

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL013-224	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/13/2025
NAME OF PROVIDER OR SUPPLIER JETER HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 603 NORTH LITTLE TEXAS ROAD KANNAPOLIS, NC 28083		
(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 13, 2025. A deficiency was 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 2 and has a current census of 1. The survey sample consisted of audits of 1 current client.	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 interview, the facility failed to ensure MARs were kept current and medications were administered on the written order of a person authorized by law to prescribe medications affecting 1 of 1 client (#1). The findings are:</p> <p>Review on 3/10/25 of Client #1's record revealed: -Admission date of 6/16/23; -Diagnoses of Severe Intellectual Developmental Disabilities, Autism Disorder, Seizure Disorder. -There were no medication orders available for review.</p> <p>Review on 3/10/25 of Client #1's MARs from 1/1/25-3/10/25 revealed: -Administration of: -Keppra (seizures) 1000 milliliters (ml) solution, 15 ml by mouth twice daily. -Lamotrigine (seizures) 200 milligrams (mg) 2 tablets (tabs) twice daily. -Lamotrigine (seizures) 25mg 1 tab twice daily. -Divalproex (seizures) 250 mg 1 tab twice daily. -Quetiapine (mood) 25 mg 1 tab at bedtime. -Clobazam (seizures) 20 mg 1 tab at bedtime. -Medroxyprogesterone (birth control) 150 mg/ml every 90 days. -No documentation of administration of Keppra</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>1000 ml solution, 15 ml by mouth twice daily from 1/13/25 - 1/31/25 (19 doses).</p> <p>Interview on 3/11/25 with the Alternative Family Living (AFL) Provider revealed: -Client #1 was administered the Keppra as ordered from 1/13/25 - 1/31/25. -Made documentation errors when she failed to initial Client #1's MAR from 1/13/25 - 1/31/25. -"I take full responsibility. I don't know why I didn't mark it (document medication administration on the MAR)."</p> <p>Interview on 3/10/25 with the Qualified Professional (QP) revealed: -Was responsible for reviewing the MARs on a monthly basis to ensure documentation was completed accurately. -Failed to identify the documentation errors on Client #1's 1/13/25 - 1/31/25.</p> <p>Interview on 3/10/25 and 3/13/25 with the Assistant Director revealed: -Was an oversight that the AFL Provider did not initial the MAR to reflect administration of Keppra from 1/13/25 - 1/31/25 for a total of 19 doses. -Client #1 was administered the Keppra as ordered by his physician. -The QP will follow up with the AFL Provider to ensure MARs are documented accurately. -QP's will be reminded to ensure physician's orders are present in each facility during their monthly visits.</p>	V 118		