

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL074-159	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/15/2024
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NAME OF PROVIDER OR SUPPLIER EVANS HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1200 OLD FIRETOWER ROAD WINTERVILLE, NC 28590
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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 and follow up survey was completed on April 15, 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</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> <p>(E) name or initials of person administering the drug.</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>(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 reviews and interviews, the facility failed to maintain an accurate MAR affecting 3 of 3 clients (#2, #5 and #6). The findings are:</p> <p>Review on 4/12/24 of client #2's record revealed: -70 year old female. -Admission date of 6/15/07. -Diagnoses of Schizophrenia, Alcoholism, Tobacco Abuse and Hypertension.</p> <p>Review on 4/12/24 of client #2's physician orders dated 01/4/24 revealed: -Diltiazem (hypertension)360mg, 1 daily -Sertraline HCL (depression) 100mg, 1 1/2 daily -Rosuvastatin Calcium (cholesterol) 20mg, 1 at bedtime -Risperidone (schizophrenia) 3mg, 1 at bedtime</p> <p>Review on 4/12/24 of client #2's April 2024 MAR revealed: -No initials to indicate the Diltiazem had been administered on 4/1/24 and 4/10/24 at 8am. -No initials to indicate the Sertraline had been administered on 4/8/24 at 8pm. -No initials to indicate the Rosuvastatin Calcium had been administered on 4/8/24 at 8pm. -No initials to indicate the Risperidone had been</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>administered on 4/8/24 at 8pm.</p> <p>Review on 4/12/24 of client #5's record revealed: -54 year old male. -Admission date of 11/3/14. -Diagnoses of Intellectual Developmental Disability-Mild, Hypertension, Prediabetes, Obesity and Sleep Apnea.</p> <p>Review on 4/12/24 of client #5's physician orders dated 5/4/23 revealed: -Atorvastatin (cholesterol)40mg,, 1 at bedtime.</p> <p>Review on 4/12/24 of client #5's April 2024 MAR revealed: -No initials to indicate the Atorvastatin had been administered on 4/8/24 at 8pm.</p> <p>Review on 4/12/24 of client #6's record revealed: -45 year old male. -Admission date of 2/2/15. -Diagnoses of included Intellectual Developmental Disability-Moderate, Schizophrenia and Obsessive Compulsive Disorder.</p> <p>Review on 4/12/24 of client #6's physician orders revealed: -Fluvoxamine Maleate (obsessive compulsive disorder) 100mg, 1 1/2 tab twice daily. -Risperidone 2mg, (mood), 1 2 times daily. -Divalproex Sodium (SOD) Extended Release (ER) (bipolar disorder) 500mg, (mood) 2 at bedtime.</p> <p>Review on 4/12/24 of client #6's April 2024 MAR revealed: -No initials to indicate the Fluvoxamine Maleate had been administered 4/8/24 at 8pm. -No initials to indicate the Risperidone had been</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>administered 4/8/24 at 8pm. -No initials to indicate the Divalproex SOD ER had been administered 4/8/24 at 8pm.</p> <p>During interview on 4/15/24 client #2 stated staff administered her medication daily.</p> <p>During interview on 4/15/24 client #5 stated staff gave him his medicine everyday.</p> <p>During interview on 4/15/24 client #6 stated he received his medication daily.</p> <p>During interview on 4/15/24 the House Manager stated: -Clients received their medications daily as ordered. -The staff probably forgot to initial the MAR if there was a blank.</p> <p>During interview on 4/15/24 the Director stated: -The staff had forgot to document on the MAR. She knew which staff it was. -She understood the facility was required to maintain an accurate MAR.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		