STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL020-009	A. BUILDING: _____ B. WING _____	06/21/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLEASANT VALLEY GROUP HOME	33 GENTLE DOVE LANE MURPHY, NC 28906

(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	INITIAL COMMENTS An annual and complaint survey was completed on June 21, 2023. The complaint was unsubstantiated (intake #NC00202296). This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.	V 000		
V 118	27G .0209 (C) Medication Requirements 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; (D) date and time the drug is administered; and (E) name or initials of person administering the	V 118	DHSR - Mental Health JUL 07 2023 Lic. & Cert. Section	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Jack Cashmen — TITLE: Executive Director/QP — (X6) DATE: 7-4-23

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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V 118	Continued From page 1 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. This Rule is not met as evidenced by: Based on record reviews, observation and interviews, the facility failed to ensure a medication was administered as ordered by a physician affecting 1 of 3 audited clients (Client #2). The findings are: Review on 6/20/23 of Client #2's record revealed: -Date of Admission: 5/23/21. -Diagnoses: Developmental Disorder of Scholastic Skills; Arnold-Chiari Syndrome; Autistic Disorder; Cerebral Palsy; Localization-Related (focal) (partial) Symptomatic Epilepsy and Epileptic Syndromes with Complex Partial Seizures, Not Intractable, without Status Epilepticus; Constipation; Attention-Deficit Hyperactivity Disorder; Allergic Rhinitis; Congenital Hydrocephalus; Anxiety Disorder; Severe Intellectual Disabilities; Bee Allergy Status; Malignant Hyperthermia due to Anesthesia, Initial Encounter; Obsessive Compulsive Disorder. -A physician's order dated 2/13/23 for melatonin 24 milliliters (ml's) by mouth at bedtime for insomnia. Observation on 6/21/23 at approximately 10:00 am of Client #2's medication revealed:	V 118		

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V 118	Continued From page 2 -A bottle of melatonin 2.5 milligrams (mg) per 10 ml's labeled with instructions to take 24 ml's by mouth at bedtime. Review on 6/21/23 of Client #2's MARs dated 4/1/23 through 6/21/23 revealed: -Melatonin 2.5 mg/ml was transcribed on the MAR with instructions to take 10 ml's by mouth at bedtime. Interview on 6/21/23 with the Group Home Manager revealed: -The Qualified Professional (QP)/Executive Director (ED) was responsible for providing oversight to client MARs. Interview on 6/21/23 with the QP/ED revealed: -He was responsible for ensuring accuracy of client MARs. -He misread the administration instructions for Client #2's melatonin. -He had typed 10 ml's on the MAR instead of 24 ml's. -The error was corrected today. -He would ensure that all medication labels and MAR instructions matched the physician's orders every month. This deficiency constitutes a recited deficiency and must be corrected within 30 days.	V 118	QP had mis-read the script and put the wrong MG strength on the MAR. QP corrected the MAR and will look closely at prescriptions and make sure whats recorded on MAR matches script. QP will follow up monthly to insure bottles, MAR, and scripts match.	