

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL081-127	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/29/2020
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NAME OF PROVIDER OR SUPPLIER FOOTHILLS AT RED OAK RECOVERY	STREET ADDRESS, CITY, STATE, ZIP CODE 517 CUB CREEK ROAD ELLENBORO, NC 28040
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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 January 29, 2020. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600D Supervised Living for Minors with Substance Abuse Disorders.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure fire and disaster drills were held at least quarterly on each shift. The findings are:</p> <p>Review on 1/29/20 of fire and disaster drills from July 2019 through December 2019 revealed: -no documentation of second shift fire and disaster drills conducted during any quarters.</p>	V 114		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 114	Continued From page 1 Interview on 1/29/20 with the Operations Manager and Executive Director revealed: -there were 2 shifts - 7:00 a.m. to 11:00 p.m. and 11:00 p.m. to 7:00 a.m. -there were no drills conducted during the time of 11:00 p.m. and 7:00 a.m.	V 114		
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 2</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure prescription and non-prescription drugs were administered on the written order of a person authorized by law to prescribe drugs for 2 of 3 audited clients (Clients #2 and #3). The findings are:</p> <p>Review on 1/29/20 of Client #2's record revealed: -an admission date of 1/8/20. -diagnoses of Severe Cannabis Use Disorder, Unspecified Attention-Deficit Hyperactivity Disorder, and Unspecified Depressive Disorder.</p> <p>Observation on 1/29/20 at approximately 1:15 p.m. of Client #2's medications revealed: -an over-the-counter (OTC) bottle of Melatonin 3 mg.</p> <p>Review on 1/29/20 of Client #2's medical record revealed: -no physician's orders or standing orders for Melatonin.</p> <p>Review on 1/29/20 of Client #2's Medication Administration Records (MARs) for January 2020 revealed: -he received Melatonin 3 mg - one at bedtime.</p> <p>Interview on 1/29/20 with the Nurse Interim revealed: -there were consent forms in the admissions packet for OTCs. -these forms were signed by the legally responsible person.</p>	V 118		

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V 118	<p>Continued From page 3</p> <p>-there were no orders signed for OTC medications and/or specifically Melatonin for Client #2.</p> <p>Review on 1/29/20 of Client #3's record revealed: -an admission date of 11/15/19. -diagnoses of Severe Cannabis Use Disorder, Obsessive Compulsive Disorder, Unspecified Anxiety Disorder, and Unspecified Depressive Disorder.</p> <p>Observation on 1/29/20 at approximately 1:30 p.m. of Client #3's medications revealed: -Fish Oil - 1200 mg - one daily - dispensed 1/3/20.</p> <p>Review on 1/29/20 of Client #3's medical record revealed: -physician's orders for Fish Oil 1200 mg - one daily - dated 12/7/19.</p> <p>Review on 1/29/20 of Client #3's MARs for December 2019 and January 2020 revealed: -Fish Oil - 1200 mg - one daily was not listed as starting 12/7/19 or 12/8/19. -Fish Oil was first initialed as being administered on 1/9/20.</p> <p>Interview on 1/29/20 with the Nurse Interim revealed: -the legally responsible person had to give consent for medications. -this had gone back and forth with Client #3's physician several times before consent was given.</p>	V 118		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification	V 131		

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V 131	<p>Continued From page 4</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY</p> <p>(d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure prior to hire each staff member had no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry (HCPR) for 3 of 3 sampled staff. The findings are:</p> <p>Record review on 1/28/20 for the Shift Supervisor revealed: -Hire Date: 5/13/19. -HCPR check dated 5/20/19.</p> <p>Record review on 1/28/20 for the Primary Therapist revealed: -Hire Date: 12/26/18. -HCPR check dated 12/27/18.</p> <p>Record review on 1/28/20 for the Recovery Guide revealed: -Hire Date: 2/11/19. -HCPR check dated 2/14/19.</p> <p>Interview on 1/28/20 with Human Resources revealed: -she was not aware the HCPR checks needed to</p>	V 131		

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V 131	Continued From page 5 be done prior to hire. -she would ensure going forward they were completed as required.	V 131		