

**DHHS Corrective Action Plan**

**Return to DHHS by 04/19/2024**

Completed by: Dale Trivette

Job Title: Executive Director

Date Completed: 04/10/2024

Chart Review Timeframe: To be completed every six months.

Chart Review Date: 04/03/2024

Section Number for Requirement	Action to be taken	Completion Date by 04/19/2024 (Actual or Estimated)
<p>V 121 27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209  <b>MEDICATION REQUIREMENTS</b>                      (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.</p>	<p>All group home staff will be trained in Medication Requirements as it relates to psychotropic medications. This training will be documented in their files.</p> <p>The Medication Administration Policy was updated to reflect V 121 27G .0209 (F) Medication Requirements</p> <p>Review of required documentation was completed by the clients' primary care physician at Baker Primary Care Center, Linville, NC.</p> <p>The Group Home Supervisor or designee will monitor client medication and will ensure that necessary paperwork is completed every six months or more frequently if needed.</p> <p>The Program Director will do routine chart monitoring to ensure medications are being documented correctly.</p>	<p>04/15/2024 then yearly</p> <p>04/03/2024</p> <p>04/03/2024 then every six months or as needed.</p> <p>04/03/2024 then every six months or as needed.</p> <p>Ongoing</p>

**RECEIVED BY  
MHL & C 4/12/24**