

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL055-026</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>09/28/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PITZER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>200 WELLINGTON DRIVE LINCOLNTON, NC 28092</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint survey was completed on September 28, 2023. The complaints were unsubstantiated (Intake #s NC00204889 and NC00206805). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 6 and has a current census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p>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</p>	V 118		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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V 118	<p>Continued From page 1</p> <p>(E) name or initials of person administering the 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 reviews and interviews, the facility failed to ensure the MAR was kept current, and administration of medications were documented immediately following administration affecting 3 of 3 audited clients (#1, #2, and #3). The findings are:</p> <p>Review on 9-1-23 of Client #1's record revealed: -Admission date: 12-29-15. -Diagnoses: Mild Intellectual Developmental Disability, type 2 diabetes, delusional disorder, anemia, hypertension, essential tremor, gastroesophageal reflux disease, and Vitamin D deficiency mixed hyperlipidemia. -Physicians orders for the following medications: --Lovastatin 40mg (milligrams), take 1 tablet by mouth at bedtime, dated 5-24-23. --Metformin 500mg, take 2 tablets by mouth twice daily, dated 5-24-23. --Vitamin B-12 1000mcg (microgram), take 1 tablet by mouth twice weekly (Monday and Thursday), dated 5-24-23.</p> <p>Review on 9-26-23 of Client #1's MAR dated 9-1-23 to 9-26-23 revealed: -No documentation of administration of the</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>following: -Lovastatin on 9-7-23. -Metformin on 9-7-23 at 8 pm. -Vitamin B-12 on 9-14-23 or 9-18-23. The MAR was signed daily on 9-1-23 to 9-8-23 (Friday to Friday).</p> <p>Review on 9-26-23 of Client #2's record revealed: -Admission date: 3-16-04. -Diagnoses: Moderate Intellectual Developmental Disability, impulse control disorder, dyslipidemia, and other speech disturbance. -Physicians orders for the following medications: --Chlorhexidine Gluconate 0.12% Solution, fill "cap" to line with solution and swish for 30 seconds twice a day spit out, do not swallow, dated 5-31-23. --Simvastatin 40mg, take 1 tablet by mouth at bedtime, dated 5-31-23. --Ocusoft Lid Scrub Pad, use on lids once daily both eyes, dated 5-31-23.</p> <p>Review on 9-26-23 of Client #2's MAR dated September 2023 revealed: -No documentation of administration of the following: -Chlorhexidine Gluconate 0.12% Solution on 9-20-23 at 8 pm. -Simvastatin on 9-22-23. -Ocusoft Lid Scrub Pad on 9-8-23 and 9-23-23.</p> <p>Review on 9-26-23 of Client #3's record revealed: -Admission date: 2-12-23. -Diagnoses: Mild Intellectual Developmental Disability, diabetes, schizophrenia, hypertension, Attention Deficit Disorder, hypothyroidism, and allergic rhinitis. -Physicians orders for the following medications: --Humalog 100 unit/ml (milliliters) soln (solution) vial, to use with insulin pump once daily for tdd</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>(total daily dose) of 50 units, dated 5-19-23. --Humalog 100 unit/ml soln vial, in case of pump failure, check FSBS (finger stick blood sugar) and inject per SSI (sliding scale insulin) before each meal, dated 5-19-23. --Humalog 100 unit/ml soln vial, inject 100 units subcutaneously once daily via insulin pump, dated 5-19-23. --Lorazepam 0.5mg, take 2 tablets (1mg) by mouth twice a day, dated 5-19-23. --Solifenacin 5mg, take 1 tablet by mouth once daily, dated 5-19-23.</p> <p>Review on 9-26-23 of Client #3's MAR dated July 2023 revealed: -Humalog 100 unit/ML solution vial - inject 100 units subcutaneously once daily via insulin pump. No documentation of administration on 7-19-23. -Humalog - in case of pump failure, check FSBS and inject per SSI before each meal. -7 am: signed every day. -12 pm: signed every day except 7-12-23 to 7-14-23, 7-17-23 to 7-19-23, 7-27-23, and 7-31-23. -5 pm: signed every day except 7-18-23.</p> <p>Review on 9-26-23 of Client #3's MAR dated August 2023 revealed: -Humalog - in case of pump failure, check FSBS and inject per SSI before each meal. -7 am: signed every day. -12 pm: signed every day except 8-9-23 to 8-11-23, and 8-14-23 to 8-31-23. -5 pm: signed every day.</p> <p>Review on 9-26-23 of Client #3's MAR dated September 2023 revealed: -Humalog - in case of pump failure, check FSBS and inject per SSI before each meal. -7 am: signed every day up to 9-13-23. No signature from 9-14-23 to 9-26-23.</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>-12 pm: signatures on 9-9-23 and 9-10-23. -5 pm: signatures on 9-6-23 to 9-11-23.</p> <p>-Humalog 100 unit/ML solution vial - inject 100 units subcutaneously once daily via insulin pump. No documentation of administration on 9-8-23 and 9-14-23 to 9-26-23.</p> <p>-Lorazepam, no documentation of administration on 9-7-23 and 9-22-23 at 7 pm.</p> <p>-Solifenacin, no documentation of administration on 9-6-23.</p> <p>Interview on 9-26-23 with Client #1, #2, and #3 revealed: -No issues with taking or receiving medications. -Received medications as they were prescribed.</p> <p>Interview on 9-26-23 with a local pharmacist revealed: -The MAR was used for documentation of when a medication was administered, not an acknowledgment of how the medication was to be administered. -For the Humalog injections in case of pump failure, the MAR should not be signed unless the injection was given by a staff.</p> <p>Interview on 9-28-23 with Staff #1 revealed: -Signed MAR as soon as medication was administered. -Double check the dates and times and sign the MAR.</p> <p>Interview on 9-26-23 with the House Manager revealed: -Reviewed the medications daily. The staff are supposed to sign the back of the bubble packs when they administer medications. -"I know everything has been given, they (staff) have not documented. I always check the bubble packs ..."</p>	V 118		

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V 118	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-Felt that she had been told prior to sign the MAR as an acknowledgement of understanding the instructions (for the Humalog injections in case of pump failure).</li> <li>-There had been no pump failure for Client #3's Humalog requiring staff to inject Client #3.</li> <li>-Client #1 with the Vitamin B12, they are not giving it every day but not signing on the corresponding date.</li> <li>-Would write an incident report if there was a missed dose of medication.</li> </ul> <p>Interview on 9-28-23 with the Qualified Professional (QP) revealed:</p> <ul style="list-style-type: none"> <li>-The House Manager was responsible for oversight of the MARs.</li> <li>-If there were issues with the MARs, the QP would review the MAR after the House Manager. Otherwise, no one would review the MAR besides the House Manager.</li> </ul>	V 118		