

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 06/29/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G257		(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED R 06/27/2023	
NAME OF PROVIDER OR SUPPLIER MIDLAKE RESIDENTIAL				STREET ADDRESS, CITY, STATE, ZIP CODE 68 HILLSIDE STREET CLARKTON, NC 28433			
(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) COMPLETION DATE
W 000	INITIAL COMMENTS			W 000			
{W 368}	<p>A revisit was conducted on June 27, 2023 for all previous deficiencies cited on April 12, 2023. The following deficiencies were corrected W249 and W440. The facility remained out of compliance in W368 and W460.</p> <p>DRUG ADMINISTRATION CFR(s): 483.460(k)(1)</p> <p>The system for drug administration must assure that all drugs are administered in compliance with the physician's orders. This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure all medications were administered without error. This affected 3 of 3 audit clients (#1, #2 and #4). The findings are:</p> <p>A. During afternoon medication administration on 4/11/23 at 4:11 PM revealed Staff C prepared medications to administer to client #2. Staff C opened a capsule of Fiber-Lax and removed a Phenobarbital pill and placed them in a medicine cup filled with applesauce. Staff C fed the applesauce to client #2. Client #2 exited the medication room afterwards, without receiving any other medications.</p> <p>Record review on 4/12/23 of client #2's Physician's Orders signed on 2/15/23 revealed prescriptions for Artificial Tears, Fiber Tabs and Phenobarbital, to be given at 4:00 PM.</p> <p>B. During afternoon medication administration on 4/11/23 at 4:16 PM prepared medications to administer to client #4, but she refused and walked out of the room. An additional observation</p>			{W 368}			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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{W 368}	<p>Continued From page 1</p> <p>at 4:40 PM revealed Staff C make a second attempt to get client #4 to take her medications. Staff C held a medicine cup with Clonazepam and Quetiapine, on top of applesauce. Client #4 ingested the medications presented. Staff C was not observed to give client #4 a third pill, Gabapentin or instill Artificial Tears in her eyes.</p> <p>Record review on 4/12/23 of client #4's Physicain's Orders signed on 2/13/23 revealed prescriptions for Artificial Tears, Clonazepam, Quetiapine and Gabapentin, to be given at 4:00 PM.</p> <p>C. During morning medication administration on 4/12/23 at 8:09 AM revealed Staff I prepared medications to administer to client #1. Staff I removed from the pharmacy packets Vitamin D3, Pantoprazole SOD DR, Docusate Sodium, Tamsulosin HCL, Losartan/HCTZ, Benztropine MES, Sertraline, Ferosul and Amlodipine Besylate. All of the medications were ingested after client #1 ate breakfast at 7:30 AM. Client #1 was not observed getting any topical creams to his nails.</p> <p>Record review on 4/12/23 of client #1's Physician's Orders signed on 2/16/23 revealed prescriptions for Aladdin Besylate, Pantoprazole SOD DR before breakfast, Losartan-HCTZ, Tamsulosin HCL, Vitamin D3, Ferrous Sulfate EC, Benztropine MES, Docusate Sodium, Ciclopirox 8% Solution-TP for nail, Ketaconzole 2% Cream-TP for left great toe and Sertraline HCL to be given at 8:00 AM.</p> <p>Interview on 4/12/23 with the Day Program Manager (DPM) revealed that some new staff are eligible to be trained to pass out medications after a month of hire. The DPM revealed before the</p>	{W 368}			

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{W 368}	<p>Continued From page 2</p> <p>nurse approved the staff to dispense medications, the DPM observed staff for a week. The DPM revealed staff were expected to check the name of the client, the date, time, dose and route of medications before giving to prevent errors.</p> <p>During afternoon medication administration on 6/27/23 at 3:45 PM revealed Staff J, removed a capsule of Metamucil from a pack and placed it on top of lime gelatin, and then fed it to client #3. Client #3 ingested the whole capsule without incident.</p> <p>Review on 6/27/23 of the Physician's Orders for client #3 revealed sprinkle Metamucil on food. An additional review of client #3's diet orders revealed he was on a pureed consistency diet.</p> <p>Review on 6/27/23 of in-service training by the nurse on medication administration procedures on 5/24/23, Staff J was not in attendance.</p> <p>Interview on 6/27/23 with the interim Qualified Intellectual Disabilities Professional (QIDP) for the home revealed Staff J was normally assigned to their sister home.</p>	{W 368}			
{W 460}	<p>FOOD AND NUTRITION SERVICES</p> <p>CFR(s): 483.480(a)(1)</p> <p>Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure 2 of 3 audit</p>	{W 460}			

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{W 460}	<p>Continued From page 3</p> <p>clients (#1 and #4) received the modified diet as ordered. The findings are:</p> <p>A. During snack observations in the home on 4/11/23 at 4:30 PM, client #1 was observed eating a whole slice of coconut cake. An additional observation at dinner at 6:08 PM, client #1 was served a whole piece of salisbury steak with gravy, white rice, cooked carrots and a whole cornbread muffin. Staff D stood next to client #1 and encouraged him to cut up his food but did not ensure that it was cut into smaller pieces. Client #1 held a fork and knife but left the meat pieces into 1" which were not perforated well. When client #1 loaded the meat on the fork, all three pieces were attached and eaten at once. Client #1 finished his meal without incident.</p> <p>During morning observations in the home on 4/12/23 at 7:30 AM. Client #1 had grits, scrambled eggs and wheat toast cut into 1" pieces for breakfast. Client finished his meal without incident.</p> <p>Review on 4/11/23 of client #1's Individual Program Plan (IPP) dated 1/19/23 revealed a soft diet of finely chopped consistency. In addition, a Nutritional Evaluation on 11/16/22 revealed all food 1/4" pieces per swallow study.</p> <p>Interview on 4/12/23 with the day program manager revealed client #1 was not capable of cutting up his food to 1/4" consistency.</p> <p>Interview on 4/12/23 with the Qualified Intellectual Disabilities Professional (QIDP) revealed that all of client #1's foods should be received 1/4" if that was his order.</p>	{W 460}			

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{W 460}	<p>Continued From page 4</p> <p>B. During breakfast observations in the home on 4/12/23 at 7:30 AM client #4 received grits, scrambled eggs and pureed wheat toast. The eggs were not in a pureed consistency. Client #4 finished her meal without incident.</p> <p>Review on 4/11/23 of client #4's Nutritional Evaluation dated 11/16/22 revealed a healthy heart regular calorie pureed diet.</p> <p>Interview on 4/12/23 with the QIDP revealed clients should receive their prescribed diets.</p> <p>A follow up survey was completed on 6-27-23. During further observation in the home at 4:10 PM, Staff K prepared a bowl of whole mandarin oranges for client #5's snack. Client #5 ate the fruit without incident.</p> <p>Review on 6/27/23 of client #5's diet orders, posted in the dining room revealed she was on a soft finely chopped consistency diet.</p> <p>During further observation in the home at 4:20 PM, Staff D prepared in a blender mandarin oranges with the liquid from the can for client #4. The food was transferred in a bowl and was observed to have a soft texture but in a liquid base. There was no binding product added to absorb the liquid to achieve a pureed consistency. Staff E fed the food to client #4 without incident.</p> <p>Review on 6/27/23 of client #4's diet orders, posted in the dining room revealed she was on a pureed consistency diet.</p> <p>Review on 6/27/23 of an in-service conducted by a Registered Dietician (RD) 5/31/23 reviewed all</p>	{W 460}			

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{W 460}	Continued From page 5 diet orders and diet consistencies with staff. The attendance sheet revealed Staff D, Staff E and Staff K were in attendance. Interview on 6/27/23 with the interim QIDP revealed the RD met in person with staff and demonstrated how to prepare the proper diet consistency.	{W 460}			