

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL063-065	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/19/2023
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NAME OF PROVIDER OR SUPPLIER CAROLINA TREATMENT CENTER OF PINEHUF	STREET ADDRESS, CITY, STATE, ZIP CODE 20 PAGE DRIVE PINEHURST, NC 28374
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on January 19, 2023. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .3600 Outpatient Opioid Treatment.</p> <p>This facility has a current census of 444. The survey sample consisted of audits of 22 current clients.</p>	V 000		
V 108	<p>27G .0202 (F-I) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <ol style="list-style-type: none"> (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.</p>	V 108	<p>CPR training for all in need will take place on February 6th. Organization will implement quarterly CPR trainings effective 1/20/2023, to eliminate any gaps going forward. Organization will also encourage staff other than nurses to become certified to ensure 1 person on staff at all times is available.</p>	2/6/2023

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 108	<p>Continued From page 1</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure one of six audited staff (the Nursing Supervisor) had training in Cardiopulmonary Resuscitation (CPR). The findings are:</p> <p>Review on 1/19/23 of a personnel record for the Nursing Supervisor revealed: -A hire date of 6/24/15. -CPR training expired on December 2022. -No documentation of current CPR training.</p> <p>Interview on 1/19/23 with the Clinic Director revealed: -She was not aware the Nursing Supervisor's CPR had expired. -The CPR training for the Nurse Supervisor was not updated. "She just missed it." -Two of the Nurse Supervisor's children passed away within the last two years. -Two of her children passed within the last two years. -The Nursing Supervisor did work alone at the clinic on Saturdays. -The Nursing Supervisor did work alone two Saturday 's out of the month dosing clients at the clinic. -She confirmed the Nursing Supervisor had no</p>	V 108		

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V 108	Continued From page 2 current training in CPR.	V 108		
V 113	27G .0206 Client Records 10A NCAC 27G .0206 CLIENT RECORDS (a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to: (1) an identification face sheet which includes: (A) name (last, first, middle, maiden); (B) client record number; (C) date of birth; (D) race, gender and marital status; (E) admission date; (F) discharge date; (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV; (3) documentation of the screening and assessment; (4) treatment/habilitation or service plan; (5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician; (6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician; (7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and	V 113	Emergency consent implemented 1/20/2023. Facility will work to ensure all patients have form signed by 2/6/2023.	2/6/2023

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V 113	<p>Continued From page 3</p> <p>administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.</p> <p>This Rule is not met as evidenced by: Based on records reviews and interview, the facility failed to ensure records were complete for 22 of 22 audited clients (#1, #2, #3, #4, #5, #6, #7, #8, #9, #10, #11, #12, #13, #14, #15, #16, #17, #18, #19, #20, #21 and #22). The findings are:</p> <p>Review on 1/18/23 of Client #1's record revealed: -Admission date of 7/8/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #2's record revealed: -Admission date of 8/30/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #3's record revealed: -Admission date of 11/15/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed</p>	V 113		

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V 113	<p>Continued From page 4</p> <p>statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #4's record revealed: -Admission date of 7/20/10. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #5's record revealed: -Admission date of 1/5/23. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #6's record revealed: -Admission date of 3/16/21. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #7's record revealed: -Admission date of 2/15/17. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #8's record revealed: -Admission date of 7/21/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed</p>	V 113		

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V 113	<p>Continued From page 5</p> <p>statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #9's record revealed: -Admission date of 7/12/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #10's record revealed: -Admission date of 8/5/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #11's record revealed: -Admission date of 8/6/20. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #12's record revealed: -Admission date of 9/11/18. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #13's record</p>	V 113		

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V 113	<p>Continued From page 6</p> <p>revealed:</p> <ul style="list-style-type: none"> -Admission date of 8/30/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care. <p>Review on 1/18/23 of Client #14's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 11/8/22. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care. <p>Review on 1/18/23 of Client #15's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 9/30/21. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care. <p>Review on 1/18/23 of Client #16's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 9/11/18. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care. <p>Review on 1/18/23 of Client #17's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 1/26/21. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed 	V 113		

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V 113	<p>Continued From page 7</p> <p>statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #18's record revealed: -Admission date of 8/8/12. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #19's record revealed: -Admission date of 11/14/22. -Diagnoses of Opioid Use Disorder; Sedative-Hypnotic Use Disorder; Cannabis Use Disorder; Depression; Anxiety Disorder. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #20's record revealed: -Admission date of 10/19/20. -Diagnoses of Opioid Use Disorder and High Cholesterol. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #21's record revealed: -Admission date of 6/26/20. -Diagnoses of Opioid Use Disorder. -There was no documentation of a signed statement from the client or legally responsible</p>	V 113		

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V 113	<p>Continued From page 8</p> <p>person granting permission to seek emergency care.</p> <p>Review on 1/18/23 of Client #22's record revealed: -Admission date of 9/27/14. -Diagnoses of Opioid Use Disorder, Depression and Schizophrenia. -There was no documentation of a signed statement from the client or legally responsible person granting permission to seek emergency care.</p> <p>Interview on 1/18/23 with the Clinical revealed: -She did not remember ever seeing anything in the clinic's enrollment package that addressed consent to seek emergency care from the clients. -A new form seeking consent to seek emergency care was to be made. -She confirmed there was no documentation of a signed statement from the clients or legally responsible persons granting permission to seek emergency care.</p>	V 113		
V 235	<p>27G .3603 (A-C) Outpt. Opiod Tx. - Staff</p> <p>10A NCAC 27G .3603 STAFF (a) A minimum of one certified drug abuse counselor or certified substance abuse counselor to each 50 clients and increment thereof shall be on the staff of the facility. If the facility falls below this prescribed ratio, and is unable to employ an individual who is certified because of the unavailability of certified persons in the facility's hiring area, then it may employ an uncertified person, provided that this employee meets the certification requirements within a maximum of 26 months from the date of employment. (b) Each facility shall have at least one staff</p>	V 235	<p>Organization continues to actively recruit quality candidates. Organization has implemented remote/hybrid positions. Regional Clinical Supervisor will assume caseload effective immediately in order to meet required ratio. Clinic Director/Clinical Supervisor will conduct 1-2 interviews per week in order to fill open positions by 2/15/2023.</p>	2/15/2023

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V 235	<p>Continued From page 9</p> <p>member on duty trained in the following areas:</p> <p>(1) drug abuse withdrawal symptoms; and</p> <p>(2) symptoms of secondary complications to drug addiction.</p> <p>(c) Each direct care staff member shall receive continuing education to include understanding of the following:</p> <p>(1) nature of addiction;</p> <p>(2) the withdrawal syndrome;</p> <p>(3) group and family therapy; and</p> <p>(4) infectious diseases including HIV, sexually transmitted diseases and TB.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure a minimum of one certified drug abuse counselor or certified substance abuse counselor to each 50 clients. The findings are:</p> <p>Review on 1/18/23 of facility records revealed:</p> <ul style="list-style-type: none"> -The facility had a census of 444 clients. -The facility had a Clinic Director, Clinical Supervisor and 6 substance abuse counselors with caseloads. -The Clinic Director had a caseload of 60 clients. -The Clinical Supervisor had a caseload of 60 clients. -Staff #1 had a caseload of 58 clients. -Staff #3 had a caseload of 60 clients. -Staff #4 had a caseload of 51 clients. -Staff #5 had a caseload of 58 clients. 	V 235		

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V 235	<p>Continued From page 10</p> <p>Interview on 1/19/23 with staff #1 revealed: -He had been working at the clinic as a Counselor for almost 11 years. -He knew he had over 50 clients on his current caseload. -He thought his caseload was at 58 clients. -He was not sure how long his caseload had been at 58 clients. -He confirmed the facility failed to ensure there was a ratio of one counselor to every 50 or less clients.</p> <p>Interview on 1/19/23 with the Clinical Supervisor revealed: -She has been the Clinical Supervisor since August 2022. -She had a caseload of clients. -She had 60 clients on her caseload. -She wasn't sure how long her client caseload was over 50. -She confirmed the facility failed to ensure there was a ratio of one counselor to every 50 or less clients.</p> <p>Interviews on 1/18/23 and 1/19/23 with the Clinic Director revealed: -She was aware that she and some of her counselors were over 50 clients on their caseloads. -The clinic had three vacant counselor positions. -She currently had 60 clients on her caseload. -She thought she had over 50 clients on her caseload for about a month. -She confirmed the facility failed to ensure there was a ratio of one counselor to every 50 or less clients.</p>	V 235		