

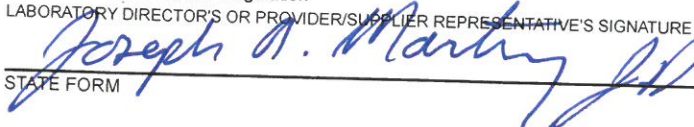
Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-339	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/06/2019
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NAME OF PROVIDER OR SUPPLIER WOMEN AND CHILDREN FIRST	STREET ADDRESS, CITY, STATE, ZIP CODE 12 TUPPER ROAD RIDGECREST, NC 28770
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow-up survey was completed on 9/6/19. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .4300 Therapeutic Community.</p>	V 000	<p>Corrective Action Response for Tag V118.</p> <p>The Director of Admissions will ensure clients have the appropriate self-administration order, standing order for over the counter medication, and physician's orders for clients applying to and entering the facility. These orders will be signed by a physician or qualified medical professional.</p>	
V 118	<p>27G .0209 (C) Medication Requirements</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> <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>	V 118	<p>The Medical Case Manager will work in conjunction with the Director of Admissions to ensure the self-administration orders, standing orders, and physician's orders are updated and maintained as necessary for clients progressing through the program. This will be accomplished by referrals to community medical agencies as needed.</p> <p>DHSR - Mental Health</p> <p>SEP 24 2019</p> <p>Lic. & Cert. Section</p>	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Executive Director	(X6) DATE 9/17/19
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V 118	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observation, interview, and record review the facility failed to ensure prescription drugs were administered on the written order of a person authorized by law and self-administered only when authorized in writing by the physician for 1 of 3 sampled clients (Client #1). The findings are:</p> <p>Review on 9/4/19 of Client #1's record revealed: -an admission date of 6/28/19. -diagnoses of Major Depression Disorder, Borderline Personality Disorder, Anxiety Disorder, Cannabis Use-severe, Methamphetamine Use-severe, Cocaine Use-moderate, and Migraines.</p> <p>Observation on 9/4/19 at approximately 10:30 a.m. of Client #1's medications included: -Topamax - 50 milligrams (mg) - two tablets, 2 times a day. -Cymbalta - 30 mg - three tablets daily. -Strattera - 80 mg - one a day. -Sumatriptan - 50 mg - 2 a day at start of headache, repeat in one hour if needed. -Propranolol - 20 mg - 1 daily as needed; 1 at bedtime. -Zofran - 4 mg - 1 every 6 hours as needed for nausea. -Ibuprofen - 400 mg - 2 daily as needed for pain. -Essential Multi-Vitamin - 1 daily -Docusate Sodium - 100 mg - as needed.</p> <p>Review on 9/4/19 of Client #1's Medication Administration Record (MAR) from 6/28/19 to</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>9/4/19 revealed:</p> <ul style="list-style-type: none"> -the client initialed for the two medications she was prescribed at the time as taken on 6/29/19 and 6/30/19. -Topamax - 50 mg - two tablets, 2 times a day. -Amitriptyline - 100 mg - 1/2 tablet at bedtime. <p>Review on 9/4/19 of Client #1's physician orders for 7/1/19 through 9/4/19 revealed:</p> <ul style="list-style-type: none"> -Topamax - 50 mg - two tablets, 2 times a day was ordered 7/1/19. -Amitriptyline - 100 mg - 1/2 tablet at bedtime was ordered 7/1/19 and discontinued 7/16/19. -there were no physician orders for June 2019 when the client was admitted. -there were no physician orders for the client to self-administer until 8/20/19. <p>Interview on 9/4/19 with Client #1 revealed:</p> <ul style="list-style-type: none"> -the facility kept her medications locked in the medication room, however she self-administered them. -they handed her the basket with her medications and she dispensed what she needed to take and signed her MAR. -the staff observed her while she took her medications. -she had been doing this process since the day of admission. <p>Interview on 9/4/19 with the Medication Case Manager revealed:</p> <ul style="list-style-type: none"> -she kept the clients medications locked in the medication room. -when it was time for "Medication Calls" the clients came to the medication room and she provided them their basket of medications. -all the clients self-administered their medications and signed their own MAR while the staff observed them. 	V 118		

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V 118	<p>Continued From page 3</p> <ul style="list-style-type: none"> -Client #1 was admitted from the Department of Public Safety (DPS). -she had her medications, but DPS did not send her physician orders with them. -they always attempted to obtain the orders from DPS on admission, however this was an on-going problem. -the earliest they could get the client to a clinic was 7/1/19. -the first signed self-administration order for Client #1 was 8/20/19. <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118	<p>Corrective Action Response for Tag V119.</p> <p>The Medical Case Manager will work in conjunction with the House Managers to ensure all OTC medications are stored in the medication room, or behind two locking mechanisms. The Medical Case Manager will review these medications monthly to ensure they are not expired and in current date. All out-of-date medications will be disposed of in accordance to medication disposal policies.</p>	
V 119	<p>27G .0209 (D) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(d) Medication disposal:</p> <p>(1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion.</p> <p>(2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction.</p> <p>(3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments.</p> <p>(4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be</p>	V 119		

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V 119	<p>Continued From page 4</p> <p>disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility staff failed to dispose of non-prescription medications in a manner that guards against diversion or accidental ingestion. The findings are:</p> <p>Observation on 9/4/19 at approximately 11:00 a.m. and 12:00 p.m. revealed: -the door to the staff office was closed. -as knocked, staff came from behind and walked into the office that was unlocked. -an intern came into the office and asked staff if she had any Tums. -staff opened the unlocked left hand side of her desk drawer that contained numerous over-the-counter (OTC) medications.</p> <p>Observation on 9/4/19 at approximately 3:50 p.m. of the staff desk drawer revealed: -expired OTC medications: -Diabetic Tussin - 1/2018 -Mylanta Gas - chewable - 1/2018 -Adult gummies - Fiber - 4/2019 -Centrum Daily Vitamin - 6/2019 -Narcan - nasal spray - 4 mg - 11/2018, 2/2019, and three boxes 8/2019. -Vitamin B12 - 7/2019 -CoQ10 - gummies - 4/2018.</p>	V 119		

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V 119	Continued From page 5 Interviews on 9/4/19 and 9/5/19 with Staff #1 and Staff #2 revealed: -they were unaware of the OTC medications being expired. -they would go through all of them and ensure they were disposed of properly.	V 119	<p>Corrective Action Response for Tag V120.</p> <p>The Medical Case Manager will work in conjunction with the House Managers to ensure all OTC medications are stored in the medication room, or behind two locking mechanisms. The Medical Case Manager will ensure OTC medications in the house manager office are stored in a locked cabinet.</p>	
V 120	<p>27G .0209 (E) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(e) Medication Storage:</p> <p>(1) All medication shall be stored:</p> <p>(A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit;</p> <p>(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;</p> <p>(C) separately for each client;</p> <p>(D) separately for external and internal use;</p> <p>(E) in a secure manner if approved by a physician for a client to self-medicate.</p> <p>(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 observation and interview the facility failed to ensure non-prescription medications were stored in a securely locked cabinet. The findings are:</p>	V 120		

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V 120	<p>Continued From page 6</p> <p>Observation on 9/4/19 at approximately 11:00 a.m. and 12:00 p.m. revealed:</p> <ul style="list-style-type: none"> -the door to the staff office was closed. -as knocked, staff came from behind and walked into the office that was unlocked. -an intern came into the office and asked staff if she had any Tums. -staff opened the unlocked left hand side of her desk drawer that contained numerous over-the-counter (OTC) medications. <p>Observation on 9/4/19 at approximately 3:50 p.m. of the staff desk drawer revealed:</p> <ul style="list-style-type: none"> -approximately 33 OTC medications in the top drawer. -approximately 42 OTC medications in the bottom drawer. -OTCs included: -Diabetic Tussin -Mylanta Gas -Adult gummies - Fiber -Centrum Daily Vitamin -Narcan - nasal spray - 4 mg x 5 boxes -Vitamin B12 -CoQ10 - gummies -Tums -Cold and Flu Relief -Dramamine -Dulcolax -Mucinex DM -Tylenol -Aspirin -Alkaseltzer Heartburn -Airborne -Hemorrhoidal Suppositories -Hydrogen Peroxide. <p>Interviews on 9/4/19 and 9/5/19 with Staff #1 and Staff #2 revealed:</p> <ul style="list-style-type: none"> -they were unaware OTC medications needed to 	V 120		

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V 120	Continued From page 7 be in a locked cabinet. -they were going to go through all of the medications and dispose of the expired ones. -they had a top cabinet to the hutch of the desk that had the capability to be locked where they would secure the OTCs.	V 120	<p>Corrective Action Response for Tag V364.</p> <p>FIRST's Phone Call policy for participants in the long term program component specifies that clients receive one brief phone call upon arrival to inform family and loved ones of successful admission to the program. No other personal calls are permitted on Phase One. Calls are made through the House Manager and take place on the community phone in the lobby area. Other facility phones may be made available by staff when necessary.</p> <p>After Phase One clients are eligible for three fifteen minute personal phone calls per week, made through the House Manager taking place on the community phone in the lobby area. Attempts to make a call when no one is home do not count as one of the three calls.</p>	
V 364	<p>G.S. 122C- 62 Additional Rights in 24 Hour Facilities</p> <p>§ 122C-62. Additional Rights in 24-Hour Facilities.</p> <p>(a) In addition to the rights enumerated in G.S. 122C-51 through G.S. 122C-61, each adult client who is receiving treatment or habilitatioq in a 24-hour facility keeps the right to:</p> <p>(1) Send and receive sealed mail and have access to writing material, postage, and staff assistance when necessary;</p> <p>(2) Contact and consult with, at his own expense and at no cost to the facility, legal counsel, private physicians, and private mental health, developmental disabilities, or substance abuse professionals of his choice; and</p> <p>(3) Contact and consult with a client advocate if there is a client advocate.</p> <p>The rights specified in this subsection may not be restricted by the facility and each adult client may exercise these rights at all reasonable times.</p> <p>(b) Except as provided in subsections (e) and (h) of this section, each adult client who is receiving treatment or habilitation in a 24-hour facility at all times keeps the right to:</p> <p>(1) Make and receive confidential telephone calls. All long distance calls shall be paid for by the client at the time of making the call or made collect to the receiving party;</p> <p>(2) Receive visitors between the hours of 8:00 a.m. and 9:00 p.m. for a period of at least six</p>	V 364		

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V 364	<p>Continued From page 8</p> <p>hours daily, two hours of which shall be after 6:00 p.m.; however visiting shall not take precedence over therapies;</p> <p>(3) Communicate and meet under appropriate supervision with individuals of his own choice upon the consent of the individuals;</p> <p>(4) Make visits outside the custody of the facility unless:</p> <p>a. Commitment proceedings were initiated as the result of the client's being charged with a violent crime, including a crime involving an assault with a deadly weapon, and the respondent was found not guilty by reason of insanity or incapable of proceeding;</p> <p>b. The client was voluntarily admitted or committed to the facility while under order of commitment to a correctional facility of the Division of Adult Correction of the Department of Public Safety; or</p> <p>c. The client is being held to determine capacity to proceed pursuant to G.S. 15A-1002; A court order may expressly authorize visits otherwise prohibited by the existence of the conditions prescribed by this subdivision;</p> <p>(5) Be out of doors daily and have access to facilities and equipment for physical exercise several times a week;</p> <p>(6) Except as prohibited by law, keep and use personal clothing and possessions, unless the client is being held to determine capacity to proceed pursuant to G.S. 15A-1002;</p> <p>(7) Participate in religious worship;</p> <p>(8) Keep and spend a reasonable sum of his own money;</p> <p>(9) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes; and</p> <p>(10) Have access to individual storage space for his private use.</p>	V 364	<p>The policy for clients to make phone calls through the House Manager is in place to ensure clients are contacting safe individuals for their recovery. The House Manager may ask to verify the relationship of who the client is requesting to call prior to facilitating the phone.</p> <p>Exceptions to this policy include sponsor calls and all non-personal phone calls, such as calls to probation or legal appointments, medical appointments, case management, work, and clinical related calls, emergency calls, etc. Access to the telephone is unlimited in these situations and additional phones will be made available if the community phone is in use.</p>	
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V 364	<p>Continued From page 9</p> <p>(c) In addition to the rights enumerated in G.S. 122C-51 through G.S. 122C-57 and G.S. 122C-59 through G.S. 122C-61, each minor client who is receiving treatment or habilitation in a 24-hour facility has the right to have access to proper adult supervision and guidance. In recognition of the minor's status as a developing individual, the minor shall be provided opportunities to enable him to mature physically, emotionally, intellectually, socially, and vocationally. In view of the physical, emotional, and intellectual immaturity of the minor, the 24-hour facility shall provide appropriate structure, supervision and control consistent with the rights given to the minor pursuant to this Part. The facility shall also, where practical, make reasonable efforts to ensure that each minor client receives treatment apart and separate from adult clients unless the treatment needs of the minor client dictate otherwise.</p> <p>Each minor client who is receiving treatment or habilitation from a 24-hour facility has the right to:</p> <ol style="list-style-type: none"> (1) Communicate and consult with his parents or guardian or the agency or individual having legal custody of him; (2) Contact and consult with, at his own expense or that of his legally responsible person and at no cost to the facility, legal counsel, private physicians, private mental health, developmental disabilities, or substance abuse professionals, of his or his legally responsible person's choice; and (3) Contact and consult with a client advocate, if there is a client advocate. <p>The rights specified in this subsection may not be restricted by the facility and each minor client may exercise these rights at all reasonable times.</p> <p>(d) Except as provided in subsections (e) and (h) of this section, each minor client who is receiving treatment or habilitation in a 24-hour facility has</p>	V 364	<p>The Director of Admissions will review the Phone Call Policy with applicants and new admissions to the facility. Documentation of the client's acknowledgement of this policy will be kept in the chart for records. Documentation of the client's acknowledgement of unlimited phone use for sponsor calls, legal appointments, medical appointments, case management, work, and clinical related calls, emergency calls, etc., will also be recorded in the chart.</p> <p>Clients in the short term and transitional housing program component are permitted daily use of the phone for personal calls due to their shorter length of stay at the facility. The Director of Admissions will review the Phone Policy for short term and transitional housing clients with the client at admission, and document their acknowledgement in the chart.</p>	
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V 364	Continued From page 10 the right to: (1) Make and receive telephone calls. All long distance calls shall be paid for by the client at the time of making the call or made collect to the receiving party; (2) Send and receive mail and have access to writing materials, postage, and staff assistance when necessary; (3) Under appropriate supervision, receive visitors between the hours of 8:00 a.m. and 9:00 p.m. for a period of at least six hours daily, two hours of which shall be after 6:00 p.m.; however visiting shall not take precedence over school or therapies; (4) Receive special education and vocational training in accordance with federal and State law; (5) Be out of doors daily and participate in play, recreation, and physical exercise on a regular basis in accordance with his needs; (6) Except as prohibited by law, keep and use personal clothing and possessions under appropriate supervision, unless the client is being held to determine capacity to proceed pursuant to G.S. 15A-1002; (7) Participate in religious worship; (8) Have access to individual storage space for the safekeeping of personal belongings; (9) Have access to and spend a reasonable sum of his own money; and (10) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes. (e) No right enumerated in subsections (b) or (d) of this section may be limited or restricted except by the qualified professional responsible for the formulation of the client's treatment or habilitation plan. A written statement shall be placed in the client's record that indicates the detailed reason for the restriction. The restriction shall be reasonable and related to the client's treatment or	V 364	The Director of Admissions and/or other Qualified Professional will review the Phone Policy every 7 days and document that it continues to be appropriate per client.	
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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-339	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/06/2019
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NAME OF PROVIDER OR SUPPLIER WOMEN AND CHILDREN FIRST	STREET ADDRESS, CITY, STATE, ZIP CODE 12 TUPPER ROAD RIDGECREST, NC 28770
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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
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V 364	<p>Continued From page 11</p> <p>habilitation needs. A restriction is effective for a period not to exceed 30 days. An evaluation of each restriction shall be conducted by the qualified professional at least every seven days, at which time the restriction may be removed. Each evaluation of a restriction shall be documented in the client's record. Restrictions on rights may be renewed only by a written statement entered by the qualified professional in the client's record that states the reason for the renewal of the restriction. In the case of an adult client who has not been adjudicated incompetent, in each instance of an initial restriction or renewal of a restriction of rights, an individual designated by the client shall, upon the consent of the client, be notified of the restriction and of the reason for it. In the case of a minor client or an incompetent adult client, the legally responsible person shall be notified of each instance of an initial restriction or renewal of a restriction of rights and of the reason for it. Notification of the designated individual or legally responsible person shall be documented in writing in the client's record.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to ensure clients were able to exercise the right to make and receive telephone calls affecting 2 of 3 sampled clients (Clients #1 and #3). The findings are:</p> <p>Review on 9/4/19 of the undated "Preppie Handbook" revealed: -"Preppie Phase...Residents will receive one 5 minute phone call upon arrival to inform family you are here and safe..."</p>	V 364		
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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-339	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/06/2019
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V 364	<p>Continued From page 12</p> <p>"...There will be no additional phone calls for 30 days, After 30 days, residents may have three incoming or outgoing 15 minute phone calls per week."</p> <p>Review on 9/4/19 of Client #1's record revealed: -admission date 6/28/19. -diagnoses of Major Depressive Disorder, Borderline Personality Disorder, Anxiety Disorder, Cannabis Use - severe, Methamphetamine Use - severe, Cocaine Use - moderate and Migraines.</p> <p>Review on 9/4/19 of Client #3's record revealed: -admission date 8/12/19. -diagnoses of Opioid Use - severe, Sedative Use - severe, Cannabis Use - severe, Hallucinogen Use - moderate, Major Depressive Disorder - severe, Anxiety Disorder, and Post-Traumatic Stress Disorder.</p> <p>Interview on 9/4/19 with the Administrative Director revealed: -it was their policy to have the phone restrictions upon admission for everyone. -they have had this policy in place for more than 13 years and most likely there would not be a lot of change to this.</p>	V 364		