

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-158	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 02/29/2024
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NAME OF PROVIDER OR SUPPLIER INREACH/LISA CIRCLE	STREET ADDRESS, CITY, STATE, ZIP CODE 7401 LISA CIRCLE CHARLOTTE, NC 28208
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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 02/29/2024. The complaint was unsubstantiated (Intake #NC00212875). Deficiencies were 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 currently has a census of 6. 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>	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. (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 observations, record reviews, and interviews, the facility failed to obtain a written physician's order for 1 of 1 audited Clients (#1) to self-medicate. The findings are:</p> <p>Review on 02/26/2024 of Client #1's record revealed: -Admitted 02/16/2018. -Diagnosed with Type 2 Diabetes, Asthma, Obesity, Hyperlipidemia, Major Depression, Anxiety, and Mild Intellectual Development Disability. -Medication (med) order dated 01/19/2024 revealed: Trulicity 1.5 mg (milligram)/.5 ml (milliliter)-Inject 1.5 mg by subcutaneous injection every 7 days. -No medication order to self-administer Trulicity 1.5 mg.</p> <p>Review on 02/26/2024 of Client #1's MARS from 12/01/2023 - 02/25/2024 revealed: -The medication listed above was transcribed on Client #1's MAR. -Staff initialed for administration of Trulicity 1.5 mg every 7 days.</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Observation on 02/26/2024 at approximately 3:19 pm of Client #1's medication container revealed: -Trulicity 1.5 mg dispensed by the pharmacy on 02/20/2024.</p> <p>Interview on 02/26/2024 with Client #1 revealed: -Self-administered Trulicity 1.5 mg injections. -Facility staff gave her the medication to inject.</p> <p>Interviews on 02/26/2024 and 02/28/2024 with Staff #1 revealed: -"She (Client #1) injects her own med (Trulicity 1.5 mg injection). We (facility staff) don't do injections. I need to look for that (order for Client #1 to self-administer medications)." -Did not have an order from Client #1's physician's authorizing her to self-administer medications. -"I sent a request to [Client #1]'s endocrinologist on 02/26/2024 to issue the order (self-administration) for Client #1."</p> <p>Interview on 02/28/2024 with Staff #2 revealed: -"[Client #1] injects her own insulin."</p> <p>Interview on 02/29/2024 with the Group Home Director revealed: -"I think [Staff #1] was hoping the doctor would back date that (order for Client #1 to self-administer)." -" ...[Staff #1] did not tell me that she was unable to take care of that (obtain order for Client #1 to self-administer her diabetic medication)."</p>	V 118		