

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601496	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 02/04/2025
NAME OF PROVIDER OR SUPPLIER GRIER HOME #2		STREET ADDRESS, CITY, STATE, ZIP CODE 8212 SPRINGHEAD LANE CHARLOTTE, NC 28215		
(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 2-4-25. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living. This facility is licensed for 3 and has a current census of 3. 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		

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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 review and interviews the facility failed to ensure that MAR's were kept current and accurate effecting 3 of 3 clients (Client #1, #2, and #3). The finding are:</p> <p>Review on 1-30-25 of Client #1's record revealed: -Admitted 4-12-23. -Diagnoses include: Bipolar disorder, Autistic disorder, Encephalopathy, Moderate Intellectual Developmental Disorder. -Review of physician's orders revealed: Clonidine .1mg (milligrams) (behavior) once daily 2-7-24, Lithium 300mg (behavior) three times daily 1-26-25, Trazadone 50mg once daily(sleep) 2-7-24, Metformin HCL 500mg twice daily 2-7-24, Quetiapine ER 400mg once daily 2-7-24 (behavior), Risperidone 2mg 1 tablet am 2 tablets pm 1-26-25. -Review of Client #1's MAR's for November 2024- January 2025 revealed: no signatures indicating that the medication had been given since 1-21-25 on the January MAR.</p> <p>Review on 1-30-25 of Client #2's record revealed: -Admitted 2-28-21. -Diagnoses include: Autism, Severe Intellectual Developmental Disorder, Seizure Disorder, Unspecified Urinary Incontinence,</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Unspecified Insomnia.</p> <p>-Review of Physician's orders revealed: Fluoxetine 20mg (behavior) 8-7-24 once daily, Guanfacine HCL ER 2mg (behavior) 1-15-25 twice daily, Olanzapine 10mg (antipsychotic) 8-7- 24 twice daily, Baclofen 5mg (muscle spastic) 1- 15-25 three times daily, Risperidone Irritabilities) 2mg 8-7-24 three times daily, Trazadone 50mg (sleep) 8-7-24 once nightly, Lorazepam 1mg 8-7- 24 (seizure Disorder) once daily, Desmopressin acetate .2mg (incontinence) 1-15-25 once daily.</p> <p>-Review of Client #2's MAR's for November 2024- January 2025 revealed: no signatures indicating that the medication had been given since 1-16-25 on the January MAR.</p> <p>Review on 1-30-25 of Client #3's record revealed: -Admitted 2-28-23. -Diagnoses include: Autism Spectrum Disorder, Severe Intellectual Developmental Disorder, Pica, Attention Deficit/Hyper Activity Disorder mixed type, Intermittent Explosive Disorder.</p> <p>-Review of Physician's orders revealed: Carbamazine ER 300mg 3 capsules (caps) twice daily 1-14-25, Lamotrigine 25mg (behavior) 2 tabs twice daily 1-14-25, Clonidine .1mg (behavior) 1 tab three times daily 1-14-25, Amantadine 100mg (behavior) 1 cap twice a day 1-14-24, Gabapentin 300mg (pain) 3 caps at bedtime 1-14-25, Levothyroxine 50mg (hypothyroidism) 1 tab twice a day 1-14-25, Diazepam 5mg (anxiety) 1/2 tab am and noon, 1 tab pm 1-14-25, Topiramate 50mg (Pica) 2 tabs am 3 tabs pm 1-14-25.</p> <p>-Review of Client #3's MAR's for November 2024- January 2025 revealed: no signatures indicating that the medication had been given since 1-21-25 on the January MAR.</p>	V 118		

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V 118	Continued From page 3 Interview on 1-30-25 with the Alternative Family Living provider revealed: - "I know I am getting dinged for this." - He had gotten behind documenting the MAR's but the clients all got their medication. Interview on 2-4-25 with the Qualified Professional revealed: - She had already talked to the Alternative Family Living provider about the MAR's and would ensure that going forward, all MAR's would be documented accurately.	V 118		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (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 observation and interviews the facility failed to be maintained in a clean, safe, orderly manner and free from offensive odors. The findings are: , Observation on 1-30-35 revealed: - Dining room had a large amount of crumbs under the table. - Outside deck had old boxes and a broken dresser drawer pile on it. - Bedroom #1 had a strong smell of urine. - Bedroom #2 had a strong smell of urine. - Bedroom #3 had no doorknob. - Upstairs hallway had a broken bedframe sitting next to the bathroom door.	V 736		

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V 736	Continued From page 4 Interview on 1-30-25 with the Alternative Family Living Provider revealed: -He regularly cleans the carpet in the bedrooms, but the clients deliberately urinate on the floor. -The clients also smear feces on the walls. -The bedframe had just broken yesterday. -He would clean up the deck and remove the bedframe.	V 736		
V 752	27G .0304(b)(4) Hot Water Temperatures 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (4) In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit. This Rule is not met as evidenced by: Based on observations and interviews the facility failed to ensure that hot water was between 110 degrees and 116 degrees in areas where clients had access to hot water. The findings are: Observation on 1-30-25 of hot water revealed: -Kitchen sink was 120 degrees. -Half bathroom sink was 121 degrees. -Upstairs bathroom sink was 120 degrees. -Upstairs bathroom bathtub was 121 degrees. Interview in 2-4-25 with the Alternative Family	V 752		

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V 752	<p>Continued From page 5</p> <p>Living provider revealed: -He did not realize the hot water could not be that hot.</p> <p>Interview on 2-4-25 with the Qualified Professional revealed: -Their policy said that it could be 120 degrees. -They would make sure that the water was adjusted immediately.</p> <p>Client #1, #2, and #3 were unable to speak about the hot water due to being non verbal.</p>	V 752		