

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL068-102	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 04/28/2025
NAME OF PROVIDER OR SUPPLIER RSI-PUREFOY ROAD			STREET ADDRESS, CITY, STATE, ZIP CODE 102 PUREFOY ROAD CHAPEL HILL, NC 27514		
(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 April 28, 2025. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 000	<p style="text-align: center; color: blue; font-size: 1.2em;">RECEIVED</p> <p style="text-align: center; color: blue; font-size: 0.8em;">MAY 15 2025</p> <p style="text-align: center; color: blue; font-size: 0.8em;">DHSR-MH Licensure Sect</p>		
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 drug.</p>	V 118			

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

6899

DEDX11

If continuation sheet 1 of 4

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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 reviews and interviews, the facility failed to keep the MAR current affecting two of three audited clients (#1 and #3). The findings are:</p> <p>Review on 4/23/25 of client #1's record revealed: -Admission date of 2/2/23. -Diagnoses of Mild Intellectual Disability, Epilepsy, Seizure Disorder and Cerebral Palsy. -Physician's order dated 3/25/25 for the following: Polyethylene Glycol Powder 3350 (constipation), mix one capful and drink Olopatadine Sol 0.2 milligrams (mg) (itchy eyes), instill one drop into both eyes once daily Senna plus 8.6-50 mg (constipation), two tablets daily Verapamil 240 mg (high blood pressure), one tablet at bedtime Famotidine 20 mg (acid reflux), one tablet twice daily</p> <p>Review on 4/23/25 of client #1's MARs revealed:</p> <p>March 2025- -No staff initials to indicate the medication was administered for the following: Polyethylene Glycol Powder 3350 on 3/8 and 3/9. Olopatadine Sol 0.2 mg on 3/15.</p>	V 118		

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

RSI-PUREFOY ROAD

**102 PUREFOY ROAD
CHAPEL HILL, NC 27514**

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V 118	<p>Continued From page 2</p> <p>Senna plus 8.6-50 mg on 3/25. Verapamil 240 mg on 3/24 and 3/29.</p> <p>February 2025- -No staff initials to indicate the medication was administered for the following: Olopatadine Sol 0.2 mg 2/17. Famotidine 20 mg on 2/5.</p> <p>Review on 4/23/25 of client #3's record revealed: -Admission date of 11/4/03. -Diagnoses of Mild Intellectual Disability, Autistic Disorder, Epilepsy, Gastroesophageal Reflux Disease, Hyperlipidemia and Vitamin D Deficiency. -Physician's order dated 3/24/25 for the following: Ear wax Solution Removal (soften ear wax), instill 5 drops in both ears twice a day for the first 4 days of each month Zeasorb Powder (skin infection), spread topically to both feet 3 times a day Folic Acid 1 mg (folate deficiency), one tablet daily Omeprazole 20 mg (acid reflux), one capsule daily Risperidone 2 mg (bipolar disorder), one half tablet three times daily Depakote 250 mg (epilepsy), 2 tablets three times daily</p> <p>Review on 4/23/25 of client #3's MARs revealed:</p> <p>April 2025- -No staff initials to indicate the medication was administered for the following: Ear wax Solution on 4/1 both doses. Zeasorb Powder on 4/4, 4/6 and 4/20 4pm doses. Folic Acid 1 mg on 4/16, 4/18 and 4/19. Omeprazole 20 mg on 4/16. Risperidone 2 mg on 4/4, 4/6, 4/11 and 4/20 4pm</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>doses. Depakote 250 mg on 4/16 8am dose; 4/4, 4/6, 4/11, 4/19 and 4/20 4pm doses.</p> <p>March 2025- -No staff initials to indicate the medication was administered for the following: Ear wax Solution on 3/2 8am dose. Zeasorb Powder on 3/4 4pm dose.</p> <p>February 2025- -No staff initials to indicate the medication was administered for the following: Depakote 250 mg on 2/12 8am dose</p> <p>Interview on 4/23/25 with staff #1 revealed: -Clients #1 and #3 received their medication. -Staff forgot to sign off on their MARs. -He confirmed the MAR was not kept current for clients #1 and #3.</p> <p>Interview on 4/23/25 with the Supervisor of Support Services revealed: -They had some issues with staff not documenting the MARs after administering medication to clients. -There were no issues with clients getting their medication. -"The medication count is correct, staff just struggle to remember to put their initials on the MARs." -He confirmed the MAR was not kept current for clients #1 and #3.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		