

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL001-132</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>09/18/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>DEE &amp; G ENRICHMENT CENTER # 3</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>321 AUSTIN STREET BURLINGTON, NC 27217</b>
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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
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**V 000 INITIAL COMMENTS**

An annual survey was completed on September 18, 2023. Deficiencies were cited.

This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental illness.

This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.

**V 000**

**V 113 27G .0206 Client Records**

**10A NCAC 27G .0206 CLIENT RECORDS**

(a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to:

- (1) an identification face sheet which includes:
  - (A) name (last, first, middle, maiden);
  - (B) client record number;
  - (C) date of birth;
  - (D) race, gender and marital status;
  - (E) admission date;
  - (F) discharge date;
- (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV;
- (3) documentation of the screening and assessment;
- (4) treatment/habilitation or service plan;
- (5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician;
- (6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician;

**V 113**

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Clara E. Vance*

TITLE

*Administrator* 10-11-23

(X6) DATE

STATE FORM

0000 EUD311

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V 113	<p>Continued From page 2</p> <p>Hypertension, Epilepsy, Seizure Disorder, Insomnia, Renal Insufficiency. -There was no documentation of progress toward outcomes.</p> <p>Review on 9/18/23 of Client #3's record revealed: -Admission date of 6/14/11. -Diagnoses of Bipolar Affective Disorder; Mental Retardation; Paranoid Schizophrenia; Constipation; Insomnia; Prediabetes. -There was no documentation of progress toward outcomes</p> <p>Interview on 9/14/23 with the Owner revealed: -Facility had not been completing progress notes for a while. -Reported that since COVID hit, facility had stopped doing some of the things they used to do. -She confirmed there was no documentation of client's progress toward outcomes.</p>	V 113		
V 118	<p>27G .0209 (C) Medication Requirements</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.</p>	V 118		

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V 118	<p>Continued From page 3</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: (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 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.</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interview the facility failed to A) Ensure medications were administered on the written order of a physician for three of three audited clients (#1, #2 and #3), and B) Ensure MARs were kept current for three of three audited clients (#1, #2 and #3) The findings are:</p> <p>Review on 9/18/23 of Client #1's record revealed: -Admission date of 10/3/22. -Diagnoses of Schizoaffective Disorder; Congenital Deafness; Diabetes Mellitus; Hypothyroidism (Encephalitis; Gastroesophageal reflux disease (GERD); Hyperlipidemia; Hypertension. -Physician's order dated 10/19/22: -Test Blood Sugars two times daily.</p>	V 118		
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V 118	<p>Continued From page 4</p> <p>Observation on 9/18/23 at 1:30 pm of Client #1's medications revealed: -Glucometer was available.</p> <p>Review on 9/18/23 of Client #1's MAR for July 1, 2023 through September 18, 2023 revealed: -Blood sugars were marked as checked twice daily everyday for the period covered.</p> <p>Review on 9/18/23 of Client #1's Glucometers (2) recordings for July 11, 2023 through September 18, 2023 revealed blood sugars were not checked as ordered on the following dates: -July: -7/11 (once); 7/15-7/16 (none); 7/24 (once); 7/26 (once); 7/27 (once) 7/29-7/31 (once). -August: -8/1-8/2 (once); 8/4 (none); 8/5 (once); 8/6 (none); 8/7-8/8 (once); 8/10-8/12 (once); 8/15 (once); 8/20 (once); 8/22-8/25 (once); 8/26-8/28 (none); 8/31 (once). -September: -9/1- (once); 9/3-9/4 (once); 9/6-9/8 (once); 9/10-9/13 (once); 9/15-9/16 (once).</p> <p>-Facility did not follow physician's order of checking Client #1's blood sugars twice a day. -Client #1's MAR wrongfully indicated that his sugars had been checked twice daily everyday. -Due to the failure to accurately document medication administration and not having all daily data available it could not be determined if Client #1 blood sugars had been checked twice a day.</p> <p>Review on 9/18/23 of Client #2's record revealed: -Admission date of 6/4/11. -Diagnoses of Psychosis; Diabetes Type II, Hypertension, Epilepsy, Seizure Disorder, Insomnia, Renal Insufficiency.</p>	V 118		

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V 118	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-Physician's orders dated 11/7/22:               <ul style="list-style-type: none"> <li>-Eucerin- Apply topically to feet at bedtime</li> </ul> </li> <li>-There were no physician's orders for the following:               <ul style="list-style-type: none"> <li>-Metamucil- Take 1 packet three times daily.</li> <li>-Polyethylene Glycol 3350- Mix 17 gm in liquid and drink daily.</li> </ul> </li> </ul> <p>Observation on 9/18/23 at about 1:45 pm of Client #2's medications revealed:</p> <ul style="list-style-type: none"> <li>-Eucerin was not available.</li> <li>-Metamucil was not available.</li> <li>-Polyethylene Glycol 3350 was available.</li> </ul> <p>Review on 9/18/23 of Client #2's MAR for July 1, 2023 through September 18, 2023 revealed:</p> <ul style="list-style-type: none"> <li>-All the medications mentioned were marked as given daily everyday for the period covered.</li> </ul> <ul style="list-style-type: none"> <li>-Client #2's Eucerin and Metamucil were not available at the home, but the MAR indicated that they were being administered.</li> <li>-Client #2's Polyethylene Glycol 3350 was available at the home, but did not have a physician's order.</li> <li>-Due to the failure to accurately document medication administration and not having medication available, it could not be determined if Client #2 received his medications as ordered by the physician.</li> </ul> <p>Review on 9/18/23 of Client #3's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 6/14/11.</li> <li>-Diagnoses of Bipolar Affective Disorder; Mental Retardation; Paranoid Schizophrenia; Constipation; Insomnia; Prediabetes.</li> <li>-Physician's orders dated 11/7/22:               <ul style="list-style-type: none"> <li>-Zolpidem 10 mg- Take 1 tablet daily before bedtime.</li> </ul> </li> </ul>	V 118		

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V 118	<p>Continued From page 6</p> <p>Review on 9/18/23 of Client #3's medication packages revealed: -Zolpidem was not available. -Packages were dispensed on 9/5/23.</p> <p>Review on 9/18/23 of Client #3's MAR for July 1, 2023 through September 18, 2023 revealed: -Medication mentioned was marked as given daily everyday for the period covered.</p> <p>-Client #3's Zolpidem was not available at the home, but staff continued to mark medication as given on his MAR. -Due to the failure to accurately document medication administration and not having Client #3's Zolpidem available, it could not be determined if he received his medications as ordered by the physician.</p> <p>Interview on 9/18/23 with the Owner revealed: -Regarding the blood sugar checks- She acknowledged that Client #2's blood sugars were not being checked twice per doctor's orders. -Reported that they would consult with Client #2's doctor to either discontinue order or to have his blood sugars checked only once per day as his sugar levels had been under control for quite some time. -Regarding Client #3's Zolpidem- She thought it was in the pack because all medications came prepackage. -She was responsible for making sure client's medications were correct when they were delivered by the pharmacist. -She had gotten used to the pharmacy sending them correctly, so she stopped checking. -Latest medication package for Client #3 came in on 9/5/23. -The missing medicine was to help him sleep, but he had been sleeping well this month.</p>	V 118		

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V 118	Continued From page 7  -It was unknown at this time how long client had been without the medication.  Due to the failure to accurately document medication administration and not having a medication available it could not be determined if Client #2 received her medications as ordered by the physician.	V 118		
V 121	27G .0209 (F) Medication Requirements  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.  This Rule is not met as evidenced by: Based on records reviews and interview the facility failed to obtain drug reviews every six months for three of three clients (#1, #2 and #3) who received psychotropic drugs. The findings are:  Review on 9/18/23 of Client #1's record revealed: -Admission date of 10/3/22.	V 121		

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V 121	<p>Continued From page 8</p> <ul style="list-style-type: none"> <li>-Diagnoses of Schizoaffective Disorder; Congenital Deafness; Diabetes Mellitus; Hypothyroidism Encephalitis; Gastroesophageal reflux disease (GERD); Hyperlipidemia; Hypertension.</li> <li>-Physician's order dated 10/19/22:               <ul style="list-style-type: none"> <li>-Clozapine 100 milligrams (mg)- Take 2 tablets by mouth every morning and 3 tablets at bedtime.</li> <li>-Risperidone 3 mg-Take 1 tablet by mouth twice daily.</li> <li>-Sertraline 100 mg- Take 1 tablet by mouth once daily at bedtime.</li> <li>-Clonazepam 0.5 mg- Take 1 tablet by mouth once daily as needed.</li> <li>-Haloperidol 5mg- Take 1 tablet by mouth every 6 hours as needed for severe psychosis/agitation not to exceed 4 tablets/24 hours.</li> </ul> </li> <li>-The July, August and September 2023 Medication Administration Record (MAR) revealed Client #1 was administered the above medications daily.</li> <li>-There was no evidence of a psychotropic drug review for Client #1's medications in the last six months.</li> </ul> <p>Review on 9/18/23 of Client #2's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 6/4/11.</li> <li>-Diagnoses of Psychosis; Diabetes Type II, Hypertension, Epilepsy, Seizure Disorder, Insomnia, Renal Insufficiency.</li> <li>-Physician's orders dated 11/7/22:               <ul style="list-style-type: none"> <li>-Aripiprazole 15 mg- Take 1 tablet by mouth daily.</li> <li>-Clonazepam 1 mg- Take 1 tablet by mouth at bedtime.</li> <li>-Mirtazapine 15 mg- Take 1 tablet by mouth at bedtime.</li> <li>-Quetiapine 400 mg- Take 2 tablets by mouth</li> </ul> </li> </ul>	V 121		
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V 121	<p>Continued From page 9</p> <p>at bedtime. -Trazodone 100 mg- Take 1 tablet by mouth at bedtime. -The July, August and September 2023 Medication Administration Record (MAR) revealed Client #2 was administered the above medications daily. -There was no evidence of a psychotropic drug review for Client #2's medications in the last six months.</p> <p>Review on 9/18/23 of Client #3's record revealed: -Admission date of 6/14/11. -Diagnoses of Bipolar Affective Disorder; Mental Retardation; Paranoid Schizophrenia; Constipation; Insomnia; Prediabetes. -Physician's orders dated 11/7/22: -Guanfacine 1 mg- Take 1 tablet by mouth three times a day. -Lorazepam 1 mg- Take 1 tablet by mouth three times a day. -Quetiapine 400 mg- Take 1 tablet by mouth at bedtime. -Trazodone 150 mg- Take 1 tablet by mouth at bedtime as needed for sleep. -The July, August and September 2023 Medication Administration Record (MAR) revealed Client #3 was administered the above medications daily. -There was no evidence of a psychotropic drug review for Client #3's medications in the last six months.</p> <p>Interview on 9/18/23 with the Owner revealed: -She was not aware that the drug reviews needed to be completed. -She had made arrangements for them to be completed. -She confirmed the six months psychotropic drug review for clients #1, #2 and #3 had not been</p>	V 121		

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V 121	<p>Continued From page 9</p> <p>at bedtime. -Trazodone 100 mg- Take 1 tablet by mouth at bedtime. -The July, August and September 2023 Medication Administration Record (MAR) revealed Client #2 was administered the above medications daily. -There was no evidence of a psychotropic drug review for Client #2's medications in the last six months.</p> <p>Review on 9/18/23 of Client #3's record revealed: -Admission date of 6/14/11. -Diagnoses of Bipolar Affective Disorder; Mental Retardation; Paranoid Schizophrenia; Constipation; Insomnia; Prediabetes. -Physician's orders dated 11/7/22: -Guanfacine 1 mg- Take 1 tablet by mouth three times a day. -Lorazepam 1 mg- Take 1 tablet by mouth three times a day. -Quetiapine 400 mg- Take 1 tablet by mouth at bedtime. -Trazodone 150 mg- Take 1 tablet by mouth at bedtime as needed for sleep. -The July, August and September 2023 Medication Administration Record (MAR) revealed Client #3 was administered the above medications daily. -There was no evidence of a psychotropic drug review for Client #3's medications in the last six months.</p> <p>Interview on 9/18/23 with the Owner revealed: -She was not aware that the drug reviews needed to be completed. -She had made arrangements for them to be completed. -She confirmed the six months psychotropic drug review for clients #1, #2 and #3 had not been</p>	V 121		

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V 121	<p>Continued From page 8</p> <ul style="list-style-type: none"> <li>-Diagnoses of Schizoaffective Disorder; Congenital Deafness; Diabetes Mellitus; Hypothyroidism Encephalitis; Gastroesophageal reflux disease (GERD); Hyperlipidemia; Hypertension.</li> <li>-Physician's order dated 10/19/22:               <ul style="list-style-type: none"> <li>-Clozapine 100 milligrams (mg)- Take 2 tablets by mouth every morning and 3 tablets at bedtime.</li> <li>-Risperidone 3 mg-Take 1 tablet by mouth twice daily.</li> <li>-Sertraline 100 mg- Take 1 tablet by mouth once daily at bedtime.</li> <li>-Clonazepam 0.5 mg- Take 1 tablet by mouth once daily as needed.</li> <li>-Haloperidol 5mg- Take 1 tablet by mouth every 6 hours as needed for severe psychosis/agitation not to exceed 4 tablets/24 hours.</li> </ul> </li> <li>-The July, August and September 2023 Medication Administration Record (MAR) revealed Client #1 was administered the above medications daily.</li> <li>-There was no evidence of a psychotropic drug review for Client #1's medications in the last six months.</li> </ul> <p>Review on 9/18/23 of Client #2's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 6/4/11.</li> <li>-Diagnoses of Psychosis; Diabetes Type II, Hypertension, Epilepsy, Seizure Disorder, Insomnia, Renal Insufficiency.</li> <li>-Physician's orders dated 11/7/22:               <ul style="list-style-type: none"> <li>-Aripiprazole 15 mg- Take 1 tablet by mouth daily.</li> <li>-Clonazepam 1 mg- Take 1 tablet by mouth at bedtime.</li> <li>-Mirtazapine 15 mg- Take 1 tablet by mouth at bedtime.</li> <li>-Quetiapine 400 mg- Take 2 tablets by mouth</li> </ul> </li> </ul>	V 121		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL001-132</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>09/18/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>DEE &amp; G ENRICHMENT CENTER # 3</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>321 AUSTIN STREET BURLINGTON, NC 27217</b>
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V 118	<p>Continued From page 7</p> <p>-It was unknown at this time how long client had been without the medication.</p> <p>Due to the failure to accurately document medication administration and not having a medication available it could not be determined if Client #2 received her medications as ordered by the physician.</p>	V 118		
V 121	<p>27G .0209 (F) Medication Requirements</p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></p> <p>(f) Medication review:</p> <p>(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.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p> </p> <p>This Rule is not met as evidenced by: Based on records reviews and interview the facility failed to obtain drug reviews every six months for three of three clients (#1, #2 and #3) who received psychotropic drugs. The findings are:</p> <p>Review on 9/18/23 of Client #1's record revealed: -Admission date of 10/3/22.</p>	V 121		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  MHL001-132	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  09/18/2023
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BURLINGTON, NC 27217**

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V 118	<p>Continued From page 6</p> <p>Review on 9/18/23 of Client #3's medication packages revealed: -Zolpidem was not available. -Packages were dispensed on 9/5/23.</p> <p>Review on 9/18/23 of Client #3's MAR for July 1, 2023 through September 18, 2023 revealed: -Medication mentioned was marked as given daily everyday for the period covered.</p> <p>-Client #3's Zolpidem was not available at the home, but staff continued to mark medication as given on his MAR. -Due to the failure to accurately document medication administration and not having Client #3's Zolpidem available, it could not be determined if he received his medications as ordered by the physician.</p> <p>Interview on 9/18/23 with the Owner revealed; -Regarding the blood sugar checks- She acknowledged that Client #2's blood sugars were not being checked twice per doctor's orders. -Reported that they would consult with Client #2's doctor to either discontinue order or to have his blood sugars checked only once per day as his sugar levels had been under control for quite some time. -Regarding Client #3's Zolpidem- She thought it was in the pack because all medications came prepackage. -She was responsible for making sure client's medications were correct when they were delivered by the pharmacist. -She had gotten used to the pharmacy sending them correctly, so she stopped checking. -Latest medication package for Client #3 came in on 9/5/23. -The missing medicine was to help him sleep, but he had been sleeping well this month.</p>	V 118		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  MHL001-132	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  09/18/2023
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V 118	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-Physician's orders dated 11/7/22:               <ul style="list-style-type: none"> <li>-Eucerin- Apply topically to feet at bedtime</li> <li>-There were no physician's orders for the following:                   <ul style="list-style-type: none"> <li>-Metamucil- Take 1 packet three times daily.</li> <li>-Polyethylene Glycol 3350- Mix 17 gm in liquid and drink daily.</li> </ul> </li> </ul> </li> </ul> <p>Observation on 9/18/23 at about 1:45 pm of Client #2's medications revealed:</p> <ul style="list-style-type: none"> <li>-Eucerin was not available.</li> <li>-Metamucil was not available.</li> <li>-Polyethylene Glycol 3350 was available.</li> </ul> <p>Review on 9/18/23 of Client #2's MAR for July 1, 2023 through September 18, 2023 revealed:</p> <ul style="list-style-type: none"> <li>-All the medications mentioned were marked as given daily everyday for the period covered.</li> </ul> <ul style="list-style-type: none"> <li>-Client #2's Eucerin and Metamucil were not available at the home, but the MAR indicated that they were being administered.</li> <li>-Client #2's Polyethylene Glycol 3350 was available at the home, but did not have a physician's order.</li> <li>-Due to the failure to accurately document medication administration and not having medication available, it could not be determined if Client #2 received his medications as ordered by the physician.</li> </ul> <p>Review on 9/18/23 of Client #3's record revealed:</p> <ul style="list-style-type: none"> <li>-Admission date of 6/14/11.</li> <li>-Diagnoses of Bipolar Affective Disorder; Mental Retardation; Paranoid Schizophrenia; Constipation; Insomnia; Prediabetes.</li> <li>-Physician's orders dated 11/7/22:               <ul style="list-style-type: none"> <li>-Zolpidem 10 mg- Take 1 tablet daily before bedtime.</li> </ul> </li> </ul>	V 118		



Division of Health Service Regulation

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V 118	<p>Continued From page 4</p> <p>Observation on 9/18/23 at 1:30 pm of Client #1's medications revealed: -Glucometer was available.</p> <p>Review on 9/18/23 of Client #1's MAR for July 1, 2023 through September 18, 2023 revealed: -Blood sugars were marked as checked twice daily everyday for the period covered.</p> <p>Review on 9/18/23 of Client #1's Glucometers (2) recordings for July 11, 2023 through September 18, 2023 revealed blood sugars were not checked as ordered on the following dates: -July: -7/11 (once); 7/15-7/16 (none); 7/24 (once); 7/26 (once); 7/27 (once) 7/29-7/31 (once). -August: -8/1-8/2 (once); 8/4 (none); 8/5 (once); 8/6 (none); 8/7-8/8 (once); 8/10-8/12 (once); 8/15 (once); 8/20 (once); 8/22-8/25 (once); 8/26-8/28 (none); 8/31 (once). -September: -9/1- (once); 9/3-9/4 (once); 9/6-9/8 (once); 9/10-9/13 (once); 9/15-9/16 (once).</p> <p>-Facility did not follow physician's order of checking Client #1's blood sugars twice a day. -Client #1's MAR wrongfully indicated that his sugars had been checked twice daily everyday. -Due to the failure to accurately document medication administration and not having all daily data available it could not be determined if Client #1 blood sugars had been checked twice a day.</p> <p>Review on 9/18/23 of Client #2's record revealed: -Admission date of 6/4/11. -Diagnoses of Psychosis; Diabetes Type II, Hypertension, Epilepsy, Seizure Disorder, Insomnia, Renal Insufficiency.</p>	V 118		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL001-132</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>09/18/2023</b>
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V 118	<p>Continued From page 3</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:                      (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 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 A) Ensure medications were administered on the written order of a physician for three of three audited clients (#1, #2 and #3), and B) Ensure MARs were kept current for three of three audited clients (#1, #2 and #3) The findings are:</p> <p>Review on 9/18/23 of Client #1's record revealed:                      -Admission date of 10/3/22.                      -Diagnoses of Schizoaffective Disorder; Congenital Deafness; Diabetes Mellitus; Hypothyroidism Encephalitis; Gastroesophageal reflux disease (GERD); Hyperlipidemia; Hypertension.                      -Physician's order dated 10/19/22:                      -Test Blood Sugars two times daily.</p>	V 118		

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V 113	Continued From page 2  Hypertension, Epilepsy, Seizure Disorder, Insomnia, Renal Insufficiency. -There was no documentation of progress toward outcomes.  Review on 9/18/23 of Client #3's record revealed: -Admission date of 6/14/11. -Diagnoses of Bipolar Affective Disorder; Mental Retardation; Paranoid Schizophrenia; Constipation; Insomnia; Prediabetes. -There was no documentation of progress toward outcomes  Interview on 9/14/23 with the Owner revealed: -Facility had not been completing progress notes for a while. -Reported that since COVID hit, facility had stopped doing some of the things they used to do. -She confirmed there was no documentation of client's progress toward outcomes.	V 113		
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.	V 118		

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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on September 18, 2023. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 113	<p><b>27G .0206 Client Records</b></p> <p><b>10A NCAC 27G .0206 CLIENT RECORDS</b></p> <p>(a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to:</p> <p>(1) an identification face sheet which includes:</p> <ul style="list-style-type: none"> <li>(A) name (last, first, middle, maiden);</li> <li>(B) client record number;</li> <li>(C) date of birth;</li> <li>(D) race, gender and marital status;</li> <li>(E) admission date;</li> <li>(F) discharge date;</li> </ul> <p>(2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV;</p> <p>(3) documentation of the screening and assessment;</p> <p>(4) treatment/habilitation or service plan;</p> <p>(5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician;</p> <p>(6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician;</p>	V 113		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Lena L. Vancey*

TITLE

Administrator 10-11-23

(X6) DATE

STATE FORM

EUD311

**27G.0209 (F) Medication Requirements**

**Systematic Change to Prevent out of Compliance Issues.**

The director will have bi-annually drug reviews as per rule that is set forth, this will ensure that all orders that were written by the prescriber is in the facility, the MAR matches the orders, any orders that need to be D/C will have an order and removed or documented on the MAR; any new orders will be documented on the MAR. All staff that has been trained on how to administer medications, will always document on the MAR for all prescribed medications, the director will review the MAR for proficient documentation and to make sure that all orders and medications are in the facility. If any staff is having issues documenting on the MAR, they will be retrained by the director and or by the local pharmacist.

**Timetable for Implementation of Corrective Action:** The director will schedule an appointment with the local pharmacy, this will be done by October 5<sup>th</sup>, 2023, to do the drug review or sooner. The director will check the orders, contact the doctor and pharmacist immediately (September 18, 2023).

**DEE & G Enrichment Center #3 Plan of Correction**

**License Number: MHL-001-132**

**The Annual Survey was completed on September 18, 2023.**

**27G.0206 Client Records (10A NCAC 27G.0206 Client Records**

**Systematic Change to Prevent out of Compliance Issues.**

The Director and QP will review each client's records on a monthly basis, this will ensure that the following information is documented in all records: progress towards outcome, (i.e. progress notes) for each client. The notes will be completed during QP's visit, this will help determine if the member is able to meet their measurable goals or they would need to have goals added/deleted to their person-centered plan. By doing a quality assurance review of all books, this will prevent out of compliance issues for the facility.

**Timetable for Implementation of Corrective Action:** Progress notes for all clients was implemented on September 19, 2023. Each note will give a brief description of any progress in which the member is progressing while services are being provided.

**27G.0209 (Medication) 10A NCAC 27G.0209 Medication Requirements**

**Systematic Change to Prevent out of Compliance Issues.**

The Director will schedule and Medication review with their local pharmacist, to make sure that they have the following:

- a. Written orders for all medications
- b. Have orders for all Blood Sugar checks.
- c. Documented information for the ordered Blood Sugar Checks
- d. Use the glucometer as directed (per doctor's orders) and that all staff are writing down the results as ordered.
- e. Retrain all staff on Medication Requirements and how to read the orders and documents.
- f. Make sure that all medications that have a written order is in stock, if there is an issue with getting a certain medication, staff and or director should contact the prescriber immediately, and inform them of the issues so that an alternative medication can be prescribed, and that the MAR reflects the new order, and D/C any old orders.

**Timetable for implementation of Corrective Action:** The director will schedule an appointment with the local pharmacy, to make sure that they have all orders and medications in stock. The director will also have all staff retrained in medication management. The director will schedule a training by October 6, 2023, of first available.

Dee & G Enrichment Center #:

321 Austin Street, Burlington NC 27217

North Carolina Department of Health and Human Services

RE: Annual Survey Completed on September 18, 2023

Greetings:

Thank you for allowing Dee & G Enrichment Center the opportunity to submit a plan of correction for the areas cited within our facility on September 18, 2023.

Thank you.

*Clara S. Foxcey*

*10-11-2023*

Name

Date

Division of Health Service Regulation

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V 113	<p>Continued From page 1</p> <p>(7) documentation of services provided; (8) documentation of progress toward outcomes; (9) If applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.</p> <p>This Rule is not met as evidenced by: Based on record reviews and Interview, the facility failed to ensure records were complete affecting 3 of 3 current clients (#1, #2 and #3). The findings are:</p> <p>Review on 9/18/23 of Client #1's record revealed: -Admission date of 10/3/22. -Diagnoses of Schizoaffective Disorder; Congenital Deafness; Diabetes Mellitus; Hypothyroidism Encephalitis; Gastroesophageal reflux disease (GERD); Hyperlipidemia; Hypertension. -There was no documentation of progress toward outcomes.</p> <p>Review on 9/18/23 of Client #2's record revealed: -Admission date of 6/4/11. -Diagnoses of Psychosis; Diabetes Type II,</p>	V 113		