Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED. A. BUILDING: R MHL013-101 B. WING 06/24/2021 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 300 COPPERFIELD BLVD. SUITES 105&106 MCLEOD ADDICTIVE DISEASE CENTER-CONC CONCORD, NC 28025 SUMMARY STATEMENT OF DEFICIENCIES ID PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual and follow up survey was completed on June 24, 2021. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .3600 Outpatient Opioid Treatment. The client census was 533 at the time of the survey. V 112 27G .0205 (C-D) V 112 DHSR - Mental Health Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND JUL 2 3 2021 TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the Lic. & Cert. Section assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement: (2) strategies: (3) staff responsible: (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained. Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

MLPZ11

MEDITION OF COMPLIANCE

TO STATE FORM

TO STATE FORM

TO STATE FORM

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Citation	Client	Correction due date				
Assessment/Treatment/Habilitation Plan	Client	que date		Owner	Follow up	Frequency
(10A NCAC 27G.0205)		9/22/2021	Documents with missing signatures for identified clients were	1		
(8/23/2021		MAT	QI	Quarterly
No written consent or agreement by 3 of 21			completed on 07212021. The			
clients: Admission date, Diagnosis of Opioid			Patient Centered Plan (PCP) is in			
Dependence, PCP, Consent for treatment	Client 3		the process of changing. It will be			
Admission date 9/13/17, Diagnosis of	Client 3		automated which will allows us to			
Opioid use, PCP dated 7/15/20, no written			do an electronic monitoring. That			
constent for treatment	Client 5		signature page (their consent to		BUCD	- Mental I
constent for treatment	Client 5		the treatment plan) will be		DHSK	- Weillain
			addressed. The MAT Management		n n	JL 2 3 202
			staff will ensure all actions are		J	DE 20 200
			completed. To better ensure		1.0	& Cert. Se
Admission date 4/17/12, Diagnosis of			compliance, we've added an		LIC.	k Cell. Se
Opioid Dependence, PCP, written consent			operations Compliance department			
for treatment	Client 6		to review records. Additionally,			
Counselors limit of 50 clients (10 NCAC 27G					CHANGE A ALTONOMY	SAIC NAS
Counselors limit of 50 clients (10 Nr Ar 276						
• • • • • • • • • • • • • • • • • • •		1	4 new Clinicians have been hired			
3603)		7/24/2021	for this location. Three will have	MAT	PM	Monthly
3603)	Counselor	7/24/2021	for this location. Three will have started week of July 12, 2021. The	MAT	PM	Monthly
,	1	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in	MAT	PM	Monthly
3603) 54 clients	Counselor 1 Counselor	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they	MAT	PM	Monthly
3603) 54 clients	1 Counselor 3	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in	MAT	PM	Monthly
3603) 54 clients 55 clients	1	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they	MAT	PM	Monthly
3603) 54 clients 55 clients	1 Counselor 3 Counselor 4	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage	MAT	PM	Monthly
3603) 54 clients 55 clients 52 clients	1 Counselor 3	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage of the current staff. To prevent	MAT	PM	Monthly
3603) 54 clients 55 clients	1 Counselor 3 Counselor 4	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage of the current staff. To prevent future occurrence, we have	MAT	PM	Monthly
3603) 54 clients 55 clients 52 clients	1 Counselor 3 Counselor 4	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage of the current staff. To prevent future occurrence, we have created a "Resource Team of 10	MAT	PM	Monthly
3603) 54 clients 55 clients 52 clients	1 Counselor 3 Counselor 4 Counselor 5	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage of the current staff. To prevent future occurrence, we have created a "Resource Team of 10 Clinicians" to fill in where we have	MAT	PM	Monthly
3603) 54 clients 55 clients 52 clients 51 clients	Counselor Counselor Counselor Counselor Counselor	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage of the current staff. To prevent future occurrence, we have created a "Resource Team of 10 Clinicians" to fill in where we have needs across locations. Program	MAT	PM	Monthly
3603) 54 clients 55 clients 52 clients 51 clients	1 Counselor 3 Counselor 4 Counselor 5	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage of the current staff. To prevent future occurrence, we have created a "Resource Team of 10 Clinicians" to fill in where we have needs across locations. Program Managers will monitor staff	MAT	PM	Monthly
3603) 54 clients 55 clients 52 clients 51 clients	Counselor Counselor Counselor Counselor Counselor	7/24/2021	for this location. Three will have started week of July 12, 2021. The fourth Clinician will be starting in August 2021. Once trained they will be able to absorb the overage of the current staff. To prevent future occurrence, we have created a "Resource Team of 10 Clinicians" to fill in where we have needs across locations. Program Managers will monitor staff caseloads to ensure they don't	MAT	PM	Monthly

Missed annual physicals 4 of 21 (10A NCAC			The 4 clients identified in the audit			
27G 3604)		7/24/2021	have had their physicals	MAT	PAS	Monthly
Admission 9/13/21? Most recent physical			completed/ or scheduled as of		1	IVIOITINY
was 6/25/19	Client 1		07222021. We will identify any			
Admission 7/8/08; most recent physical was			other overdue physicals, map them			
3/3/20	Client 2		to a schedule with a physician for			
Admission 6/29/12; most recent physical			completion. To prevent future			
2/28/20	Client 3		occurrence, we will regularly		1	
			schedule a set number of physicals		1	
			each week. We have also hired a		1	
			Patient Access Specialist in order to			
			keep track of these as well. We will			
Admission 8/16/11; most recent physical			monitor monthly.			
1/31/20	Client 4					
		(A) 100 (A) 100 (A)			E TOTAL PROPERTY.	
Training incomplete (10A NCAC 27E 0107)			We have completed the			1
		0/22/2024				1
3 (2011 HONG 272 0107)		8/23/2021	training/certifications for all 4 staff	HR	HR	Quarterly
		8/23/2021	identified as of 07202021. Our NCI	HR	HR	Quarterly
Hire date 2/21/21; no training on use of	Nurso 2	8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of	HR	HR	Quarterly
Hire date 2/21/21; no training on use of	Nurse 2	8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions	Nurse 2	8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for	Nurse 2	8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for nonviolent crisis intervention training	Nurse 2	8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department will schedule all applicable staff by	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for nonviolent crisis intervention training 12/4/20); no training on alternatives to		8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department will schedule all applicable staff by September 2021. We will use this	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for nonviolent crisis intervention training 12/4/20); no training on alternatives to	Nurse 2	8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department will schedule all applicable staff by September 2021. We will use this date for annual	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for nonviolent crisis intervention training (12/4/20); no training on alternatives to retstrictive interventions		8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department will schedule all applicable staff by September 2021. We will use this date for annual certification/training. HR	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for nonviolent crisis intervention training (12/4/20); no training on alternatives to retstrictive interventions Hire date 2/3/20 expired certificate for		8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department will schedule all applicable staff by September 2021. We will use this date for annual certification/training. HR department tracks this information	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for nonviolent crisis intervention training (12/4/20); no training on alternatives to retstrictive interventions Hire date 2/3/20 expired certificate for nonviolent crisis intervention training	Nurse 1	8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department will schedule all applicable staff by September 2021. We will use this date for annual certification/training. HR	HR	HR	Quarterly
Hire date 2/21/21; no training on use of alternatives to restrictive interventions Hire date 8/13/18: expired certificate for nonviolent crisis intervention training (12/4/20); no training on alternatives to retstrictive interventions Hire date 2/3/20 expired certificate for nonviolent crisis intervention training (2/5/21); no training for alternatives to restrictive interventions		8/23/2021	identified as of 07202021. Our NCI training is designed to cover use of alternatives to restrictive interventions and nonviolent crisis intervention. Our HR department will schedule all applicable staff by September 2021. We will use this date for annual certification/training. HR department tracks this information	HR	HR	Quarterly

			_			
Hire date 7/8/19; expired certificate for nonviolent crisis intervention 7/31/20. no training for alternatives to restrictive interventions	PM					
Facility and Grounds (10A NCAC 27G 0303)		7/24/2024	We scheduled a handyman to		PM/Compliance/Q	
Tacinty and Grounds (10A NCAC 27G 0303)	Patient	7/24/2021	come and do an assessment on	Facilities	I	Quarterly
	E 100 000 000 000 000 000 000 000 000 00		07152021. The handyman was a no			
Stained carpet	waiting		call/no show. We have scheduled a			
Stanled Carpet	area		painter to do an estimate. Their			
	Drug		earliest availability was 07212021.			
and the state of the transfer	screening		The request is to complete the			
wall with reddish markings	area		repairs/citations in the Concord			
tape residue on floors: black markings on	Dosing		facility ASAP. We have agreed to			
walls	area		the proposal for the painting at the			
			facility (see "Contract" as proof of			
wall with black markings and peeling paint;			correction to be performed). The			
tape residue on floor; counter tops had			painters said the earliest they			
peeling paint and dirt like stains	front lobby		could schedule is would be			
	Bathroom		weekend of August 7-8). As this			
walls had yellowish and grease stains: soap	in dosing	*	was the earliest they could			
dispenser and camera were dusty	area		perform the work we agreed to			
			that date. Additionally, we have			
	Hallway		hired and scheduled an additional			
	leading to		contractor to clean all the facilities			
tape residue on floor	dosing area		carpet with their first availability			
	whole		on 07212021. The Director of			
walls need painting and carpet cleaned	2000000-200000					
walls need painting and carpet cleaned	facility		Facilities will ensure the contracted			

Key: MAT - Methadone Assisted Treatment Management, HR - Human Resources, QI -Quality Improvement, PM - Program Manager, PAS - Patient Access Specialist, Compliane - Compliance Operations, Facilities - Director of Facilities

Cousin, Lamar

From:

wabbey@360painting.com

Sent:

Thursday, July 22, 2021 9:20 AM

To:

Cousin, Lamar

Subject:

[External] Thank you!

Warning: Replies to this message will go to wabbey@360painting.com. If you are unsure this is correct please contact the helpdesk.

This email is from an external sender. If you think it is malicious or fraudulent, please do not open any attachments or links.

Dear Lamar,

Thank you for allowing 360 Painting Lake Norman the opportunity to provide you with a great painting project.

Sincerely,

William Abbey, 360 Painting Lake Norman Owner

DHSR - Mental Health

JUL 2 3 2021

Lic. & Cert. Section

f you no longer wish to receive these emails you may <u>unsubscribe</u> at any time. 360 Painting - 14316 Reese Blvd W, Suite B-821, Huntersville, NC 28078

Proposal

Front Lobby

DHSR - Mental Health

JUL 2 3 2021

Lic. & Cert. Section



1c-(10'-15') Walls

Materials:

10A - SW ProMar 200 INT:

1

Casing Simple Window Interior Materials: 10A - SW SuperPaint INT:	3.00	2
Simple Door Casing (without door) Materials: 10A - SW SuperPaint INT:	3.00	1
Counter Tops Materials: 10A - SW Duration INT:	3.00	2
Normal Prep Conditions Includes standard wear and tear	1.00	1
Standard Room Set up Includes covering all items and floors w	1.00 ith clean plastic and	1 or drop cloths
Clean Up All parts of the room will be cleaned and remove all leftover unwanted materials		1 mpletion of the job. We will

Full Wall Opposite Drink Machines



Full Wall from front corner to back corner of the wall opposite the drink machines. ONLY wall in this area to be painted

	NEW COLOR	UNITS/QTY	#COATS	
1c-(10'-15') Walls		140.00	1	

Materials:

10A - SW ProMar 200 INT:

Notes:

From front corner to Back corner of pillar apx 1/2 down wall.

Normal Prep 1.00

Conditions

Includes standard wear and tear

Standard Room Set 1.00 1

up

Includes covering all items and floors with clean plastic and or drop cloths

Clean Up 1.00 1

All parts of the room will be cleaned and inspected upon completion of the job. We will remove all leftover unwanted materials and waste

Hall & Waiting area



Does NOT Include walls in back hallway. Waiting Area walls & Trim Only

NEW COLOR UNITS/QTY #COATS

1,200.00 1 1c-(10'-15') Walls Materials: 10A - SW ProMar 200 INT: 8.00 1 Simple Door Casing (without door) Materials: 10A - SW SuperPaint INT: 1.00 1 Normal Prep Conditions Includes standard wear and tear Standard Room Set 1.00 up Includes covering all items and floors with clean plastic and or drop cloths 1.00 Clean Up All parts of the room will be cleaned and inspected upon completion of the job. We will remove all leftover unwanted materials and waste 40.00 2 1d-Chair Railing Materials: 10A - SW SuperPaint INT:

Gray Hallway 1



1c-(10'-15') Walls Materials:

10A - SW ProMar 200 INT:

640.00

1

1 4.00 Simple Door Casing (without door) Materials: 10A - SW SuperPaint INT: 1.00 1 Normal Prep Conditions Includes standard wear and tear Standard Room Set 1.00 up Includes covering all items and floors with clean plastic and or drop cloths 1.00 All parts of the room will be cleaned and inspected upon completion of the job. We will

remove all leftover unwanted materials and waste

Exit Gray Lobby & Back corridor



Does not include back wall FACING back door & perpendicular between this wall and back wall. DOES INCLUDE BACK Wall.

	NEW COLOR	UNITS/QTY	#COATS	
1c-(10'-15') Walls Materials: 10A - SW ProMar 2	00 INT:	2,010.00	1	
Simple Door Casing (without door) Materials: 10A - SW SuperPai	int INT:	7.00	1	
Counter Tops Materials: 10A - SW Duration	INT:	5.00	2	
Normal Prep Conditions Includes standard	wear and tear	2.00	1	
Standard Room Set up Includes covering a	all items and floors	1.00 with clean plastic	1 and or drop cloths	
Clean Up All parts of the roor remove all leftover			1 completion of the job. We will	

GRAND TOTAL \$3,514.00