

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL082-014	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/05/2018
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NAME OF PROVIDER OR SUPPLIER HARVEST HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 1470 MAPLE GROVE CHURCH ROAD DUNN, NC 28334
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on July 5, 2018. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600E, Supervised Living for Adults whose Primary Diagnosis is Substance Abuse Dependency.</p>	V 000		
V 112	<p>27G .0205 (C-D) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days.</p> <p>(d) The plan shall include:</p> <p>(1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement;</p> <p>(2) strategies;</p> <p>(3) staff responsible;</p> <p>(4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both;</p> <p>(5) basis for evaluation or assessment of outcome achievement; and</p> <p>(6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.</p>	V 112		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to develop and implement strategies based on assessment for two of three audited clients (#6 & #9). The findings are:</p> <p>Review on 7/5/18 of client #6's record revealed: - 35 year old male admitted to the facility 6/21/18. - Diagnoses included Alcohol Dependence, Cocaine Dependence, Cannabis Dependence, Opioid Dependence, Alcohol Dependence with Alcohol Induced Mood Disorder, Major Depressive Disorder, Generalized Anxiety disorder, Post-Traumatic Stress Disorder, and Hepatitis C. - Person Centered Plan signed 6/21/18 with no goals or strategies to address client #6's diagnosis of Hepatitis C.</p> <p>Review on 7/5/18 of client #9's record revealed: - 53 year old mal admitted to the facility 7/3/18. - Diagnoses included Alcohol Dependence, Cocaine Dependence, Post-Traumatic Stress Disorder, and Diabetes. - Person Centered Plan signed 7/3/18 with no goals or strategies to address client #9's Diabetes or its management.</p> <p>During interview on 7/5/18 the Residential Clinical Manager stated some of his responsibilities included supervising the Substance Abuse Counselors and the Residential Supervisor, assisting with client intakes, and screenings, and facilitating groups as needed. The Substance Abuse Counselors were responsible for developing the Person Centered Plans. Client medical needs, such as Diabetes, Hepatitis C, HIV-AIDS (human immunodeficiency</p>	V 112		

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V 112	Continued From page 2 virus-acquired immunodeficiency syndrome), and their management, should be included in the treatment plans. The facility's clinical management team had discussed inclusion of medical needs in the treatment plans recently. He would ask the counselors to include medical needs in the treatment plans.	V 112		
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. (5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation	V 118		

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V 118	<p>Continued From page 3 with a physician.</p> <p>This Rule is not met as evidenced by: Based on record review, observation, and interview the facility failed to administer medications as ordered by a physician and to keep the MAR current affecting one of three audited clients (#3). The findings are:</p> <p>Review on 7/5/18 of client #3's record revealed: - 37 year old male admitted to the facility 6/21/18. - Diagnoses included Alcohol Dependence, Cocaine Dependence, Cannabis Dependence, Opioid Dependence, and Hallucinogen Dependence. - Physician's orders signed 6/21/18 for Buspirone (treats anxiety) 15 mg (milligrams) one tablet by mouth twice daily, Effexor XR (extended release) (treats depression and generalized anxiety disorder), 75 mg one tablet by mouth every morning.</p> <p>Review on 7/5/18 of client #3's MARs for June and July 2018 revealed: - MARs kept electronically. - Documentation that the evening dose of Buspirone was not administered 6/22/18 or 6/28/18; no explanation for the omission was documented. - Transcription for Effexor XR 37.5 mg, one tablet by mouth every day, with staff documentation that medication was administered twice daily since admission since client #3's admission.</p> <p>Observation at approximately 2:30 pm on 7/5/18 of client #3's medications on hand revealed</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>Effexor XR 75 mg, one tablet by mouth every morning, dispensed 5/8/18.</p> <p>During interview on 7/5/18 client #3 stated he took his medications daily and had not missed any doses since his admission to the facility.</p> <p>During interview on 7/5/18 the Residential Clinical Manager stated he understood the requirement for clients to receive medications as ordered by the physician and for MARs to be kept current and reflect the physician's orders. He would have the MAR transcription for Effexor ER corrected.</p>	V 118		