

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL078-170</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>09/20/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CHAPARRAL YOUTH SERVICES, LLC</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5973 MCLEOD DRIVE MAXTON, NC 28364</b>
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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
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on September 20, 2021. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p>	V 000		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p><b>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</b></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 record review and interviews, the facility failed to have a fire and disaster drills held at least quarterly and repeated on each shift. The findings are:</p> <p>Review on 9/16/21-9/20/21 of the facility records from 7/1/20-6/30/21 revealed: -No disaster drills were documented for the 2nd quarter (4/1/21-6/30/21) of 2021 for 1st and 2nd</p>	V 114	<p style="text-align: center;"><b>RECEIVED</b> <b>OCT 27 2021</b> <b>DHSR-MH Licensure Sect</b></p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Shereen...</i>	TITLE	(X6) DATE <b>10/10/2021</b>
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STATE FORM 6899 NR0311 If continuation sheet 1 of 6

## Plan of Correction: Chaparral Youth Services LLC

### Plan of Correction

<p><b>Please complete <u>all</u> requested information and mail completed Plan of Correction form to:</b>                  Mental Health Licensure and Certification Section                  NC Division of Health Service Regulation                  2718 Mail Service Center                  Raleigh, NC 27699-2718</p>	<p><b>In lieu of mailing the form, you may e-mail the completed electronic form to:</b></p>
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<b>Provider Name:</b>	Chaparral Youth Services, LLC	<b>Phone:</b>	910-827-1169
<b>Provider Contact Person for follow-up:</b>	Sheree Sampson	<b>Fax:</b>	910-775-9181
	Sheree Sampson	<b>Email:</b>	sheree1157@gmail.com
<b>Address:</b>	5973 McLeod Dr., Maxton NC 28364		<b>Provider #</b> 6603911

Finding	Corrective Action Steps	Responsible Party	Time Line
<p><b>V 114</b> This Rule is not met as evidenced by:                      Based on record review and interviews, the facility failed to have a fire and disaster drills held at least quarterly and repeated on each shift. The findings are:</p> <p>Review on 9/16/21-9/20/21 of the facility records from 7/1/20-6/30/21 revealed:</p> <p>-No disaster drills were documented for the 1st quarter (1/1/21-3/31/21) of 2021 for 1st and 2nd shifts.                      -No disaster drills were documented for the 4th quarter (10/1/20-12/31/20) of 2020 for 1st shift. -No disaster drills were documented for the 3rd quarter (7/1/20-9/30/20) of 2020 for 3rd shift.                      -No disaster drills were documented for the 2nd quarter (4/1/21-6/30/21) of 2021 for 1st and 2nd 10/1/20-12/31/2020.</p>	<p>Fire and disaster drills will be held at least quarterly and repeated on each shift. Additionally, all staff will be familiar with emergency plans for fire and disaster drills.</p> <p>Residential Mgr will cover new policy in supervision this month: Emergency drills will be held on the 20<sup>th</sup> of each month on each shift. All staff will be required to participate in and conduct the drills on the 20<sup>th</sup> of each month.</p>	<p>Sheree Sampson LCMHC LCAS-A/AP-Residential Mgr                      Johnny K. Sampson PP</p> <p>Sheree Sampson will monitor Drill Reports quarterly to ensure that all staff are participating and that drills occur on each shift at least quarterly.</p>	<p>Implementation Date: 10/19/2021</p> <p>Projected Completion Date: 12/31/2021</p>
<p><b>V118</b> This Rule is not met as evidenced by:                      Based on record reviews, observation and interviews the facility failed to ensure medications were administered as ordered by a physician and MARs kept current affecting 3 of 3 audited clients (#2, #3, #4). The findings are:</p> <p>Review on 9/16/21-9/17/21 of client #2's signed physician orders revealed:                      -No order for Clindamycin Topical Ointment. (Acne)</p> <p>Review on 9/16/21 of client #2's MARs from July 1, 2021 to September 16, 2021 revealed: -Clindamycin Topical</p>	<p>Medication Administration Records (MAR's) will be monitored by Residential Mgr and QP to ensure all meds are transcribed appropriately. Residential Mgr will verify with pharmacist and medical provider monthly to ensure that all meds are included in the MAR and that no medication is given without doctor's orders. A copy of the order will be kept along with the MAR. The QP will review MAR's monthly to double check them for accuracy in transcription and orders.</p>	<p>Sheree Sampson LCMHC                      LCAS-A/AP-Residential Mgr                      James A. Brown Jr., QP will both review MAR's monthly along with pharmacist &amp; prescriber to ensure accuracy.</p>	<p>Implementation Date: 9/28/2021</p> <p>Projected Completion Date: 10/20/2021</p> <p>Projected Completion Date:</p>

<p>Ointment was not transcribed on September's MAR.</p> <p>Finding #2 Review on 9/16/21-9/17/21 of client #3's record revealed: -13 year old male. -Admitted on 6/4/21. -Diagnoses of Disruptive Mood Dysregulation Disorder (DMDD), ADHD, combine type and Post Traumatic Stress Disorder, unspecified.</p> <p>Review on 9/16/21-9/17/21 of client #3's signed physician orders dated 7/6/21 revealed: -Miralex 17 grams powder, daily as needed for constipation.</p> <p>Finding #3 Review on 9/16/21-9/17/21 of client #4's record revealed: -16 year old male. -Admitted on 5/3/21. -Diagnoses of DMDD, Conduct Disorder, unspecified and ADHD.</p> <p>Review on 9/16/21-9/17/21 of client #4's signed physician orders revealed: -5/25/21: Ibuprofen 400 mg, 1 every 6 hours as needed for mild pain/headache.</p> <p>-6/24/21: Omega 3 Fish Oil, at bedtime. (Supplement) -8/21/21: Fluticasone Propionate 50 mcg, 2 sprays daily. (Allergies)</p> <p>-9/14/21: Cetirizine HCL (Hydrochloride) 10 mg, dailyatbedtime.(Allergies) :GuanfacineHCL2 mg, 1 twice daily. (ADHD)</p> <p>Review on 9/16/21 of client #4's MARs from July 1, 2021 to September 16, 2021 revealed: -Guanfacine HCL 2 mg was not transcribed on MAR for July.</p> <p>-Cetirizine HCL 10 mg, Omega 3 Fish Oil, Ibuprofen 400 mg were not transcribed on MARs for July and August. -Flonase Propionate 50 mcg was not transcribed on MAR for September 2021.</p>			
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