

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL041-523</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>06/19/2019</b>
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NAME OF PROVIDER OR SUPPLIER  
**GREENSBORO TREATMENT CENTER**

STREET ADDRESS, CITY, STATE, ZIP CODE  
**207 WESTGATE DRIVE, SUITES G - J  
GREENSBORO, NC 27407**

(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	INITIAL COMMENTS  An annual survey was completed 6/19/19. Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G .3600 Outpatient Methadone.  The census for the facility was 283.	V 000		
V 233	27G .3601 Outpt. Opiod Tx. - Scope  10A NCAC 27G .3601 SCOPE (a) An outpatient opioid treatment facility provides periodic services designed to offer the individual an opportunity to effect constructive changes in his lifestyle by using methadone or other medications approved for use in opioid treatment in conjunction with the provision of rehabilitation and medical services. (b) Methadone and other medications approved for use in opioid treatment are also tools in the detoxification and rehabilitation process of an opioid dependent individual. (c) For the purpose of detoxification, methadone and other medications approved for use in opioid treatment shall be administered in decreasing doses for a period not to exceed 180 days. (d) For individuals with a history of being physiologically addicted to an opioid drug for at least one year before admission to the service, methadone and other medications approved for use in opioid treatment may also be used in maintenance treatment. In these cases, methadone and other medications approved for use in opioid treatment may be administered or dispensed in excess of 180 days and shall be administered in stable and clinically established dosage levels.	V 233	To correct the deficient area and prevent the problem from reoccurring, all staff were trained on 6/19/19 on the following: - Following the chain of command and emergency procedures to support our patients in constructing positive lifestyle changes. - Appropriate use of the Financial MSW and charging practices. - How to handle outages in a way that minimizes the impact on the patients' daily schedule and supports their recovery process.  After consultation with the Medical Director, Client #1's dose has been increased back to her original dose. Additionally, the credit card machine system has been updated via their support/help line.  The Program Director will continue to provide guidance, support, and training to staff to ensure best practices are adhered to at all times. As of 7/3/19, clinic is now in compliance with this cited deficiency.	

DHSR - Mental Health  
  
JUL 15 2019  
  
Lic. & Cert. Section

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Guy Cleeve*

TITLE

Program Director

(X6) DATE

7/10/2019

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V 233	<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 ensure one of twelve (client #1) audited clients was provided the opportunity for continued constructive change by using methadone treatment. The findings are:</p> <p>Review on 6/18/19 of client #1's record revealed: -Admission date of 2/12/19. -Diagnoses of Opiod Dependence.</p> <p>Review on 6/18/19 of Nurse Note dated 6/16/19 revealed: -"Credit Card machine broken and unable to pay, decreased dose by 10 mg."</p> <p>During interview on 6/18/19 Client #1 stated: -Started treatment at the clinic in February 2019 and was seven months pregnant. -Had severe migraines and been getting treatment for years for those. -Baby is now eight weeks old. -No issues with child birth and had all negative drug screens since admission except for medications given during c-section. -Currently dosing at 125 mg of methadone. -Had been going up due to continued symptoms of withdrawals. -On Sunday 6/16/19 (Sunday) came in to dose and the credit card machine was down. -Nurse #1 was at the window and told several of them they could run to a ATM to obtain cash. -Had been having financial difficulty since being out on maternity leave, so was paying with a credit card. -Nurse #1 was very "rude and short" with them saying if they could not get cash to pay, they</p>	V 233		

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V 233	<p>Continued From page 2</p> <p>would have to take a financial taper.</p> <ul style="list-style-type: none"> <li>-Dosed on 6/16/19 at 115 mg because she could not pay cash.</li> <li>-"I did not have a choice, because I could not go get cash."</li> <li>-There was a few that morning that could go get cash, but she had to take the financial taper.</li> <li>-Nurse #1 would not allow a charge.</li> <li>-You can charge if you do not have positive drug screens or an outstanding balance, "I did not have either of them."</li> <li>-Nurse #2 was saying that was not fair and Nurse #1 said, "Life aint fair."</li> <li>-It was like she was in such a hurry to get out and not really worried about getting the machine fixed.</li> <li>-Had always like Nurse #1 but in the last few months, she seems to have an attitude, telling people not to come in at end of dosing be she needs to take her lunch.</li> <li>--Nurse #1 was upset because people would come so close to the end of dosing time, she would say, "Ya'll are cutting into my time."</li> </ul> <p>During interview on 6/19/19 Nurse #1 stated:</p> <ul style="list-style-type: none"> <li>-On 6/16/19 the credit card machine was not working.</li> <li>-There was no protocol for when this occurred, this was a Sunday, so the Director was not in.</li> <li>-During the week, if the machine is not working, the Director will authorize a charge for the next day.</li> <li>-No one else is authorized to allow charges.</li> <li>-Case Manager #1 was the only one on duty and she tried multiple times to contact the Director, but they were not able to get up with her.</li> <li>-So therefore they could not authorize a charge and if they could not go to ATM, they would have to take a financial taper.</li> </ul>	V 233		
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V 233	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-When a person is unable to pay, they have to take a financial taper of 10 mg until they can pay again.</li> <li>-There was only five people left to dose when the machine broke, a few went to ATM and the others took the financial, "They could have went to ATM too, but they chose the taper."</li> <li>-Stayed open an extra fifteen minutes so they could go get cash.</li> <li>-This was their only two options.</li> <li>-The clients did not seem to be upset by it, just one client said "this is not fair."</li> <li>-Client #1 dosed her regular dose on 6/17/19 with no issues.</li> <li>-Not sure if anyone called about the machine, "It was the weekend and time to close."</li> </ul> <p>During interview on 6/19/19 The Nursing Director state:</p> <ul style="list-style-type: none"> <li>-When the machine stopped working on 6/16/19 it only affected a few clients as it was close to closing.</li> <li>-Only three did not go to ATM and had to take a financial taper because they did not have cash.</li> <li>-Two of the three could not charge because they positive drug screens, but one could have charged, not sure why she did not.</li> <li>-Never had this to happen on the weekend.</li> <li>-During the week, they can call the company and have the machine reset..</li> <li>-Nurses can make the decision to allow charges, only a financial taper.</li> </ul> <p>During interview on 6/19/19 Case Manager #1 stated:</p> <ul style="list-style-type: none"> <li>-Was the only counselor working on 6/16/19 with two dosing nurses.</li> <li>-The credit card machine went down 10-15 minutes before closing.</li> </ul>	V 233		

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V 233	<p>Continued From page 4</p> <ul style="list-style-type: none"> <li>-There were about eight clients waiting to dose.</li> <li>-They were told they could go to the ATM or take a financial taper.</li> <li>-Only the Director is authorized to allow a charge.</li> <li>-Did not contact the Director as she was aware there are no charges on the weekends.</li> <li>-They stayed open an extra fifteen minutes to allow people time to go to the ATM.</li> <li>-The others chose a financial taper.</li> <li>-The cashier called the credit card machine company and got the machine back working, but this was after dosing hours.</li> <li>-Clients were visibly frustrated by this, and could tell they were really upset.</li> <li>-There was no other options for them.</li> </ul> <p>During interview on 6/19/19 The Program Director stated:</p> <ul style="list-style-type: none"> <li>-Was made aware on 6/17/19 the credit card machine broke on 6/16/19 at the end of dosing.</li> <li>-No one tried to call her on 6/16/19 to authorize a charge.</li> <li>-The staff on 6/16/19 should have allowed the clients to charge their dose because this was not their fault the machine broke.</li> <li>-Also, staff should have called the number on the machine to have it reset, that usually works during the week.</li> <li>-There is no written policy for when this occurs, but the clients should not have been denied their prescribed dose.</li> </ul> <p>During interview on 6/19/19 The Regional Director stated:</p> <ul style="list-style-type: none"> <li>-Just found out about the situation with the credit card machine today.</li> <li>-Clients should have been allowed to charge and dose at their prescribed dose.</li> </ul>	V 233		

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V 233	Continued From page 5  -"This is unacceptable practice" and will be addressed to ensure this will not happen again.  [This is a re-cited deficiency and must be corrected within 30 days.]	V 233		
V 235	27G .3603 (A-C) Outpt. Opioid Tx. - Staff  10A NCAC 27G .3603 STAFF (a) A minimum of one certified drug abuse counselor or certified substance abuse counselor to each 50 clients and increment thereof shall be on the staff of the facility. If the facility falls below this prescribed ratio, and is unable to employ an individual who is certified because of the unavailability of certified persons in the facility's hiring area, then it may employ an uncertified person, provided that this employee meets the certification requirements within a maximum of 26 months from the date of employment. (b) Each facility shall have at least one staff member on duty trained in the following areas: (1) drug abuse withdrawal symptoms; and (2) symptoms of secondary complications to drug addiction. (c) Each direct care staff member shall receive continuing education to include understanding of the following: (1) nature of addiction; (2) the withdrawal syndrome; (3) group and family therapy; and (4) infectious diseases including HIV, sexually transmitted diseases and TB.  This Rule is not met as evidenced by:	V 235	Greensboro Metro understands the importance of maintaining a patient to counselor ratio of 50:1 and had two counselor candidates in background at the time of inspection, with hire dates of 6/24/19 and 7/8/19. With the addition of these counselors, the new ratio will be 40:1, well below the regulated ratio. The Program Director will monitor patient to counselor caseloads, working with the Talent Acquisition team to ensure the clinic is appropriately staffed and maintains a maximum ratio of 50:1.	

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V 235	<p>Continued From page 6</p> <p>Based on record reveiw and interviews, the governing body failed to assure 2 of 2 audited substance abuse counselors (#1, #5) were not assigned more than a maximum of 50 clients. The findings are:</p> <p>A. During interview on 6/18/19, counselor #2 reported: -he had worked at the facility for 6 years -he is a certified substance abuse counselor -he had a case load of 58 clients</p> <p>B. During an interview on 6/18/19, counselor #5 reported: - he had worked at the facility for 2.5 years - he used to work as a Mileu Manager - he registered for certification as a substance abuse counselor in February and the Program Director was his immediate supervisor - he had a case load of 56 clients - his case load had been above 50 since he started</p> <p>During an interview on 6/18/19, the Program Director reported the facility had a census of 283 client and had 5 substance abuse counselors. The Program Director reported she did not carry a case load.</p> <p>During interview on 6/18/19 The Regional Director stated: -They are looking to hire a new counselor within the next few weeks to reduce case loads.</p>	V 235		

**TRAINING ATTENDANCE SHEET**

Colonial Management Group, LP

Course Title: Chain of Command / Supporting Constructive Lifestyle Changes with Patients  
 Clinic/Location: Greensboro  
 Presenter: Ebony / Angela  
 Date: 6/19/19 Length of Training: 30 min

Competency was demonstrated through the attached:

- Quiz submitted to all staff or
- Questions asked of staff and staff demonstrated competency through the verbal answers given.

Staff received CEUs:  Yes  No

Employee name (Print)	Employee Signature
Shawntel Allen	Shawntel Allen
LaQuana Brooks	LaQuana Brooks
Latitia Wilson	Latitia Wilson
Evangelin Battle	Evangelin Battle
David Boyles	David Boyles
Carol Moore	Carol Moore
Preston Evans	Preston Evans
Janet Hinnicutt	Janet Hinnicutt
Laurence Wilson	Laurence Wilson
Angela Forrest	Angela Forrest

Make Up Training		
Date	Employee name (Print)	Employee Signature