

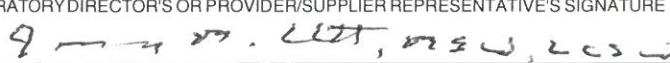
Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL023-171</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/25/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CLEVELAND CRISIS AND RECOVERY CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>609 NORTH WASHINGTON STREET SHELBY, NC 28150</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on June 25, 2019. Deficiencies were cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .3100 Nonhospital Medical Detoxification for Individuals who are Substance Abusers, 10A NCAC 27G .3300 Outpatient Detoxification for Substance Abuse, 10A NCAC 27G .5000 Facility Based Crisis Service for Individuals of all Disability Groups, and 10A NCAC 27G .1100 Partial Hospitalization for Individuals who are Acutely Mentally Ill.</p>	V 000	<p style="text-align: center;">DHSR - Mental Health</p> <p style="text-align: center;">JUL 18 2019</p> <p style="text-align: center;">Lic. &amp; Cert. Section</p>	
V 118	<p><b>27G .0209 (C) Medication Requirements</b></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> <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>	V 118		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Crisis Services Director	(X6) DATE 07/16/19
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V 118	<p>Continued From page 1</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, interview and record review the facility failed to ensure all medications were administered only on the written order of a physician and the Medication Administration Record (MAR) was kept current affecting one of one client (Client #4). The findings are:</p> <p>Review on 6/25/19 of Client #4's record revealed: -admission date of 6/23/19. -diagnoses of Substance Abuse Disorder, Major Depressive Disorder, Severe without Psychotic Features, Anxiety, Mood Disorder, and Post-Traumatic Stress Disorder.</p> <p>Review on 6/25/19 of Client #4's physician standing orders dated 6/22/19 revealed: -Cogentin - 2 mg - one tablet as needed for dystonic reaction.</p> <p>Review on 6/25/19 of Client #4's physician orders revealed: -6/23/19 - "...leave off Haldol/Cogentin." -6/24/19 - Gabapentin - 300 mg - one at 7:00 a.m. and one at 2:00 p.m. and two capsules at bedtime and Oxcarbazepine - 300 mg - 1 and 1/2 tablet two times a day.</p> <p>Observation on 6/25/19 at approximately 11:15</p>	V 118	<p>Orders will be clarified with our Medical Provider by calling order back to the Provider and ensure the medication orders are written clearly Utilize Nurse Staff meetings and emails to nurses on how reviewing samples of way orders can be confusing and instruct on obtaining clarification from Medical Provider.</p> <p>Have developed a new pharmacy order form to make ordering of medications easier. This form is already in use.</p> <p>RN Manager is to monitor medication orders, and the writing of the orders.</p> <p>RN will work with Medical Provider to ensure medication orders are correct.</p> <p>RN Manager will monitor appropriate use of the new pharmacy order form weekly for one month; then bi-weekly for next month; and monthly thereafter.</p>	<p>07/12/2019</p> <p>10/01/19</p>
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V 118	<p>Continued From page 2</p> <p>a.m. of Client #4's medications revealed: -Cogentin - 2 mg - in stock medications for Crisis Unit Clients. -Gabapentin - 300 mg - one at 7:00 a.m. - one at 2:00 p.m. and two at bedtime. -Oxcarbazepine - 300 mg - not observed.</p> <p>Review on 6/25/19 of Client #4's MAR for June 2019 revealed: -Benzotropine Mesylate (Cogentin) - 2 mg - one tablet as needed - 6/25/19 "Administered". -Gabapentin - 300 mg - one at 2:00 p.m. - 6/24/19 blank. -Oxcarbazepine - 300 mg - 1 and 1/2 tablet - two times a day - 6/24/19 - 9:00 p.m. and 6/25/19 - 7:00 a.m. "Not Available."</p> <p>Interview on 6/25/19 with the Crisis Nurse Manager revealed: -Client #4's Cogentin - 2 mg - as needed was ordered again, however the order had not been signed yet. -although Cogentin was a standing order medication, this was confusing since on 6/23/19 the doctor ordered to leave off the Cogentin . -the client was sleeping during the morning dose time for Gabapentin at 7:00 a.m. -she gave the morning dose of Gabapentin at 12:00 p.m. and did not want to give the 2:00 p.m. dose so close together. -the Oxcarbazepine doses were marked "Not Available" since the pharmacy had not delivered the medication yet.</p>	V 118		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be</p>	V 736		

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V 736	<p>Continued From page 3</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 observation and interview, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation on 6/24/19 at approximately 2:15 p.m. revealed: -the bathroom on the intake/assessment side of the facility had an open shower area in the far right corner. -the tile had thick rusty/brown like colored stains along both sides of the wall, on the floor and around the built in soap-dispenser, and the hand rail.</p> <p>Interview on 6/25/19 with the Facility Director revealed: -he was aware of the condition of the intake/assessment bathroom. -the bathroom was cleaned daily with Clorox and bleach, however the stains could not be removed. -the entire area needed to be re-tiled.</p>	V 736	<p>Annual Survey was forwarded to Michael Welch, Director of Maintenance Operations at Partners Behavioral Health Management informing him of the Standard Deficiency in Bathroom 174.</p> <p>Work order placed with PartnersBHM to tile the walls around the shower to prevent ongoing build-up of mold and mildews on the concrete walls.</p> <p>Jerry Utt, MSW, LCSW, the Crisis Services Director, will monitor compliance with PartnersBHM.</p>	<p>07/09/19</p> <p>07/16/19</p>