

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL001-132	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 08/02/2024
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NAME OF PROVIDER OR SUPPLIER DEE & G ENRICHMENT CENTER # 3	STREET ADDRESS, CITY, STATE, ZIP CODE 321 AUSTIN STREET BURLINGTON, NC 27217
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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 August 2, 2024. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 3 and has a current census of 3. The survey sample consisted of audits of 3 current clients.</p>	V 000	<p>The Administrator will contact the pharmacy to have a drug review completed as soon as possible and put in books. The documented review will be placed in the binder. The Administrator will monitor the reviews to ensure that it is completed in a timely manner.</p> <p>Timeframe: this will be ongoing, according to the rule, 10A NCAC 27G.0209</p> <p>Had my Drug Review Done on 8-6-2024</p>	8-12-24
V 121	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(f) Medication review:</p> <p>(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.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Based on records reviews and interview the facility failed to obtain drug reviews every six months for three of three clients (#1, #2 and #3) who received psychotropic drugs. The finding are:</p> <p>Review on 8/2/24 of Client #1's record revealed:</p>	V 121	<p>RECEIVED</p> <p>SEP 03 2024</p> <p>DHSR-MH Licensure Sect</p>	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Clara S. Vancey

TITLE

Administrator

(X6) DATE

8-12-24

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V 121	<p>Continued From page 1</p> <ul style="list-style-type: none"> -Admission date of 10/3/22. -Diagnoses of Congenital Deafness, Diabetes, Hypothyroidism, Encephalitis, Schizoaffective Disorder, Hyperlipidemia, GERD, PVD and Urinary Incontinence. -Physicians' order dated 10/12/23: <ul style="list-style-type: none"> -Clozapine 100 milligrams (mg)-Take 2 tablets by mouth every morning and 3 tablets at bedtime and used for anxiety. -Risperidone 3mg-Take 1 tablet by mouth twice daily and used to treat schizophrenia. -Sertraline 100mg-Take 1 tablet by mouth once daily at bedtime and used for depression. -The last six months of 2024 Medication Administration Record (MAR) revealed client #1 was administered the above medications daily. -There was no evidence of a psychotropic drug review for client #1's medications in the last six months. <p>Review on 8/2/24 of Client #2's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 6/4/11. -Diagnoses of Seizure Disorder, Diabetes Type II, Hypertension, Hyperlipidemia, Psychosis, Mental Retardation, Insomnia, Renal Insufficiency -Physician's orders dated 10/30/23: <ul style="list-style-type: none"> -Aripiprazole 15mg-Take 1 tablet by mouth daily and used to treat schizophrenia. -Clonazepam 1mg-Take 1 tablet by mouth at bedtime and used for panic disorders. -Mirtazapine 15mg-Take 1 tablet by mouth at bedtime and used for depression. -Quetiapine 400mg-Take 1 tablet by mouth at bedtime and used for insomnia. -Trazodone 100mg-Take 1 tablet by mouth at bedtime used for depression and anxiety. -The last six months of 2024 MAR revealed client #2 was administered the above medications daily. -There was no evidence of a psychotropic drug review for client #2's medication in the last six 	V 121		

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V 121	<p>Continued From page 2</p> <p>months.</p> <p>Review on 8/2/24 of Client #3's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 8/26/11. -Diagnoses of Mental Retardation, Paranoid Schizophrenia, Bipolar affective Disorder, Insomnia, Constipation, and Prediabetes. -Physician's orders dated 11/10/23: <ul style="list-style-type: none"> -Divalproex 500mg-Take 1 tablet by mouth twice daily and used for seizures. -Lorazepam 0.5mg-Take 1 tablet by mouth three time daily and used for insomnia and anxiety. -Quetiapine 400mg-Take 1 tablet by mouth at bedtime and used for insomnia. -The last six months of 2024 MAR revealed client #3 was administered the above medications daily. -There was no evidence of a psychotropic drug review for client #3's medications in the last six months. <p>Interview on 8/2/24 with the Owner revealed:</p> <ul style="list-style-type: none"> -"I was having trouble with the pharmacy scheduling a date to review the medications." -"The pharmacist that was doing my facility had quit abruptly and my facility didn't get rescheduled by the other pharmacist." -"They only had two pharmacist in the office and now they only have one." -"The ball got dropped by the pharmacy and myself in not getting the date for psychotropic drug review rescheduled." <p>This deficiency has been cited 1 time since the original cite on September 18, 2023 and must be corrected within 30 days.</p>	V 121		
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