

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL075-005 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 09/20/2018 |
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| NAME OF PROVIDER OR SUPPLIER PAVILLON INTERNATIONAL | STREET ADDRESS, CITY, STATE, ZIP CODE 500 PAVILLON PLACE MILL SPRING, NC 28756 |
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| V 000 | <p>INITIAL COMMENTS</p> <p>An annual survey was completed on September 20, 2018. Deficiencies were cited.</p> <p>This facility is licensed for the following service categories:</p> <p>10A NCAC 27G .3400 Residential Treatment/Rehabilitation for Individuals with Substance Abuse Disorders</p> <p>10A NCAC 27G .5000 Facility Based Crisis Service for Individuals of All Disability Groups</p> <p>10A NCAC 27G .3100 Nonhospital Medical Detoxification for Individuals Who Are Substance Abusers</p> <p>10A NCAC 27G .3700 Day Treatment Facilities for Individuals with Substance Abuse Disorders</p> | V 000 | | |
| V 114 | <p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(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.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> | V 114 | | |

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

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| V 114 | <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 conduct fire and disaster drills quarterly on each shift. The findings are:</p> <p>Review on 9/20/18 of the fire and disaster drills for October 2017 through June 2018 revealed: October 2017 - December 2017 -No documentation of fire and disaster drills for 1st, 2nd and 3rd shifts.</p> <p>January 2018 - March 2018 -No documentation of fire drills for the 3rd shift.</p> <p>Interview on 9/20/18 with the Quality Manager and Safety Officer revealed: -she was missing a book with fire and disaster drills and that it must be in their other office which was in Wilmington; -she recently hired new facility managers who would keep up with the drills in the future; -she knew she was behind on conducting some of the drills.</p> | V 114 | | |
| V 220 | <p>27G .3103 Nonhospital Med. Detox. - Operations</p> <p>10A NCAC 27G .3103 OPERATIONS (a) Monitoring Clients. Each facility shall have a written policy that requires: (1) procedures for monitoring each client's general condition and vital signs during at least the first 72 hours of the detoxification process; and (2) procedures for monitoring and recording each client's pulse rate, blood pressure and temperature at least every four hours for the first 24 hours and at least three times daily</p> | V 220 | | |

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| V 220 | <p>Continued From page 2</p> <p>thereafter.</p> <p>(b) Discharge Planning And Referral To Treatment/Rehabilitation Facility. Before discharging the client, the facility shall complete a discharge plan for each client and refer each client who has completed detoxification to an outpatient or residential treatment/rehabilitation facility.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to monitor and record the pulse rate, blood pressure and temperature at least every four hours for the first 24 hours of the detoxification process for one of one client (Client #4). The findings are:</p> <p>Review on 9/20/18 of Client #4's record revealed: -admission 9/18/18 -diagnoses of Opioid Use Disorder, Alcohol Use Disorder, Hypothyroidism, and Mixed Hyperlipidemia.</p> <p>Review on 9/20/18 of Client #4's "Alcohol Detox (Using Ativan) Medical Orders" dated 9/18/18 revealed: -"CIWA [Clinical Institute Withdrawal Assessment] on admission and q [every] 4 hrs x 24 hrs"</p> <p>Review on 9/20/18 of Client #4's CIWA scale revealed: -Biometrics included pulse, temperature, respiration and blood pressure were taken: 9/18/18 - 11:53 PM 9/19/18 - 10:25 AM</p> | V 220 | | |

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| V 220 | <p>Continued From page 3</p> <p>Review on 9/20/18 of a separate document with Client #4's Biometrics revealed: -different times than the CIWA scale; -9/18/18 - 2:24 PM - initial nursing assessment 9/18/18 - 8:45 PM; 9/19/18 - 10:10 AM; 9/19/18 - 8:20 PM</p> <p>Interview on 9/20/18 with RN #1 revealed: -client's were monitored every 4 hours the entire time they were in detox; -if they were medicated with Valium or Ativan they were monitored every hour; -if the client was sleeping they were not awakened and the protocol was to check on them every 6 hours; -when asleep, open the door and watch for the client's chest to rise and fall or listen for snoring.</p> <p>Interview on 9/20/18 with the Chief Operations Officer revealed: -their protocol was to conduct vital signs every 4 hours for the first 24 hours, even if the client was asleep.</p> | V 220 | | |