

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL024-109	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 07/20/2023
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NAME OF PROVIDER OR SUPPLIER COLUMBUS HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 220 EAST COLUMBUS STREET WHITEVILLE, NC 28472
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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>INITIAL COMMENTS</p> <p>An annual, complaint and follow up survey was completed on July 20, 2023. The complaint was unsubstantiated (Intake #NC00204001). Deficiencies were cited.</p> <p>This facility is licensed for the following category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for 5 and currently has a census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 121	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (f) Medication review: (1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated. (2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to obtain drug regimen reviews for 3 of 3 clients (#1, #2, and #3) who received psychotropic medications. The findings are:</p>	V 121		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 121	<p>Continued From page 1</p> <p>Review on 07/12/23 client #1's record revealed:</p> <ul style="list-style-type: none"> - 67 year old male. - Admission date 02/20/17. - Diagnoses of Psychotic Disorder, Epilepsy, Moderate Mental Retardation and Anxiety Disorder. - The last 6 month drug regimen review that had been completed was 02/1/22. <p>Review on 07/12/23 of client #1's current drug regimen revealed:</p> <ul style="list-style-type: none"> Depakote (treats seizures) Docusate Sodium (stool softner) Levetiracetam (treats seizures) Primidone (treats seizures) Sertraline (antidepressant) Trazodone (antidepressant) Vitamin D (Supplement) Lacosamide (treats seizures) Clonazepam (treats seizures) <p>Review on 07/12/23 of client #2's record revealed:</p> <ul style="list-style-type: none"> - 51 year old female. - Admission date of 11/01/15. - Diagnoses of Down Syndrome and Moderate Intellectual Developmental Disability. - The last 6 month drug regimen review that had been completed was 02/1/22. <p>Review on 07/12/23 of client #2's current drug regimen revealed:</p> <ul style="list-style-type: none"> Benzotropine (symptoms of Parkinson's disease) Levothyroxine (thyroid) Omeprazole (reflux) Pravastatin (Cholesterol) Trazodone (treats seizures) Vitamin D (Supplement) Ziprasidone (treat schizophrenia) 	V 121		

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V 121	<p>Continued From page 2</p> <p>Review on 07/12/23 of client #3's record revealed: -36 year old male. -Admission date of 0820/19. -Diagnoses of Autism, Acne, Severe Mental Retardation. -The last 6 month drug regimen review that had been completed was 02/1/22.</p> <p>Review on 07/12/23 of client #3's current drug regimen revealed: Chlorpromazine (treat psychotic disorders) Divalproex (treats seizures) Melatonin (sleep) Propranolol (treat high blood pressure) Clonazepam (treat seizures)</p> <p>During interview on 07/18/23 the Qualified Professional revealed: -The Pharmacy was responsible for completing the drug regimen reviews. -She would contact the pharmacy to inform them the drug regimen reviews needed to be completed.</p>	V 121		