STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL007-088	A. BUILDING: _____ B. WING _____	03/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COUNTRY LIVING WILLOW HOUSE	3644 CHERRY ROAD WASHINGTON, NC 27889

(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	INITIAL COMMENTS An annual survey was completed on March 7, 2024. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 6 beds and currently has a census of 4. The survey sample consisted of audits of 3 current clients.	V 000		
V 118	27G .0209 (C) Medication Requirements 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 (E) name or initials of person administering the drug.	V 118	RECEIVED MAR 22 2024 DHSR-MH Licensure Sect	

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V 118	Continued From page 1 (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. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to administer medications as ordered by the physician and maintain accurate MARs for 3 of 3 current clients (clients #1, #2 and #4). The findings are: Finding #1: Review on 03/06/24 of client #1's record revealed: - 64 year old female. - Admission date of 11/13/23. - Diagnoses of Dementia with Behavioral Disturbance, Moderate Intellectual Developmental Disability (IDD), Pervasive Developmental Disorder, Hypertension, Hypothyroidism, Anxiety Disorder and Obsessive Compulsive Disorder (OCD). Review on 03/06/24 of client #1's signed physician orders revealed: 02/22/24 - Abilify (antipsychotic) 5 milligrams (mg) - take 1/2 tablet (2.5mg) at bedtime. 11/14/23 - Atorvastatin (lowers cholesterol) 10mg - take one at bedtime. - Fluvoxamine (treats OCD) 100mg - take twice	V 118		

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V 118	Continued From page 2 daily. - Hydralazine (treats high blood pressure) 25mg - take three times daily. - Metformin (treats blood sugar) 500mg - take 2 tablets at bedtime. - Refresh Plus 0.5% eye drops (eye lubrication) - instill 2 drops into right eye at bedtime. - Topiramate (treats seizures) 200mg - take 2 tablets twice daily. - Trazodone (antidepressant/sleep aid) 50mg - take 1/2 tablet at bedtime. Review on 03/06/24 of client #1's January 2024 and February 2024 MARs revealed: January 2024 - Atorvastatin - no staff initials to indicate administration on 01/07/24 and 01/16/24. - Fluvoxamine - no staff initials to indicate administration on 01/07/24 and 01/16/24 at 8pm. - Hydralazine - no staff initials to indicate administration on 01/07/24 and 01/16/24 at 8pm. - Metformin - no staff initials to indicate administration on 01/07/24. - Refresh Eye Drops - no staff initials to indicate administration on 01/07/24 and 01/16/24. - Topiramate - no staff initials to indicate administration on 01/07/24 and 01/16/24. - Trazodone - no staff initials to indicate administration on 01/07/24 and 01/16/24. February 2024 - Atorvastatin - no staff initials to indicate administration on 02/29/24. - Fluvoxamine - no staff initials to indicate administration on 02/21/24 and 02/29/24 at 8pm. - Hydralazine - no staff initials to indicate administration on 02/21 at 8pm, 02/26/24 at 2pm and 02/29/24 at 8pm. - Metformin - no staff initials to indicate administration on 02/21/24 and 02/29/24.	V 118		

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V 118	Continued From page 3 - Refresh Eye Drops - no staff initials to indicate administration on 02/21/24 and 02/29/24. - Topiramate - no staff initials to indicate administration on 02/21/24 and 02/29/24 at 8pm. - Trazodone - no staff initials to indicate administration on 02/21/24 and 02/29/24. Interview on 03/06/24 client #1 stated she received her medications daily as ordered. Finding #2: Review on 03/06/24 of client #2's record revealed: - 54 year old female. - Admission date of 11/13/23. - Diagnoses of Mild IDD, Undifferentiated Schizophrenia, Hyperlipidemia, Vascular Dementia, Mood Disturbance, Anxiety and Psychotic Disturbance. Review on 03/06/24 of client #2's signed physician orders revealed: 11/14/23 - Risperidone (antipsychotic) 3mg - take 1 tablet twice daily. - Simvastatin (treats cholesterol) 10mg - take 1 tablet at bedtime. - Citalopram (antidepressant) 40mg - take once daily. - Flonase (treats seasonal allergies) - instill 2 sprays into each nostril daily. 02/11/24 - Polyethylene Glycol (stool softener) 17 grams in 8 ounces of water - take once daily. Review on 03/06/24 of client #2's January 2024 and February 2024 MARs revealed: January 2024 - Risperidone - no staff initials to indicate	V 118		

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V 118	Continued From page 4 administration on 01/16/24 at 8pm. - Simvastatin - no staff initials to indicate administration on 01/16/24. February 2024 - Citalopram - no staff initials to indicate administration on 02/29/24. - Flonase - no staff initials to indicate administration on 02/29/24. - Polyethylene Glycol - no staff initials to indicate administration on 02/29/24. - Risperidone - no staff initials to indicate administration on 02/21/24 at 8pm and 02/29/24 at 8am. -Simvastatin - no staff initials to indicate administration on 02/21/24. Interview on 03/06/24 client #2 indicated she received her medications daily. Finding #3: Review on 03/06/24 of client #4's record revealed: - 57 year old female. - Admission date of 01/03/24. - Diagnoses of Mild IDD, Diabetes, Depression, Post Traumatic Stress Disorder, Hyperlipidemia and Major Depressive Disorder. Review on 03/06/24 of a signed FL-2 for client #4 dated 12/19/23 revealed the following medication orders: - Colesevelam (treats bad cholesterol) 625mg - take 1 tablet 3 times daily. - Dicyclomine (treats functional bowel) 20mg - take 1 tablet twice daily. - Duloxetine (treats depression) 30mg - take once daily. - Ropinirole (treats restless leg syndrome) 1mg - take 1 and 1/2 tablets at bedtime.	V 118		

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V 118	Continued From page 5 Review on 03/06/24 of client #4's January and February MARs revealed: January 2024 - Colesevam - no staff initials to indicate administration on 01/01/24 and 01/02/24 at 12 noon and 5pm and 01/04/24 at 5pm. - Dicyclomine - no staff initials to indicate administration on 01/01/24, 01/02/24 and 01/04/24 at 5pm. - Duloxetine - no staff initials to indicate administration on 01/16/24. February 2024 - Colesevam - no staff initials to indicate administration on 02/26/24 and 02/27/24 at 12 noon. - Duloxetine - no staff initials to indicate administration on 02/21/24 and 02/29/24. - Ropinirole - no staff initials to indicate administration on 02/21/24 and 02/29/24. Interview on 03/06/24 the Registered Nurse (RN)/Associate Professional stated: - Clients received their medications. - She had reviewed the MARs at the facility. - She had addressed medication documentation with staff and the lack of documentation of administration. Interview on 03/07/24 the RN/Qualified Professional stated: - Clients received their medications as ordered. - Facility staff are frequently inserviced on documentation of medication administration. Due to the failure to accurately document medication administration, it could not be determined if clients received their medications as ordered by the physician.	V 118		

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COUNTRY LIVING INC.
Adult Residential Services

Plan of Correction

Country Living Guest Home , Inc.
Country Living: Willow House
MHL-007-088

ID Prefix Tag	Plan of Correction	Complete Date
V118 27G .0209 (C) Medication Requirements	The facility will ensure all medications are administered per physician's order and documented on the MAR. The MAR will remain current. The facility will continue to utilize an electronic medication administration record (EMAR) offered through Express Care Pharmacy. Medication administration training was provided to all staff within the agency on 2/8/24 and 2/9/24. The agency offered 2 dates to ensure attendance of all staff. The training was conducted by [redacted] Management continues to explore scenarios that led to the "blanks" on the EMAR. Staff denies making the medication errors. Issues related to medication counts have not been reported to the RN/QP. The QAS will continue to monitor med counts throughout the month and prior to staff opening the new batch on the 7th of each month. Management continues to consult with Express Care Pharmacy to rule out technical errors associated with the EMAR system. The facility hired another RN on 11/6/23. The EMARs will be monitored daily over the next several months as a result of the deficiency. They will be monitored weekly and as needed thereafter to ensure compliance with medication administration requirements. Oversight of the EMARs will be the responsibility of a facility RN. All feedback and findings related to medication administration will be reported to [redacted]	3/15/24

Provider Signature: _____ Date: 3/15/24