

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: mhl067-133	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/08/2024
NAME OF PROVIDER OR SUPPLIER SILVERLEAF LODGE		STREET ADDRESS, CITY, STATE, ZIP CODE 109 SILVERLEAF DRIVE JACKSONVILLE, NC 28546		
(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 November 8, 2024. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff-Secure for Children and Adolescents.</p> <p>This facility is licensed for 4 and has a census of 2. The survey sample consisted of audits of 2 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</p>	V 118		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Cheryl Warner

TITLE

Director of Quality Improvement

(X6) DATE

11/19/24

Division of Health Service Regulation

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V 118	<p>Continued From page 1</p> <p>drug.</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 review and interview the facility failed to keep MARs current for 1 of 3 current clients (#2). The findings are:</p> <p>Review on 11/7/24 of client #2's record revealed:</p> <ul style="list-style-type: none"> - 14 year old male. - Admission date of 08/29/24. - Diagnoses of Posttraumatic Stress Disorder. Intellectual Developmental Disability, Reactive Attachment Disorder and Autism Spectrum Disorder. <p>Review on 11/07/24 of client #2's medication orders dated 10/15/24 revealed:</p> <ul style="list-style-type: none"> - Olanzapine (antipsychotic) 10 milligrams (mg) - 1 at noon and at bedtime. - Miralax (stool softner) - every morning. - Clonidine (treats blood pressure) 0.1mg - 2 tablets in the morning and 2 tablets at night. - Metamucil Fiber Gummies (treats constipation) - 2 in the morning. - Oxcarbazepine 600mg - 1 in the morning and 1 at bedtime. <p>Review on 11/07/24 of client #2's October 2024 and November 2024 MARs revealed: October 2024</p>	V 118		

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V 118	<p>Continued From page 2</p> <ul style="list-style-type: none"> - Miralax - no staff initials to indicate administration on 10/05/24 thru 10/08/24 and 10/31/24. - Clonidine - no staff initials to indicate administration on 10/31/24. - Metamucil Fiber Gummies - no staff initials to indicate administration on 10/14/24 thru 10/16/24. - Oxcarbazepine - no staff initials to indicate administration on 10/31/24 am and pm. <p>November 2023</p> <ul style="list-style-type: none"> - Olanzapine - no staff initials to indicate administration on 11/04/24 pm. - Metamucil Fiber Gummies - no staff initials to indicate administration on 11/04/24. <p>Interview on 11/07/24 client #2 stated he received his medication daily by staff.</p> <p>Interview on 11/07/24 the Associate Professional stated:</p> <ul style="list-style-type: none"> - Clients received their medications as ordered. - Staff may have forgotten to initial the MARs for client #2. <p>Interview on 11/07/24 the Program Manager stated she understood the MARs needed to be signed to ensure medications were administered as ordered.</p> <p>Due to the failure to accurately document medication administration, it could not be determined if the client received medication as ordered by the physician.</p>	V 118	<p>Daily checks will be completed by the Silverleaf Lodge Associate Professional to ensure that staff are documenting administration of medication by initialing the MAR.</p> <p>The Program Manager will then conduct monthly checks to ensure that staff have initialed the MAR when administering medication.</p> <p>All staff who are certified to administer medication will attend a refresher Medication Administration training where requirements and the six rights of medication administration will be reviewed.</p>	<p>11/14/24 & ongoing</p> <p>11/14/24 & ongoing</p> <p>12/4/24</p>