

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-198	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 12/29/2023
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NAME OF PROVIDER OR SUPPLIER NEVIN #1	STREET ADDRESS, CITY, STATE, ZIP CODE 3827 NEVIN ROAD CHARLOTTE, NC 28269
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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 12/29/23. The complaint was unsubstantiated NC00209684. Deficiencies were cited.</p> <p>This facility is licensed for the following service 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for 6 beds and currently has a census of 5. The survey sample consisted of audits of 5 current clients.</p>	V 000		
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p>	V 120		

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

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V 120	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observation and interviews the facility failed to ensure that medications were stored separately by client, affecting 3 of 5 clients (Client #1, Client #4, and Client #5). The findings are:</p> <p>Observation on 12/28/23 at approximately 4:30pm of client's medications revealed: -Medication cart had medication (Chlorhex Glu Sol 0.12%) for 3 of 3 clients (Client #1, Client #4 and Client # 5) stored in the same drawer, with no separation between them, and client identifying initials on cap of medication.</p> <p>Interview with facility staff on 12/28/23 revealed: -She did not know that the medications should have been separated for each client.</p> <p>Interview with the facility nurse on 12/29/23 revealed: -She makes sure the medication cart is stocked, she goes out once a month and it is the facility staff's job to keep the medication cart updated. -"...not going to sit here and lie, it's been an issue here (the facility)...having to repeat (information) and let them know (the proper way to store medication)." -"...If I notice something's wrong when I go out I let them know...they meet every Wednesday."</p> <p>Interview with the Qualified Professional on 12/29/23 revealed: -"...nurses are out there and informed (facility staff) to separate meds...they have been instructed on how and what that's supposed to look like...not sure why they do that...will do</p>	V 120		

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V 120	Continued From page 2 another inservice and periodic checks." This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 120		