STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL024-108	A. BUILDING: _____ B. WING _____	R 10/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ENZOR HOUSE	6089 HINSON'S CROSSROADS FAIR BLUFF, NC 28439

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on October 9, 2024. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes. (b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use.	V 114		

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V 114	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure fire and disaster drills were held at least quarterly and repeated on each shift. The findings are: Review on 10/8/24 of facility fire and disaster drills from 10/1/23 - 9/30/24 revealed: (Fire Drills) -Quarter 1: 10/01/23 - 12/31/23: No fire drills documented the 1st, 3rd, 4th, and 5th shifts. -Quarter 2: 1/1/24 - 3/31/24: No fire drills documented on the 5th shift. -Quarter 3: 4/1/24 - 6/30/24: No fire drills documented on the 4th, and 5th shifts. -Quarter 4: 7/1/24 - 9/30/24: No fire drills documented on the 2nd, 3rd and 4th shifts. (Disaster Drills) -Quarter 1: 10/01/23 - 12/31/23: No disaster drills documented the 2nd, 4th, and 5th shifts. -Quarter 2: 1/1/24 - 3/31/24: No disaster drills documented on the 5th shift. -Quarter 3: 4/1/24 - 6/30/24: No disaster drills documented on the 4th, and 5th shifts. -Quarter 4: 7/1/24 - 9/30/24: No disaster drills documented on the 3rd and 4th shifts. Interview on 10/8/24 the Program Manager stated the facility shifts were as follows: -1st shift was 8am - 4pm. -2nd shift was 4pm - 11:59pm. -3rd shift was 12am - 8am. -4th shift was weekend shift 8am - 11:59pm. -5th shift was weekend shift 12am - 8am. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 114		

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V 118	Continued From page 2	V 118		
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. (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:	V 118		

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V 118	Continued From page 3 Based on record review and interviews, the facility failed to administer medications as ordered by the physician and maintain an accurate MAR affecting 3 of 3 clients (clients #1, #2, and #3) audited. The findings are: Finding #1: Review on 10/8/24 of client #1's record revealed: -Admission date of 11/1/15. -Diagnoses included autistic disorder, disruptive behavior disorder, profound intellectual developmental disability (IDD), acne, and a history of seizures. Review on 10/8/24 of client #1's physician orders dated 3/12/24 revealed: -Adapalene 0.1% gel (acne) - Take at bedtime. Review on 10/8/24 of client #1's October 2024 MAR revealed the following blanks: -Adapalene 0.1% gel - 10/7/24 at 8pm. Finding #2: Review on 10/8/24 of client #2's record revealed: -Admission date 11/1/15. -Diagnoses included mild-IDD, hypertension, dyslipidemia, anxiety, mood disorder, generalized anxiety disorder, and at risk for falls. Review on 10/8/24 of client #2's physician orders dated 9/11/24 revealed: -Ropinirole (treats Parkinson's disease) 1 milligram (mg) - Take in the evening. -Simvastatin (treats high cholesterol) 20 mg - Take in the evening. Review on 10/8/24 of client #2's October 2024 MAR revealed the following blanks: -Ropinirole 1 mg - 10/7/24 at 8pm. -Simvastatin 20 mg - 10/7/24 at 8pm.	V 118		

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V 118	Continued From page 4 Finding #3: Review on 10/8/24 of client #3's record revealed: -Admission date 11/1/15. -Diagnoses included severe-IDD, mood disorder, depressive disorder, osteoarthritis, and legally blind. Review on 10/8/24 of client #3's physician orders dated 9/11/24 revealed: -Atorvastatin (treats high cholesterol) 40 mg - Take in the evening. -Latanoprost 0.005% (treats glaucoma) - Take 1 drop in both eyes in the evening. -Olanzapine (antipsychotic) 5 mg - Take in the evening. Review on 10/8/24 of client #3's October 2024 MAR revealed the following blanks: -Atorvastatin 40 mg - 10/7/24 at 8pm. -Latanoprost 0.005% - 10/7/24 at 8pm. -Olanzapine 5 mg - 10/7/24 at 8pm. Interview on 8/14/24 the Program Manger stated: - No clients had missed any medications. - She forgot sign off on MAR the previous night. Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 118		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS	V 736		

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V 736	Continued From page 5 (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a clean, attractive and orderly manner. The findings are: Observations on 10/8/24 between 12:30pm and 1pm of the facility revealed: -The door frame trim in client #1's room was separated from the left hand trim at the top corner and separation extended along the top of the door frame. -Client #2's top dresser drawer on the right side was missing the drawer face board and top drawer of nightstand was broken. -Client #3's far left bedroom window had broken blind slats and mildew was present along the top of the breaker box. -There was visible rust on the light fixture over the bathroom sink in bathroom #1 and drywall damage was visible on the wall in the far left corner (back of tub), approximately 6-10" in length where the tub met the wall. Drywall damage was visible in bathroom #1 along the front wall, where tub connected to the wall, extending approximately 24" up from the baseboard. -Window sill in bathroom #1 had caulking separated from bottom of window base and the popcorn ceiling was peeling around the bathroom vent. -Mildew was present along the bathroom vent in bathroom #1. -Bathroom #2 had paint peeling from wall extending approximately 36" from the baseboard and mildew was present on shower curtain.	V 736		

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V 736	Continued From page 6 -There was drywall damage in bathroom #2 above the baseboard extending 12-18" across behind the toilet. -Broken blind slats were located in bathroom #2 above the toilet and the toilet was loose from the base. Interview on 10/8/24 the Program Manager stated: -Updates and painting were needed throughout, as the house was an older home. -She had work orders in for some repairs and would put in additional orders for repairs that were needed. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 736		