STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL060-757	A. BUILDING: _____ B. WING _____	R 11/15/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRITE HORIZON	12219 WINDY WOOD COURT CHARLOTTE, NC 28273

(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, complaint and follow-up survey was completed on 11/15/21. The complaint was substantiated(Intake #NC182584). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents	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	V 118		

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V 118	Continued From page 1 checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician. This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure medications were administered as ordered and MARS were kept current and accurate affecting 2 of 3 clients(#1 and #2). The findings are: Finding #1: Review on 11/4/21 and 11/8/21 of client #1's record revealed: -admission date of 5/27/21; -diagnosis of Conduct Disorder; -physician's order dated 7/1/21 for Trazadone 50mg one tablet at bed; -physician's order dated 9/22/21 for Trazadone 150mg 1/2 tablet at bed. Observation on 11/4/21 at 12:40pm of client #1's medications revealed Trazadone 150mg 1/2 tablet at bed dispensed 9/23/21. Review on 11/4/21 and 11/8/21 of client #1's MARs for 9/2021, 10/2021 and 11/2021 revealed: -handwritten on the 9/2021 MAR: "Trazadone 75mg tablet Take ½ tablet by mouth daily at bedtime;" -documented as administered from 9/23/21-9/30/21; -not listed on the 10/2021 MAR and the 11/2021 MAR.	V 118		

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V 118	Continued From page 2 Further review on 11/8/21 and 11/10/21 of client #1's medication physicians' orders revealed no physician order for "Trazadone 75mg tablet Take ½ tablet by mouth daily at bedtime." Interview on 11/4/21 with client #1 revealed he got his medications every day. Finding #2: Review on 11/4/21 and 11/8/21 of client #2's record revealed: -admission date of 10/19/20; -diagnoses of Post Traumatic Stress Disorder, Disruptive Mood Dysregulation Disorder and Intellect Developmental Disability; -physician's order dated 12/22/20 for fluoxetine HCL 20mg two tablets in the am; -physician's order dated 10/21/20 for Miralax 3350 17 grams in 8 ounces of fluid take daily. Observation on 11/4/21 at 12:49pm of client #2's medications revealed: -fluoxetine HCL 20mg two tablets in the am dispensed 10/23/21; -Miralax not on site. Interview on 11/4/21 with the Qualified Professional(QP) revealed the Miralax is on reorder and will be delivered from the pharmacy this date. Review on 11/4/21 and 11/8/21 of client #2's MARs from 9/2021, 10/2021 and 11/2021 revealed: -fluoxetine HCL 20mg two tablets in the am documented as administered; -Miralax not listed on the 9/2021 MAR; -Miralax listed on the 10/2021 MAR but not documented as administered, "prn" handwritten	V 118		

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V 118	Continued From page 3 on the 10/2021 MAR; -Miralax documented as administered daily on the 11/2021 MAR. Review on 11/10/21 of an email sent on 11/10/21 from the QP revealed the following documented: "The scripts we have for the Miralax are written for daily and not 'prn' per the in-house nurse practitioner, not his gastroenterologists who had just recommended it be given as needed as it is only to keep his stool soft. However we were advised as of his last procedure that took place, 10/05/2021 that he needed to take the Miralax everyday." Interview on 11/4/21 with client #2 revealed the staff give him his medicines daily.	V 118		
V 296	27G .1704 Residential Tx. Child/Adol - Min. Staffing 10A NCAC 27G .1704 MINIMUM STAFFING REQUIREMENTS (a) A qualified professional shall be available by telephone or page. A direct care staff shall be able to reach the facility within 30 minutes at all times. (b) The minimum number of direct care staff required when children or adolescents are present and awake is as follows: (1) two direct care staff shall be present for one, two, three or four children or adolescents; (2) three direct care staff shall be present for five, six, seven or eight children or adolescents; and (3) four direct care staff shall be present for nine, ten, eleven or twelve children or adolescents. (c) The minimum number of direct care staff	V 296		

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V 296	Continued From page 4 during child or adolescent sleep hours is as follows: (1) two direct care staff shall be present and one shall be awake for one through four children or adolescents; (2) two direct care staff shall be present and both shall be awake for five through eight children or adolescents; and (3) three direct care staff shall be present of which two shall be awake and the third may be asleep for nine, ten, eleven or twelve children or adolescents. (d) In addition to the minimum number of direct care staff set forth in Paragraphs (a)-(c) of this Rule, more direct care staff shall be required in the facility based on the child or adolescent's individual needs as specified in the treatment plan. (e) Each facility shall be responsible for ensuring supervision of children or adolescents when they are away from the facility in accordance with the child or adolescent's individual strengths and needs as specified in the treatment plan. This Rule is not met as evidenced by: Based on records review, observations and interviews, the facility failed to ensure the required staffing/client ratio affecting 3 of 3 clients(#1-#3). The findings are: Review on 11/4/21 and 11/10/21 of client #1, client #2 and client #3's treatment plans revealed: -client #1's treatment plan dated 5/13/21 and last updated 8/31/21 documented the following:	V 296		

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V 296	Continued From page 5 "While in the community or participating in community activities other than school, [client #1] will be supervised by one staff at all times;" -client #2's treatment plan dated 10/13/20 and last updated 10/6/21 documented the following: "While in the community or participating in community activities other than school, [client #2] will be supervised by one staff at all times;" -client #3's treatment pan dated 8/24/21 and last updated 9/28/21 documented the following: "While in the community or participating in community activities other than school, [client #3] will be always supervised by one staff." Observation on 11/4/21 revealed: -3:51pm the Qualified Professional(QP) arrived at the facility with client #3; -3:52pm the QP and client #3 entered the facility; -4:05pm staff #1 entered the facility. Interview on 11/9/21 with staff #3 revealed: -work second shift; -never worked a shift alone; -only time been alone at the facility was with one client; -other staff take other clients out in community and one staff stays back with the one client; -typically on weekends; -stayed back with one client only once; -he had homework to do; -other staff took other clients out in community. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 296		