118		

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V 118	<p>Continued From page 3</p> <ul style="list-style-type: none"> -Physician orders dated 7/5/22 revealed: <ul style="list-style-type: none"> -Polyethylene Glycol 3350- Mix 17 grams in 4 -8 ounces of liquid & take once daily. -Sertraline 100 milligrams (mg)- take one tablet once a day. -Clonidine 0.1 mg- take two tablets daily at night. -Haloperidol 5 mg- Take 1/2 tablet daily in the morning. -Gabapentin 400 mg- Take two capsules daily in the morning. -Sodium Fluoride gel 1.1%- Brush teeth with a pea sized amount daily. -Trazodone 50 mg- Take one tablet daily at bedtime. -Prazosin 1 mg, Take three capsules daily at bedtime. -Ketoconazole cream 2%- Apply topically to face & behind ears once to twice a day. <p>Observation on 4/11/23 at about 11:40 am of client #2's medications revealed:</p> <ul style="list-style-type: none"> -Polyethylene Glycol 3350 was not available. -Sodium Fluoride gel 1.1% was not available. -Ketoconazole cream 2% was not available. <p>Review on 4/11/23 of client #2's MARs for February 2023 through April 11, 2023 revealed the following dates were not initialed:</p> <p>February:</p> <ul style="list-style-type: none"> -Sertraline 100 milligrams (mg)- 2/17. -Clonidine 0.1 mg- 2/14. -Haloperidol 5 mg- 2/7. -Gabapentin 400 mg- 2/7. -Trazodone 50 mg- 2/7. -Prazosin 1 mg- 2/7, 2/13; 2/15-2/17; 2/21. <p>March:</p> <ul style="list-style-type: none"> -Gabapentin 400 mg- 3/30. -Trazodone 50 mg- 3/30. 	V 118		

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V 118	<p>Continued From page 4</p> <p>-Prazosin 1 mg- 3/26.</p> <p>April:</p> <p>-Gabapentin 400 mg- 4/2.</p> <p>Review on 4/11/23 of client #3's record revealed:</p> <p>-Admisison date of 10/7/93.</p> <p>-Diagnoses of Schizoaffective Disorder, Unspecified; Mild Intellectual Disabilities; Type 2 diabetes mellitus with Unspecified Complications; Essential (primary) Hypertension; Hypothyroidism; Gastroesophageal Reflux Disease without Esophagitis; Obstructive Sleep Apnea; Mixed Hyperlipidemia; Atherosclerotic Heart Disease of Native Coronary Artery Without Angina Pectoris; Chronic Systolic CHF; Bilateral Leg Edema; Acute Subendocardial Myocardial Infarction; Shortness of Breath; Chest pain, Unspecified; Allergies.</p> <p>-Review of Physician orders revealed:</p> <p>Orders dated 8/22/22:</p> <p>-Fluticasone Spray 50 mcg- Two sprays daily.</p> <p>-Metformin 500 mg, Take one tablet once a day.</p> <p>-Nystatin Cream 10000- Apply topically twice a day.</p> <p>-Inositol 500 mg, Take two capsules twice a day.</p> <p>Order dated 1/22/23:</p> <p>-Levothyroxine 25 mcg- Take one tablet once a day.</p> <p>Order dated 3/23/23:</p> <p>-Miralax Powder- Mix 17 grams in 4-8 ounces of liquid & take once daily.</p> <p>Observation on 4/11/23 at about 12:05 pm of client #3's medications revealed:</p> <p>-Fluticasone Spray 50 mcg was not available.</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>-Nystatin Cream 10000 was not available.</p> <p>Review on 4/11/23 of client #3's MARs for February 2023 through April 11, 2023 revealed the following dates were not initialed:</p> <p>March:</p> <ul style="list-style-type: none"> -Fluticasone Spray 50 mcg- dates from 3/19-3/31 were marked as circled. No explanation on back of sheet why it was circled. -Miralex Powder- dates from 3/8-3/31 were marked as circled. No explanation on back of sheet why it was circled. -Inositol 500 mg- 3/13 @7:00 am. <p>April:</p> <ul style="list-style-type: none"> -Fluticasone Spray 50 mcg- dates from 4/1-4/11 were marked as circled. No explanation on back of sheet why it was circled. -Levothyroxine 25 mcg- 4/5. -Miralex Powder- 4/3,4/5, 4/7, 4/10. -Metformin 500 mg- 4/5. -Nystatin Cream 10000- dates from 4/1-4/11 were marked as circled. No explanation on back of sheet why it was circled. <p>Interview on 4/11/23 with the Qualified Professional revealed:</p> <ul style="list-style-type: none"> -She was not aware that some of the client's medications were not at the facility. -She thought staff at the house may had ordered the medications and they had not arrived yet. -Facility received client's medications weekly on Thursdays. -Circles on the client's MAR perhaps informed that the medication was out. -She did not know why it may had taken so many days for the missing medications to arrive. -She was not aware that there were dates on clients #2 and #3's MAR that had not been initialed by the staff. 	V 118		

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V 118	<p>Continued From page 6</p> <p>-She acknowledged facility staff failed to keep the MAR current for clients #2 and #3.</p> <p>-She acknowledged facility staff failed to administer medications for clients #2 and #3 as prescribed by their physicians.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		