

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL068-102 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 03/07/2024 |
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| NAME OF PROVIDER OR SUPPLIER RSI-PUREFOY ROAD | STREET ADDRESS, CITY, STATE, ZIP CODE 102 PUREFOY ROAD CHAPEL HILL, NC 27514 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>An annual survey was completed on March 7, 2024. 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 Disabilities</p> <p>The 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 (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 | | |

Division of Health Service Regulation
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 review, observation and interview the facility failed to ensure the MAR's were current for two of three audited clients (#1 and #2). The findings are:</p> <p>A. Review on 3/7/24 of Client #1's record revealed: -Admission date of 7/1/89. -Diagnoses of Mild Intellectual Developmental Disability, Autistic Disorder, Fetishism, Mitochondrial Myopathy, Not Otherwise Specified and Psoriasis.</p> <p>Review on 3/7/24 of Client #1's physicians order dated 4/23/23 revealed: -NAC Cap 600 mg - take one capsule by mouth twice a day (immune support). -Triamcinolone Cream 0.1% 0 - apply a thin layer to affected area on lower leg twice daily (skin condition). -Aspirin Low Chew 81mg tablets - take one tablet by mouth once daily (heart health). -Gaviscon ES - take 15 mg by mouth four times a day (reflux suppression). -Gabapentin 300 mg - take one capsule orally three times a day (chronic pain).</p> | V 118 | | |

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| V 118 | <p>Continued From page 2</p> <p>Observation on 3/7/24 at 10:00 a.m. of Client #1's medications revealed: -All medications mentioned were available.</p> <p>Review on 3/7/24 of Client #1's MAR for March 2024 revealed blanks on the following dates: -NAC Cap 600 mg - 3/2/24 at 8 a.m. -Triamcinolone Cream 0.1% - 3/2, 3/3 at 8 a.m. and 3/1 at 8 p.m. -Aspirin Low Chew 81mg tablets - 3/2, 3/3 at 8 a.m. -Gaviscon ES - 3/1 at 8 p.m. -Gabapentin 300 mg - 3/1 at 8 p.m.</p> <p>B. Review on 3/7/24 of Client #2's record revealed: -Admission date of 10/29/94. -Diagnoses of Mild Intellectual Developmental Disability, Unspecified Disorder of Psychological Development, Peripheral Corneal Degeneration Bilateral, Blindness Both Eyes, Plantar Fascial Fibromatosis and Other Specified Congenital Deformities of Feet.</p> <p>Review on 3/7/24 of Client #2's physicians order dated 9/20/23 revealed: -Aspirin Low Tablets 81mg EC - take one tablet every day (heart health). -Fish Oil Capsules 1000 mg - take one capsule by mouth twice a day (relieve and reduce pain). -Docusate Sodium Capsules 100 mg - take one capsule by mouth twice a day (soften stool). -Omeprazole Capsules 20 mg - take one capsule by mouth twice a day (reflux disease).</p> <p>Review on 3/7/24 of Client #2's MAR for March 2024 revealed blanks on the following dates: -Aspirin Low Tablets 81mg EC -3/1, 3/2 at 8 a.m. -Fish Oil Capsules 1000 mg - 3/1, 3/2 at 8 a.m.</p> | V 118 | | |

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| V 118 | <p>Continued From page 3</p> <p>-Docusate Sodium Capsules 100 mg - 3/1, 3/2 at 8 a.m.</p> <p>-Omeprazole Capsules 20 mg - 3/1, 3/2 at 8 a.m.</p> <p>Observation on 3/7/24 at 11:00 a.m. of Client #2's medications revealed: -All medications mentioned were available.</p> <p>Interview on 3/7/24 with the Director of Autism Services revealed: -Staff would be retrained in medication administration. -The Qualified Professional was working on a schedule to get staff retrained.</p> | V 118 | | |