

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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V 000	INITIAL COMMENTS An annual and follow-up survey was completed on January 29, 2020. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600D Supervised Living for Minors with Substance Abuse Disorders.	V 000	DHSR - Mental Health FEB 27 2020 Lic. & Cert. Section	
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use. 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: 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.	V 114	<ul style="list-style-type: none"> - Operations Manager has been instructed to ensure 1st and 2nd shift completes disaster drills on regular basis. 3/4/2020 - Compliance Officer will audit progress of the safety drills on monthly basis. Results will be captured in the Compliance Report which is provided and reviewed by the executive team on a monthly basis. 3/4/2020 - Compliance officer will monitor the Operations Manager to ensure compliance of all safety drills by first and second shift. 3/4/2020 - Monitoring will be completed monthly when Compliance Department checks in with Operations Manager to discuss progress and completion of safety drills to be included in the report. 3/4/2020 	

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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	<ul style="list-style-type: none"> - A list of standing orders for each individual client will be created upon admissions and signed and reviewed by the client's legal guardians and the medical doctor. 3/5/2020 - Medical Doctor will review and sign standing orders for each individual client and their over the counter medications with approval from parents. 3/5/2020 - Compliance will audit for presence of written orders in the client's chart. 3/5/2020 - Audits will be completed on a weekly basis by the compliance department. RN will review written orders weekly. 3/5/2020 	
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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	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p>	V 131		

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V 131	<p>Continued From page 4</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (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	<ul style="list-style-type: none"> - The HR Departments HR Generalist will complete North Carolina Health Care Personnel Registry checks prior to hire. February 3rd 2020 - HCPR check requirements have been added to the pre-hire checklist form that gets completed before hiring decisions are made. The HR generalist will complete the pre-hire checklist. February 3rd 2020 - HR Manager will complete pre-hire file audits for every potential employee before on-boarding invitations are send out. Ensuring HCPR, background etc. checks are done. February 3rd 2020 - Pre-Hire file audits will be completed by the HR manager at least twice monthly for on-boarding and as needed when new potential employees are screened. The HR manager will complete quarterly file audits. February 3rd 2020 	
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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		
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Julia Hughes

*Compliance
Officer*

2-26-2020

Julia Hughes