

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 20140057	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/16/2019
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NAME OF PROVIDER OR SUPPLIER STRATEGIC BEHAVIORAL CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 2050 MERCANTILE DRIVE LELAND, NC 28451
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V 000	<p>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on May 16, 2019. one complaint was substantiated (intake #NC00151472) and three complaints were unsubstantiated (intake #NC00150303, NC00151527 and NC00150312). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment Facility for Children and Adolescents.</p>	V 000		
V 105	<p>27G .0201 (A) (1-7) Governing Body Policies</p> <p>10A NCAC 27G .0201 GOVERNING BODY POLICIES</p> <p>(a) The governing body responsible for each facility or service shall develop and implement written policies for the following:</p> <p>(1) delegation of management authority for the operation of the facility and services;</p> <p>(2) criteria for admission;</p> <p>(3) criteria for discharge;</p> <p>(4) admission assessments, including:</p> <p>(A) who will perform the assessment; and</p> <p>(B) time frames for completing assessment.</p> <p>(5) client record management, including:</p> <p>(A) persons authorized to document;</p> <p>(B) transporting records;</p> <p>(C) safeguard of records against loss, tampering, defacement or use by unauthorized persons;</p> <p>(D) assurance of record accessibility to authorized users at all times; and</p> <p>(E) assurance of confidentiality of records.</p> <p>(6) screenings, which shall include:</p> <p>(A) an assessment of the individual's presenting problem or need;</p> <p>(B) an assessment of whether or not the facility can provide services to address the individual's</p>	V 105		

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

TITLE

(X6) DATE

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V 105	Continued From page 1 needs; and (C) the disposition, including referrals and recommendations; (7) quality assurance and quality improvement activities, including: (A) composition and activities of a quality assurance and quality improvement committee; (B) written quality assurance and quality improvement plan; (C) methods for monitoring and evaluating the quality and appropriateness of client care, including delineation of client outcomes and utilization of services; (D) professional or clinical supervision, including a requirement that staff who are not qualified professionals and provide direct client services shall be supervised by a qualified professional in that area of service; (E) strategies for improving client care; (F) review of staff qualifications and a determination made to grant treatment/habilitation privileges: (G) review of all fatalities of active clients who were being served in area-operated or contracted residential programs at the time of death; (H) adoption of standards that assure operational and programmatic performance meeting applicable standards of practice. For this purpose, "applicable standards of practice" means a level of competence established with reference to the prevailing and accepted methods, and the degree of knowledge, skill and care exercised by other practitioners in the field;	V 105		

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V 105	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to develop and implement written policies for adoption of standards that assure operational and programmatic performance meeting applicable standards of practice for the training in Cardiopulmonary Resuscitation (CPR) on an annual basis as required by CFR §483.376(f) for 2 of 8 audited staff (#4 and #5).</p> <p>Review on 05/16/19 of CFR §483.376(f) revealed: "Staff must demonstrate...their competencies as specified in paragraph (b) of this section on an annual basis...(b) Certification in the use of cardiopulmonary resuscitation, including periodic recertification, is required."</p> <p>Review on 05/16/19 of staff #4 record revealed: -Title of Mental Health Technician (MHT). -Hire date of August 2018. -Documented CPR training dated 07/26/17-07/2019. Not completed annually.</p> <p>Review on 05/16/19 of staff #5's record revealed: -Title of MHT. -Hire date of 01/11/16. -Documented CPR training dated 02/21/18. Not completed annually.</p> <p>During interview on 05/16/19 the Director for Quality and Risk Management stated: -She misunderstood the regulations that were explained to them by the "Home" office. -She understood it as the staff could take a skills assessment and not have to take the hands on test every year. -It would be corrected and the staff would be properly trained.</p>	V 105		

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V 105	Continued From page 3 [This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.]	V 105		
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 with a physician.	V 118		

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V 118	<p>Continued From page 4</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to administer medications on the written order of a physician and failed to keep the MARs current affecting 4 of 6 current clients (#2, #3, #4, #6) and 1 of 1 Former Client (FC #7). The findings are:</p> <p>Finding #1 Review on 05/15/19 of client #2's record revealed: -17 year old female. -Admission date 04/05/19. -Diagnoses of Bipolar Disorder and Borderline Personality Traits.</p> <p>Review on 05/15/19 of client #2's signed medication orders dated 04/05/19 revealed: -Lithium Carbonate (treats Bipolar Disorder) 600 milligrams (mg) - three times daily. -Zyrtec (treats seasonal allergies) 10mg - take once daily. -Flonase (treats seasonal allergies) - one spray in both nostrils twice daily. -Flovent (treats asthma) - inhale 2 puffs twice daily.</p> <p>Review on 05/15/19 of client #2's April 2019 and May 2019 MARs revealed the following blanks: April 2019 -Lithium - 04/15/19 and 04/16/19 at 4pm. -Zyrtec - 04/15/19. -Flonase - 04/15/19 and 04/21/19 at 8am.</p> <p>May 2019 - Flovent - 05/02/19.</p> <p>Interview on 05/16/19 client #2 stated she</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>received her medications daily as ordered.</p> <p>Finding #2: Review on 05/15/19 of client #3's record revealed: -11 year old male. -Admission date of 01/12/19. -Diagnoses of Disruptive Mood Dysregulation Disorder, Asthma, Eczema and Seasonal Allergies.</p> <p>Review on 05/15/19 of client #3's medication orders dated 01/12/19 revealed: -Flonase - use 2 sprays in each nostril daily. -Moisturizing cream - apply topically twice daily.</p> <p>Review on 05/15/19 of client #3's April 2019 MAR revealed the following blanks: -Flonase - 04/20/19. -Moisturizing cream - 04/19 and 04/23/19 at 7pm and 04/28/19 at 8am.</p> <p>Interview on 05/16/19 client #3 stated he received his medications as ordered.</p> <p>Finding #3 Review on 05/15/19 of client #4's record revealed: -13 year old male. -Admission date of 06/29/19. -Diagnoses of Disruptive Mood Dysregulation Disorder, Attention Deficit Hyperactivity Disorder (ADHD), Combined Type, Vitamin D Insufficiency.</p> <p>Review on 05/15/19 of client #4's Physician order revealed: 07/20/19 -Melatonin (sleep aid) 3mg Give 2 tablets by mouth at bedtime.</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>Review on 05/15/19 of client #4 May 2019 MAR revealed the following blank: -05/07/19</p> <p>During interview on 05/16/19 client #4 stated he received his medication daily.</p> <p>Finding #4 Review on 05/15/19 of client #6's record revealed: -17 year old male. -Admission date of 04/19/19. -Diagnoses of Mood Dysregulation Disorder.</p> <p>Review on 05/15/19 of client #6's Physician orders revealed: 04/19/19 -Seroquel XR (antipsychotic) 50mg by mouth at 6pm. -Seroquel XR 150mg by mouth at 6pm.</p> <p>Review on 05/15/19 of client #6's May 2019 MAR revealed the following blanks: -05/06/19.</p> <p>During interview on 05/16/19 client #6 stated he received his medication daily.</p> <p>Finding #5: Review on 05/15/19 of FC #7's record revealed: -14 year old male. -Admission date of 03/01/18. -Discharge Date of 05/07/19. -Diagnoses of Oppositional Defiant Disorder, ADHD-Combined Type, Disruptive Mood Dysregulation Disorder, Constipation, Hypothyroidism and Vitamin D Deficiency.</p> <p>Review on 05/15/19 of FC #7's medication orders dated 03/13/19 revealed:</p>	V 118		

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V 118	<p>Continued From page 7</p> <ul style="list-style-type: none"> -Flonase - use 2 sprays in each nostril daily. -Montelukast (prevents asthma attacks) 10mg - 1 tablet daily. -Vitamin C 500mg - take 2 tablets daily. -Culturrelle (assists with digestion) - take one capsule every morning. -Mineral Oil - give 1 tablespoon daily at 7pm. -Senna Laxative - take 1 tablet daily for constipation. <p>Review on 05/15/19 of client FC #7's April 2019 MAR revealed the following blanks:</p> <ul style="list-style-type: none"> -Flonase - 04/20/19 and 04/28/19. -Montelukast - 04/20/19 and 04/28/19. -Vitamin C - 04/20/19 and 04/28/19. -Culturrelle - 04/20/19 and 04/28/19. -Mineral Oil - 04/20/19 and 04/24/19. -Senna Laxative - 04/20/19. <p>Interview on 05/16/19 the Chief Executive Officer stated:</p> <ul style="list-style-type: none"> -The facility was scheduled to soon begin electronic MARs. -The electronic MARs should help resolve the issues with blanks. <p>Due to the failure to accurately document medication administration it could not be determined if clients received their medications as ordered by the physician.</p> <p>[This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.]</p>	V 118		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(c) Each facility and its grounds shall be</p>	V 736		

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V 736	<p>Continued From page 8</p> <p>maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a clean, attractive and orderly manner. The findings are:</p> <p>During observation of the facility on 05/15/19 at approximately 2:00pm revealed:</p> <ul style="list-style-type: none"> -Room 105 had a white substance scattered throughout the bathroom walls. The carpet was torn at the threshold of the door way. -Room 106 had writing on the ceiling. -Room 108 had pencil writing on the walls. -Room 109 had two top layer strips of Formica torn away from the bathroom sink. -Room 202 had plastered areas on the wall in front of the toilet in the bathroom. -Room 203 had a white substance on the walls. -Room 205 had obscene words handwritten on the wall, "F***." -Room 207 had linoleum bent away from the wall. -Room 209 had writing on the side of the wooden storage unit. -Room 301 had writing on the desk. -Room 302 had plastered areas in the bathroom next to the toilet. -Room 303 had several dark marks on the ceiling. -Room 307 had white stains on the floor and dark marks on the ceilings. A white substance was scattered on the walls. -Room 306 had writing on the walls and carpet soiled. -Room 308 had writing on the ceiling. 	V 736		

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V 736	<p>Continued From page 9</p> <ul style="list-style-type: none"> -Room 309 had handwriting on the wall. -The last group room at the end of 300 hall revealed bits of trash on the floor. -Room 400 the molding in the bathroom was peeling from the wall and appeared to have mold/mildew. A large hole was in the floor next to the shower and writing on the walls. -Room 401 had a white substance on the walls throughout the room. An approximately 6 inch by 6 inch top layer of sheetrock had been peeled from the wall. -Room 402 had a white substance on the wall next to the beds. The bathroom molding was peeling from the wall and several cracks in the molding. -Room 403 had marks on the walls and debris scattered on the floor. -Room 404 white substance on the walls next to the bed and writing on the walls. -Room 405 had a large pile of clothes beside the bed. A white substance was on the walls. The bathroom door was locked and inaccessible for clients. -Room 406 had white substance on the walls and writing on the walls. -Room 407 had handwriting on the walls. The approximately 1/2 of the carpeted client living area was wet. -Room 408 had writing and white substance on the wall. <p>During interview on 05/15/19 the Director for Quality and Risk Management stated:</p> <ul style="list-style-type: none"> -The bathroom in room 405 was under repair and was locked. -Staff had reported a work order had been completed for the wet carpet in room 407. -The white substance on the walls was probably toothpaste clients used during hygiene. 	V 736		

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V 736	Continued From page 10 [This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.]	V 736		