

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-451	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 08/27/2019
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NAME OF PROVIDER OR SUPPLIER HEALING TRANSITIONS	STREET ADDRESS, CITY, STATE, ZIP CODE 1251 GOODE STREET RALEIGH, NC 27603
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(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	<p>INITIAL COMMENTS</p> <p>An Annual and follow up survey was completed on August 27, 2019. Deficiencies were cited.</p> <p>The facility is licensed for a 10A NCAC 27G 3200 Social Setting Detoxification.</p>	V 000		
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>This Rule is not met as evidenced by: Based on interviews the facility failed to ensure medications for one of four (#1) audited clients were stored in a securely locked cabinet. The findings are:</p> <p>Review on 8/27/19 of client #1's record revealed:</p>	V 120	<p>DHSR - Mental Health</p> <p>SEP 20 2019</p> <p>Lic. & Cert. Section</p>	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 120	Continued From page 1 -Admission date of 8/24/19. -Diagnoses of Cocaine and Alcohol Dependency. During interview on 8/27/19 Client #1 stated: -He had been in the program for a few days. -Had multiple stays in the program within the last year. -He stated he took blood pressure medicine daily. -Currently had his blood pressure medication in his bag. -Had not given the medication to staff to lock up. -Had not told the staff he had his medication with him, "but they should know I take it, I have been here several times before." During interview on 8/27/19 Staff #1 stated: -Clients and their belongings are searched upon admission. -All medications are logged in and locked in the lockers and administered by staff. -Client #1 did not tell them he had his blood pressure medication on him. -Staff that searched him, must not have found them upon admission.	V 120	V120 All staff working in detox are required to attend a training on medication policies and procedures annually. This training will be provided this month and will be updated to include instruction on proper and thorough searching of belongings. The supervisor for detox has been, and will continue working directly with staff across all shifts in order to provide increased observation, feedback and accountability. Our practice has been for a supervisor to conduct a monthly medication audit to ensure compliance with all policies and procedures. For the next 90 days, a supervisor will conduct an audit weekly. Should any further issues be found, these weekly audits will continue until full, consistent compliance.	
V 221	27G .3201 Social Setting Detox - Scope 10A NCAC 27G .3201 SCOPE (a) Social setting detoxification is a 24-hour residential facility which provides social support and other non-medical services to individuals who are experiencing physical withdrawal from alcohol and other drugs. (b) Individuals receiving this service need a structured residential setting but are not in need of immediate medical services; however, back-up	V 221		

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V 221	<p>Continued From page 2</p> <p>physician services shall be available, if indicated. (c) The facility is designed to assist individuals in the withdrawal process and to prepare them to enter a more extensive treatment and rehabilitation program.</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to assure services were provided to persons within its licensed capacity. The findings are:</p> <p>Review on 8/27/19 of current license effective until 12/31/19 revealed a capacity of 22.</p> <p>Observation on 8/27/19 at 9:00 AM of current census was 23. The facility had 22 beds for clients and a cot placed in the middle of the floor for the extra client.</p> <p>During interview on 8/27/19 Staff #1 stated: -They were over capacity due to admitting a client last night. -The client was brought in by Raleigh Police Department and was homeless. -They do not turn away a client who was homeless and de-toxing from heroin due to safety concerns. -This does not happen a lot, and it is usually over capacity for a few hours. -There will be several discharges today and they will be back within their capacity.</p> <p>[This is a recited deficiency and must be corrected within 30 days.]</p>	V 221	<p>V221</p> <p>The cot has been removed from the detox unit permanently.</p> <p>Prior deficiency from 2018 was a result of using detox beds for overflow of men in need of emergency shelter. We immediately created a procedure for handling this overflow that was submitted as a corrective action plan and we have been utilizing that protocol since that time.</p> <p>We are now requiring staff to consult directly with a supervisor any time we have 18 or more clients. This provides an opportunity to discuss any potential discharge options to prevent over capacity situations in the future. Additionally, should we reach full capacity in the future, prior to any further admissions, staff will consult with supervisor to ensure we do not exceed designed capacity.</p>	