

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL041-975</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>04/28/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SERVANT'S HEART III</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3317 HORSE PEN CREEK ROAD, APT 1B GREENSBORO, NC 27410</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 survey was completed on April 28, 2023. 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 2. The survey sample consisted of audits of 2 current clients.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></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 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>	V 118	<p><b>RECEIVED</b></p> <p><b>MAY 30 2023</b></p> <p><b>DHSR-MH Licensure Sect</b></p>	

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*Cassidy J. [Signature]*

*Director*

*5/25/23*

Division of Health Service Regulation

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V 118	<p>Continued From page 1</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 interviews, the facility failed to ensure that medications were administered on the written order of a physician affecting 1 of 2 clients (#1). The findings are:</p> <p>Review on 4/24/23 of client #1's record revealed: -Date of admission: 6/1/09; -Diagnoses: Mild Intellectual Development Disability; Prader Willi Syndrome; and Major Depression; -Physician orders for Pyridoxal, Symptoyogurt, ginger mixture, Wu jin san, castor oil salve, Wu jin san, Vitamin D drops 2,000 dated 11/3/22, and Recept/Focus drops dated 7/29/22; -Pyridoxal 1, 2, 3 one from each bag 10 minutes before any meal three days per week for four weeks, then off for one week; -Symptoyogurt 10 minutes before any meal twice daily for two weeks, then off two weeks; -Ginger mixture 2 ounces twice daily, 15 minutes before any two meals; -Wu jin san, castor oil salve apply Wu jin san full strength to area of panniculus bilaterally twice daily followed by herbal cream; -"Wu jin san 2 ounces daily at least 60 minutes away from food for the purposes of this order, ginger mixture and medications are not food;" -Recept/Focus 20 drops twice daily 8am and 8</p>	V 118		
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V 118	<p>Continued From page 2</p> <p>pm; -Vitamin D drops 2,000 IU daily by mouth after any meal; -Nutritional supplements prescribed by a doctor who specializes in homeopathy using non-traditional/alternative medications.</p> <p>Review on 4/26/23 of client #1's MAR for April of 2023 revealed: -Pyridoxal was not documented as being administered prior to dinner on 4/25/23 and 4/26/23; -Symptoyogurt was not documented as being administered prior to breakfast on 4/3/23 or prior to dinner on 4/7/23, and 4/25/23; -Wi jin san castor oil and Wi jin san 2 ounces away from food was not documented as being administered on 4/3/23; -Focus drops were not documented as being administered at 8:00 am on 4/3/23 and 8:00 pm on 4/7/23, and 4/25/23.</p> <p>Review on 4/26/23 of the MARs for the months of January, February, and March of 2023 revealed: -Pyridoxal was not documented as being administered prior to dinner on 1/9/23, 1/11/23, 1/23/23, 1/26/23, and 1/30/23, 2/15/23, 2/22/23, 3/21/23, and 3/29/23; -Symptoyogurt was not documented as being administered prior to dinner on 2/15/23, 2/22/23, and 2/24/23; -Wi jin san castor oil was not documented as being administered on 2/15/23, 2/16/23, 2/22/23, and 2/24/23; -Recept/Focus drops were not documented as being administered on 2/14/23, 2/15/23, 2/22/23, and 2/24/23; -Vitamin D drops were not documented as being administered on 2/10/23, 3/21/23, and 3/6/23.</p>	V 118	<p>Servant's Heart had previously used a paper MAR to document these prescriptions. These will now be moved onto our online MAR in Therap. This will help the medical coordinator audit the medications on a more consistent basis. These prescriptions will be added to the Therap MAR by 5/15/2023.</p>	

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V 118	<p>Continued From page 3</p> <p>Interview on 4/26/23 with client #1 revealed: -Staff #1, staff #2, and fill-in staff give her medicine every day.</p> <p>Interview on 4/26/23 with staff #1 revealed: -"The only errors (medication) are if the medication does not arrive on time to the facility or [client #1] does not make (prepare) her medication."</p> <p>Interview on 4/26/23 with the Medication Coordinator revealed: -"If the medication was not documented as being given on the weekend then client #1 was with her mother; -If it (medication) was not documented as being given on the weekday then it's a documentation error."</p>	V 118		

**Division of Health Service Regulation  
Mental Health Licensure and Certification Section  
Rule Violation and Client/Staff Identifier List**

Facility Name: Servant's Heart III MHL Number: 041-975

Exit Date: 4/24/23 to 4/28/23 Surveyor(s): [REDACTED]

**EXIT PARTICIPANTS: Cassidy Price, Director**

**COVID NOTIFICATION: In the event a COVID positive case is identified within 48 hours of a DHSR survey – the provider or DHSR should notify the other entity to prevent possible continued exposures.**

- Rule Violation/Tag #/Citation Level: 10A NCAC 27G .0209
- Rule Violation/Tag #/Citation Level: \_\_\_\_\_
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**Client & Staff Identifier List  
(Indicate staff title or number beside each name)**

**CITATION LEVEL:** Number of days from survey exit for citation correction  
**Standard** = 60 days    **Recite** – standard = 30 days    **Type A** = 23 days    **Type B** = 45 days  
**Uncorrected Type A or Type B Imposed** = provider should provide written notification of intended correction date

Client # [REDACTED]  
Client # [REDACTED]  
Client # \_\_\_\_\_  
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Client # \_\_\_\_\_

Staff # [REDACTED]  
Staff # [REDACTED]  
Staff # [REDACTED]  
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