

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL066-024	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 04/18/2018
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NAME OF PROVIDER OR SUPPLIER FAMILY ADVANTAGE LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 3104 HWY 301 N GARYSBURG, NC 27831
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(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 4/18/18. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Level III for Children and Adolescents.</p>	V 000		
V 111	<p>27G .0205 (A-B) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to:</p> <ol style="list-style-type: none"> (1) the client's presenting problem; (2) the client's needs and strengths; (3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission; (4) a pertinent social, family, and medical history; and (5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs. <p>(b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter referred to as the "plan," strategies to address the client's presenting problem shall be documented.</p>	V 111		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 111	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the Qualified Professional failed to assure assessments were completed, including but not limited to presenting problems, needs, strengths and admitting diagnoses, and maintained in the record for 3 of 3 audited clients (#1, #2, #3). The findings are:</p> <p>Review on 4/18/18 of client #1's record revealed:</p> <ul style="list-style-type: none"> - an admission date of 11/14/17 - an undated referral application indicating the client was a victim of neglect, physical and emotional abuse; no other information was provided <p>Review on 4/18/18 of client #2's record revealed:</p> <ul style="list-style-type: none"> - an admission date of 10/21/17 - a Comprehensive Clinical Assessment completed by another agency with diagnoses including Bipolar Disorder mixed with psychotic features and Hyperlipidemia - an incomplete admission assessment completed by the agency <p>Review on 4/18/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> - an admission date of 1/18/17 - Discharge Orders from a psychiatric facility dated 8/4/17 with diagnoses including Post Traumatic Stress Disorder, Cyclothymia, Rule out Bipolar Disorder type 1 with mixed psychosis - no evidence of an admission assessment completed by the agency 	V 111		

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V 111	Continued From page 2 During an interview on 4/18/18, the Manager reported assessment questions were forwarded to client #3's guardian but she had not provided the facility with the requested information.	V 111		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record review and interviews, the facility staff failed to assure disaster drills were completed quarterly per shift. The findings are: During an interview on 4/18/18, the Manager reported the facility operated three shifts: 8:00 AM to 4:00 PM, 4:00 PM to 12:00 AM and 12:00 to 8:00 AM. Review on 4/18/18 of facility disaster drills revealed drills were completed:	V 114		

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V 114	<p>Continued From page 3</p> <ul style="list-style-type: none"> - 4/10/18 at 8:33 PM - 11/13/17 at 11:10 AM - 9/24/17 at 6:45 AM - 7/27/17 at 5:00 PM - 6/26/17 at 5:15 AM - the documentation provided did not reflect a disaster drill was completed at least quarterly for each shift <p>During interviews with clients on 4/18/18:</p> <ul style="list-style-type: none"> - one client reported he had not participated in a disaster drill - one client reported he had participated in one disaster drill - a third client declined to be interviewed - the fourth client was no a school trip and was not available <p>[This deficiency institutes a recited rule area and must be corrected within 30 days.]</p>	V 114		
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>	V 118		

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V 118	<p>Continued From page 4</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> <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 observation, record review and interview, the governing body failed to assure medications were administered on the written order on a person authorized to prescribe medications for 1 of 3 audited clients (#3). The findings are:</p> <p>Observation on 4/18/18 of client #3's medications revealed the following medications were present:</p> <ul style="list-style-type: none"> - Levothyroxine 25 mg tablets with instructions to administer one tablet daily - Omeprazole DR 20 mg tablets with instructions to administer one tablet daily - Potassium Chloride ER 10 MEQ tablets with instructions to administer one tablet daily - Haloperidol 5 mg tablets filled 2/16/18 and 4/13/18 with instructions to administer 1/2 tablet at hour of sleep 	V 118		

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V 118	<p>Continued From page 5</p> <p>Review on 4/18/18 of client #3's record revealed:</p> <ul style="list-style-type: none"> - an admission date of 1/18/17 - Discharge Orders from a psychiatric facility dated 8/4/17 with diagnoses including Post Traumatic Stress Disorder, Cyclothymia, Rule out Bipolar Disorder type 1 with mixed psychosis - no physicians' orders were maintained in the record for Levothyroxine, Omeprazole or Potassium Chloride - a physician's order dated 3/23/18 for Haloperidol 5 mg tablets had instructions to administer 1/2 tablet every morning and 1 tablet at _____ hour of sleep - March and April 2018 medication administration records (MARs) had documentation which reflected client #3 was administered 1/2 tablet of Haloperidol 5 mg tablet at hour of sleep <p>During an interview on 4/18/18, the Manager reported she could not locate the missing physicians' orders but would try to obtain them from the doctor's office. The Manager further reported the pharmacy did not fill client #3's most recent Haloperidol order correctly after it changed in March and she nor the other staff caught the discrepancy between what the pharmacy printed on the label and the order signed by the doctor. The Manager reported she and other staff had been giving the medication incorrectly.</p>	V 118		