STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL041-538	A. BUILDING: _____ B. WING _____	07/22/2025

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V 000	INITIAL COMMENTS An annual survey was completed on 7/22/25. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with a Developmental Disability. The facility is licensed for 4 and has a current census of 4. 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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V 118	Continued From page 1 (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: Based on record review, observation and interview, the facility failed to ensure prescription medications were administered on the written order of a person authorized by law to prescribe medications affecting 1 of 3 audited clients (client #3). The findings are: Review on 7/21/25 of client #3's record revealed: - An admission date of 10/28/93 - Diagnoses of Impulse Control Disorder; Moderate Intellectual Developmental Disorder; Downs Syndrome; Refractive Amblyopia; Diverticulitis; Onychomycosis; Hypothyroid; Hyperlipemia; Keratoconus; Acute Gout; GERD; Asymptomatic Sinus Bradycardia; Internal Hemorrhoids; Hearing Loss in Both Ears with Tubes in Right Ear; Tennis Pedis; Presbyopia; Dysphagia and Mycotic Nails - Medication Administration Record (MARs) from 7/1/25-7/21/25 with staff initials to reflect client #3 had been administered the following medication: Clindamycin Lot (Lotion) 1% Apply topically to affected area(s) around mouth for skin hygiene - Staff initials reflected client #3 had been administered the lotion each day at 8 pm with it last being documented as administered on 7/20/25 at 8 pm by staff #4	V 118		

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V 118	Continued From page 2 Observation on 7/21/25 at 4:30 pm of client #3's medications revealed: - No Clindamycin lotion was present in the facility for client #3 Interview on 7/21/25 with staff #3 revealed: - Could not provide the lotion to the surveyor for observation and review - Would have to speak with "nursing" to determine the status of the medication Interview on 7/22/25 with the Qualified Professional (QP) revealed: - Had spoken with staff (unnamed) at the facility earlier on 7/22/25 regarding the missing lotion and if they knew when client #3 had run out of the lotion - Not sure why staff had failed to notify the agency's nursing staff that client #3 had run out of his lotion - Had spoken with the agency's Licensed Practical Nurse (LPN) and requested she place an order for client #3's lotion to be refilled immediately Interview on 7/22/25 with the LPN revealed: - Planned to "write up an inservice" for her and the QP to present to facility staff about when to notify the nursing department when a client's medications needed to be refilled - Client #3 used the lotion to prevent a "skin breakout" if he were exposed to something that he was "sensitive" to - Had not been notified by any staff that client #3 had experienced any recent issues with his skin - Placed an refill order for client #3's lotion on 7/22/25	V 118		

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V 119	Continued From page 3	V 119		
V 119	27G .0209 (D) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge. This Rule is not met as evidenced by: Based on record review, observation and interview, the facility failed to ensure all	V 119		

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V 119	Continued From page 4	V 119		

prescription medications were disposed of in a manner that guards against diversion or accidental ingestion affecting 2 of 3 audited clients (clients #1 and #2). The findings are:

Review on 7/21/25 of client #1's record revealed:
- An admission date of 8/19/20
- Diagnoses of Autism; Attention Deficit Hyperactivity Disorder (D/O); Moderate Intellectual Disability; Seizure Disorder; and Mixed Receptive/Expressive Language Disorder
- Client #1's Medication Administration Record (MARs) from 5/1/25 - 7/21/25 revealed client #1 was to receive the following medication between 7 pm to 11 pm every evening: Sodium Fluoride PST (Prevention Strength Toothpaste) 1.1% (prevent tooth decay) Use a pea size amount of toothpaste to brush every evening spit out excess and do not rinse
- Based on staff 4's documentation on the MAR, the last day client #1 used the toothpaste was on 7/20/25

Observation on 7/22/25 at 4:34 pm of client #1's medications revealed:
- The dispense date listed on the label on the Sodium Fluoride PST 1.1% toothpaste was 2/2/23 an expiration date of 8/2024 imprinted on the crimped end of the toothpaste tube

Review on 7/21/25 of client #2's record revealed:
- An admission date of 3/29/04
- Diagnoses: Major Depressive D/O; Attention Deficit D/O; Mood D/O; Intermittent Explosive D/O; Moderate Intellectual Developmental Disability, Down's Syndrome; Functional Heart Murmur; Post Bilateral Myringotomy; Hyperthyroidism; Astigmatism; Mycotic Toenails; Diffuse Toxic Goiter; Graves' Disease; Chronic Right Otitis External and History of Seasonal

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V 119	Continued From page 5 Allergies and Hyperopia - Client #2's Medication Administration Record (MARs) from 5/1/25 - 7/21/25 revealed client #2 had been prescribed the following medication between 7 pm to 11 pm: Sodium Fluoride PST 1.1% (prevent tooth decay) Use a pea size amount of toothpaste to brush every evening spit out excess and do not rinse - Based on staff 4's documentation on the MAR, the last day client #2 used the toothpaste was on 7/20/25 Observation on 7/22/25 of client #2's medications at 4:20 pm revealed: - The dispense date listed on the label on the Sodium Fluoride PST 1/1% toothpaste was 2/2/23 with an expiration date of 8/2024 imprinted on the crimped end of the toothpaste tube Interview on 7/22/25 with the Qualified Professional (QP) revealed: - Had staff remove the expired toothpaste from the facility immediately - Not sure why staff had failed to discard the expired toothpaste and make his agency's nursing staff aware the clients' old toothpaste needed to be replaced - Had spoken with his agency's Licensed Practical Nurse (LPN) and requested she order refills of client (#1 and #2's) toothpaste today Interview on 7/22/25 with the LPN revealed: - Planned to "write up an inservice" for her and the QP to present to the facility staff about what protocol to follow when they realized a client's medication had expired - The Residential Team Leader would now be responsible for checking the expiration dates on the client's medications - Spoke with the agency's physician on 7/22/25	V 119		

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V 119	Continued From page 6 who reported to her that other than the reduced effectiveness of flouride in the toothpaste, there were no other health issues associated having used the expired product - Had placed an refill order for the toothpaste for clients (#1 and #2) on 7/22/25	V 119		