

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL090-169 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____ | (X3) DATE SURVEY COMPLETED R 08/18/2021 |
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| NAME OF PROVIDER OR SUPPLIER MONROE CRISIS RECOVERY CENTER | STREET ADDRESS, CITY, STATE, ZIP CODE 1408 EAST FRANKLIN STREET MONROE, NC 28112 |
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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 | INITIAL COMMENTS An annual and follow-up survey was completed on 8/18/21. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5000 Facility Based Crisis Service for Individuals for All Disability Groups. | V 000 | | |
| 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 | V 118 | | |

DHSR - Mental Health

SEP 08 2021

Lic. & Cert. Section

Division of Health Service Regulation

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

TITLE

(X6) DATE

STATE FORM

6899

DY5N11

If continuation sheet 1 of 5

Sharon L. Jones RNBS BSN

FBC Operations Director

9-1-2021

Division of Health Service Regulation

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| V 118 | <p>Continued From page 1</p> <p>with a physician.</p> <p>This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure MARS were kept current and accurate for 2 of 3 clients(#2, #3). The findings are:</p> <p>Finding #1: Review on 8/17/21 of client #2's record revealed: -admission date of 8/12/21; -diagnoses of Alcohol Use D/O Severe and Alcohol Dependence with alcohol induced anxiety disorder; -physicians' orders dated 8/12/21 for the following medications: thiamine 100mg one tablet daily while on Librium protocol, Folic Acid 0.4mg three tablets daily while on Librium protocol and Pedialyte 1L twice daily for two days.</p> <p>Review on 8/17/21 and 8/18/21 of client #2's MARs from 8/12/21-8/17/21 revealed: -thiamine 100mg one tablet daily dosing date left blank for 8/15/21 with no explanation documented; -Folic Acid 0.4mg three tablets daily dosing date left blank for 8/15/21 with no explanation documented; -Pedialyte 1L twice daily for two days documented as administered once on 8/12/21, once on 8/13/21 and once on 8/14/21 with no explanation documented.</p> <p>Interview on 8/17/21 with client #2 revealed:</p> | V 118 | <p>1. All MARs will be reviewed by oncoming shift nurse @ med count between shifts to ensure documentation is complete, any omissions/refusals are properly documented, all signatures are obtained, etc.</p> <p>2. MAR checks added to shift accountability worksheet for check off + signature P completion every shift (see attachment)</p> <p>3. Review of protocols during MAR reviews with off going staff to ensure understanding of protocol if any documentation is lacking</p> | 9-1-2021 |

Sharon Wilcox RNBS BSN
FBC Operations Director
9-1-2021

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| V 118 | Continued From page 2 -the doctor prescribed him some medications; -medications for anti-anxiety and for his stomach; -gets his meds as prescribed. Interview on 8/18/21 with the day shift Nurse revealed; -client #2 started with Pedialyte when he first came; -he did not like the taste so he went to Gatorade that is in the dining room; -usually a note on MAR to indicate why he did not take the Pedialyte; -should be circled and a note put under section titled "Omissions/Exceptions;" -was here working with the agency nurse on Sunday; -using agency nurses due to staffing issues; -agency nurse asked her where the Thiamine and Folic Acid was for client #2; -she knows it was administered by the agency nurse; -not sure why the agency nurse did not document it on the MAR for client #2; -plan to address it with the agency nurses. Finding #2: Review on 8/17/21 of client #3's record revealed: -admission date of 8/13/21; -diagnosis of Alcohol Use D/O-Severe; -physician's order dated 8/13/21 for Pedialyte 1L twice daily for two days. Review on 8/17/21 and 8/18/21 of client #3's MAR from 8/31/21-8/17/21 revealed: -Pedialyte 1L twice daily for two days documented as administered once on 8/13/21 and once on 8/14/21 with no explanation documented. Interview on 8/17/21 with client #3 revealed: -some medications were prescribed for him; | V 118 | 4. Shift accountability forms will be monitored by FBC-Union Center Director daily for work week 5. Medical records staff will review documentation @ time of shift chart closing to verify accuracy | 9-1-2021 9-1-2021 |

Shawn Wiley AUBS BSN
FBC Operations Director
9-1-2021

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| V 118 | Continued From page 3 -got his medications as prescribed. Interview on 8/18/21 with the day shift Nurse revealed: -client #3 took Pedialyte in the am and wanted to switch to Gatorade after that. -not sure why it was not noted on the MAR for this instead of leaving a blank with nothing documented in the omissions/exceptions on the MAR. | V 118 | | |
| V 736 | 27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are: Observations on 8/18/21 at 12:40pm revealed: -walls throughout the facility had marks, stains and scratches; -women's bathroom: shower on right side of bathroom, floor tiles have come up and water damage to floor beneath. Sign on door says do not use shower; -Room #11 had a sign on door that says, "Room closed until further notice." Bed pulled away from the wall. Floor tiles coming up behind the bed by | V 736 | V 736 ① Obtain estimates for repairs of showers flooring in adjacent bedroom * Initiated 8-30-21 ② Obtain estimates for painting of facility * Initiated 8-30-21 ③ Bid will be accepted & necessary painting / repairs completed by Oct 30 (60 days) | |

Shawn Wilcox RN BSBRN
FRC Operations Director
9-1-2021

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| V 736 | Continued From page 4 the wall. Water damage on floor. The floor was soft and unsteady when stepped on; -men's bathroom: huge unpainted area on the wall behind the urinal in the stall to the left and extended to behind the toilet in the next stall. Wall was patched with material in colors of white, blue and brown. Several handwritten words on the unpainted wall. Also a blue patch of unpainted wall tot the left of the door to enter the men's bathroom. Interview on 8/18/21 with the Crisis Recovery Worker revealed: -water was coming out of the shower in the women's bathroom and damaged the floor; -now can't use that shower; -the water damage goes into the room next to bathroom which is Room #11; -water damage to the floor of Room #11 and can't use the room; -the men's bathroom wall has been like that since she started her job a year ago; -had several contractors come, inspect and provide estimates; -has not been repaired yet. Interview on 8/18/21 with the Program Director and Facility Based Crisis Operations Director revealed: -the building used to be a doctor's office; -was not intended to have this much heavy use; -higher utilization than once thought; -the current LME/MCO owns the building; -a different LME/MCO is taking over September 1, 2021; -had estimates completed for repair work; -plan to address repairs with new owners. | V 736 | ④ Repaired sites will be at least monthly reviewed @ least monthly by support supervisor to monitor for further issues | |

Sharon W. Lane RNBS BSN
FBC Operations Director
9-1-2021

| 8 AM- 8 PM Task List | Completed? | Staff Verification |
|--|------------|--------------------|
| 1-Oncoming nurse will review MAR with off-going nurse before leaving med room after med count every shift to ensure all documentation completed, proper signatures in place, etc | | |
| 2- Referrals- # reviewed/processed _____ Names of referrals outstanding | | |
| 3- All medications in NextGen | | |
| 4- All orders reconciled with MAR | | |
| 5- VS in NextGen | | |
| 6- Bridge scripts ready for AM discharges? | | |
| 7- UDS and COVID tests ready for transport | | |
| 8- Updated shift report | | |

Signatures _____

| 8 PM- 8 AM Task List | Completed? | Staff Verification |
|---|------------|--------------------|
| 1- Oncoming nurse will review MAR with off-going nurse before leaving med room after med count every shift to ensure all documentation completed, proper signatures in place, etc | | |
| 2- Referrals # reviewed/ processed _____ Names of referrals outstanding | | |
| 3- All medications in NextGen | | |
| 4- All orders reconciled with MAR | | |
| 5- VS in NextGen | | |
| 6- Bridge scripts ready for AM discharges? | | |
| 7- Update shift report | | |
| 8- Check refrigerator temps and PPD/ Insulin dates | | |

Signatures _____



Monroe Crisis Center
1408 East Franklin Street
Monroe, NC 28112
Phone: (704) 283-6040

www.daymarkrecovery.org

September 1, 2021

Gina McLain
Facility Compliance Consultant I
Mental Health License and Certification Section
NC DHSR
2718 Mail Service Center
Raleigh, NC 27699-2718

Dear Ms. McLain,
Enclosed please find the plan of correction for the citations received for the Monroe Crisis Center during your 8-18-21 audit visit.

Please let me know if you have any questions.

Sincerely,

Sharon Wilcox, RN, BS, BSN
FBC Operations Director
Daymark Recovery Services\
336-466-5404