

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL076-131	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 06/27/2023
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NAME OF PROVIDER OR SUPPLIER PATH OF HOPE, INC-ALPHA HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 373 HILL STREET ASHEBORO, NC 27203
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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 and follow-up survey was completed on June 27, 2023. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 5600E Supervised Living for Substance Abuse Adults</p> <p>The facility is licensed for 6 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 118	<p>27G .0209 (C) Medication Requirements</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</p>	V 118		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Larry Joe, MA, LCRS, CCS 8/7/2023

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V 118	<p>Continued From page 1</p> <p>drug.</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 review, observation, and interview the facility failed to have physician orders to administered medications, failed to have an order to self-administer, and failed to ensure the medication administration record was kept current affecting one of three audited clients (#1). The findings are:</p> <p>Review on 6/27/23 of Client #1's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 5/1/23. - Diagnosis of Stimulant Use Disorder Cocaine Severe. - Further review revealed no physicians' orders for the following medications: <ul style="list-style-type: none"> -Quetiapine 300mg tablet - take 1 tablet by (300mg) by mouth every morning. -Duloxetine 60mg capsule - take one capsule by mouth daily. -Atorvastatin 40mg tablet - take one tablet by mouth at bedtime. -Mirtazapine 15mg tablet - take one tablet by mouth at bedtime. -Omeprazole 20 mg tablet - take two capsules by mouth twice daily. -The orders were provided from a previous facility and signed by a licensed practical nurse (LPN). -There was no self-administer order in the record. 	V 118		

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V 118	Continued From page 2 Review on 6/27/23 of the Medication Administration Record from May-June 2023 revealed the following medication was self-administered and initialed by client #1. May 2023: -Quetiapine 300mg tablet. -Duloxetine 60mg capsule. -Atorvastatin 40mg tablet. -Mirtazapine 15mg tablet. -Omeprazole 20 mg tablet. June 2023 -There was no current June 2023 MAR. Interview on 6/27/23 with the Program Director/Qualified Professional revealed: -Client #1 received discharge medication from a previous facility. -He was not aware the medication order was signed by an LPN rather than a physician. -Client #1 would be scheduled to see a doctor to get current orders. -Client #1 did not have a self-administer order from the doctor. -Client #1 did not have a June 2023 MAR. -Going forward no client would self-administer medication.	V 118	Client has an appointment scheduled for 9/18/2023 at Daymark for a Psych Eval and medication overview. Prescribing doctors medical information was obtained for Omeprazole and Quetiapine. Client has only been taking these two medications. Staff has been administering client's medication and initialing on the MAR as required and will continue to do so going forward for all clients at both Alpha and Mangum Halfway Houses.	