

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-101</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/18/2020</b>
--	---	---	---

NAME OF PROVIDER OR SUPPLIER  <b>MCLEOD ADDICTIVE DISEASE CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>636 SIGNAL HILL DRIVE. EXT. STATESVILLE, NC 28625</b>
--	---

(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><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on 2/18/20. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .3600 Outpatient Opioid Treatment 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program</p> <p>As of February 17, 2020 the number of clients served at this facility was 232.</p>	V 000		
V 235	<p>27G .3603 (A-C) Outpt. Opiod Tx. - Staff</p> <p>10A NCAC 27G .3603 STAFF</p> <p>(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.</p> <p>(b) Each facility shall have at least one staff member on duty trained in the following areas:</p> <p>(1) drug abuse withdrawal symptoms; and</p> <p>(2) symptoms of secondary complications to drug addiction.</p> <p>(c) Each direct care staff member shall receive continuing education to include understanding of the following:</p> <p>(1) nature of addiction;</p> <p>(2) the withdrawal syndrome;</p> <p>(3) group and family therapy; and</p> <p>(4) infectious diseases including HIV,</p>	V 235		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-101</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/18/2020</b>
--	---	---	---

NAME OF PROVIDER OR SUPPLIER  <b>MCLEOD ADDICTIVE DISEASE CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>636 SIGNAL HILL DRIVE. EXT. STATESVILLE, NC 28625</b>
--	---

(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 235	<p>Continued From page 1</p> <p>sexually transmitted diseases and TB.</p> <p>This Rule is not met as evidenced by: Based on records review and interviews the facility failed to maintain a ratio of one certified substance abuse counselor to every 50 clients.</p> <p>Review on 2/17/20 of the facility's census sheet dated 2/17/20 revealed: - Licensed Clinical Addiction Specialists #1 (LCAS) - 54 clients - LCAS #2 - 54 clients - Certified Substance Abuse Counselor #3 - 53 clients</p> <p>Interview on 2/17/20 with Clients # 2, #4, #6, #8 revealed: - Counselors are able to meet and talk with the clients twice monthly and more if treatment needs require - Clients report meeting times are between 15 minutes to 45 minutes on the average - Clients report they feel they can stop in their counselors office anytime - Counselors are available in the event of personal emergencies with the client - Clients report that Counselors meet and discuss any positive urine screens</p> <p>Interview on 2/18/20 with LCAS #1 revealed: - "I have a caseload of fifty four (54). I make sure to see my clients twice a month and when treatment issues arise such as positive urine's, medical issues, or they (the client) needs to just talk. I have a open door policy and I 'm glad to be her for them.</p>	V 235		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL049-101</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/18/2020</b>
--	---	---	---

NAME OF PROVIDER OR SUPPLIER  <b>MCLEOD ADDICTIVE DISEASE CENTER</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>636 SIGNAL HILL DRIVE. EXT. STATESVILLE, NC 28625</b>
--	---

(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 235	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>- We have had a couple people leave and the caseloads have to be picked up.</li> <li>- We just get it done I guess.</li> <li>- They ( the Administration) are hiring two more counselors, so it will help."</li> </ul> <p>Interview on 2/18/20 with LCAS #2 revealed:</p> <ul style="list-style-type: none"> <li>- "My caseload is fifty four (54).</li> <li>- I see my clients at least two times monthly and more often than that for some of them.</li> <li>- I'm available to them throughout the morning.</li> <li>- I usually spend 15 minutes to 45 minutes with clients. More or less if needed.</li> <li>- I believe we have staff that are being hired."</li> </ul> <p>Interview on 2/17/20 with the Director of Quality Improvement revealed:</p> <ul style="list-style-type: none"> <li>- Administration is aware of higher caseloads</li> <li>- Substance abuse counselors have been hired</li> <li>- Retaining substance abuse counselors is being reviewed</li> </ul>	V 235		