

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL081-127</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>02/16/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>FOOTHILLS AT RED OAK RECOVERY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>517 CUB CREEK ROAD</b> <b>ELLENBORO, NC 28040</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual, complaint and follow up survey was completed on 2/16/24. The complaint was unsubstantiated (# NC212434). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600D Supervised Living for Minors with Substance Abuse Dependency</p> <p>This facility is licensed for 16 and currently has a census of 15. The survey sample consisted of audits of 2 current clients and 1 former client.</p>	V 000		
V 113	<p><b>27G .0206 Client Records</b></p> <p>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;</p>	V 113		

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

Division of Health Service Regulation

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V 113	<p>Continued From page 1</p> <p>(6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician;</p> <p>(7) documentation of services provided;</p> <p>(8) documentation of progress toward outcomes;</p> <p>(9) if applicable:</p> <p>(A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM);</p> <p>(B) medication orders;</p> <p>(C) orders and copies of lab tests; and</p> <p>(D) documentation of medication and administration errors and adverse drug reactions.</p> <p>(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 record review and interview, the facility staff failed to maintain a complete client record to include the medication administration record (MAR) for 1 of 1 audited former client (FC) (FC #3). The findings are:</p> <p>Record review on 2/14/24 for FC #3 revealed: Date of admission: 1/10/24 Date of discharge: 1/11/24 Age: 17 years old Diagnoses: attention deficit hyperactivity disorder, cannabis use disorder, PANDAS (pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections) Review of MAR dated 1/12/24-1/18/24 revealed:</p>	V 113		

Division of Health Service Regulation

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V 113	<p>Continued From page 2</p> <ul style="list-style-type: none"> <li>-Clonidine 0.1mg (milligram) -take 0.5 by mouth every 12 hours</li> <li>-Amphetamine 15mg- take 1 capsule by mouth every morning</li> <li>-Escitalopram 10mg- take 1 tablet by mouth daily</li> <li>-There were no initials indicating administration as client had been discharged.</li> <li>-There was no MAR for the week of 1/5/24-1/11/24 when client was present at facility.</li> <li>-There were no orders to correlate with the medications listed on the MAR.</li> </ul> <p>Interview on 2/15/24 with the registered nurse (RN) revealed:</p> <ul style="list-style-type: none"> <li>-Was not involved with FC #3's admission.</li> <li>-Process was to obtain medications from client/family, count and create a MAR.</li> <li>-"His (FC #3) list of meds (medications) and counts I know is here but I can't find it."</li> <li>-MAR, medications and face sheet were given to the police when they picked up FC #3.</li> </ul> <p>Interview on 2/15/24 with the administrative specialist revealed:</p> <ul style="list-style-type: none"> <li>-Completed admission consents for new clients. After consents were signed, clients then went to medical, guides for outfitting or safety screens with a therapist or Executive Director.</li> <li>-She did the intake for FC #3.</li> <li>-"I got the medications but don't remember if I counted them. Put them in a bag and gave them to the next person."</li> </ul> <p>Interview on 2/15/24 with Recovery Guide (RG) #2 revealed:</p> <ul style="list-style-type: none"> <li>-He assisted with FC #3's intake. "The [administrative specialist] got the meds and gave them to the nurse."</li> <li>-"I was not on meds that day but I think he</li> </ul>	V 113		

Division of Health Service Regulation

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V 113	Continued From page 3  received meds from RG #1."  Interview on 2/14/24 with the ED revealed: -Gave the MAR and medications to the police. "I believe we administered 1 dose." -The active MAR was given to the police when they picked up FC #3 to fulfill the IVC (involuntary commitment) and transport to the local emergency room	V 113		
V 114	27G .0207 Emergency Plans and Supplies  10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use.  This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to hold fire and disaster drills on each shift at least quarterly. The findings are:  Review on 2/14/24 of emergency drill log summary revealed: -Shifts were divided into orange shift, blue shift	V 114		

Division of Health Service Regulation

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V 114	<p>Continued From page 4</p> <p>and 3rd shift (11pm-7am). -Orange and blue shift fire and disaster drills were conducted on the same day at the same time for each drill for 4 quarters. -The overnight shift drills were conducted at a different day and time from the orange and blue shift drills. -The facility ran fire and disaster drills for 2 shifts (1 day and 1 overnight). They did not run separate drills for the 3rd of 3 shifts.</p> <p>Interview on 2/14/24 with Client #1 revealed: -Had been at the facility for 82 days. -Had a fire drill last month. They evacuated to the carriage house. -For disaster drills they went to the basement.</p> <p>Interview on 2/14/24 with Client #2 revealed: -Had been at the facility for 35 days. -There had not been any drills since he had been at the facility.</p> <p>Interview on 2/14/24 with recovery guide (RG) #1 revealed: -Had been at the facility for almost 2 years. -Worked 7 on 7 off. Her week on, she worked 7am-11pm then slept on campus in the guide shack. -Fire drills required evacuations to the facility sign. Disaster drills required evacuation to the basement or to the barn depending on the drill. -The operations director scheduled the drills.</p> <p>Interview on 2/14/24 with the Operations Director revealed: -Orange and blue shifts ran 7 on 7 off. -Scheduled the drills on Thursdays when there was a shift overlap and both shifts could participate in the drills. -Understood from the previous survey that this</p>	V 114		

Division of Health Service Regulation

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V 114	Continued From page 5  would meet the requirement.  This deficiency constitutes a recited deficiency and must be corrected within 30 days.	V 114		
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 with a physician.	V 118		

Division of Health Service Regulation

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V 118	<p>Continued From page 6</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure that medications were administered only on the written order of a person authorized to prescribe medications effecting 2 of 2 audited current clients (#1, #2). The findings are:</p> <p>Record review on 2/13/24 for Client #1 revealed: -Date of admission: 11/24/23. -Age: 16 years old -Diagnoses: depressive disorder, cannabis use disorder. Review on 2/14/24 of physician orders revealed: -No medication order for Melatonin.</p> <p>Review on 2/14/24 of January-February 2024 MARs revealed: -Melatonin 3mg (milligrams) (sleep) was initialed as administered 1/1/24-1/15/24, 1/24/24, 1/25/24, 1/27/24, 1/28/24, 1/30/24, 1/31/24, 2/1/24, 2/8/24, 2/9/24. (24 doses)</p> <p>Record review on 2/14/24 for Client #2 revealed: -Date of admission: 1/8/24. -Age: 15 years old -Diagnoses: major depressive disorder, attention deficit hyperactivity disorder, cannabis use disorder, alcohol use disorder, tobacco use disorder.</p> <p>Review on 2/14/24 of physician orders revealed: -No medication order for: -Omega 3 1000iu (international units) daily PRN (as needed)</p>	V 118		

Division of Health Service Regulation

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V 118	<p>Continued From page 7</p> <ul style="list-style-type: none"> <li>-Melatonin 3mg at bedtime PRN</li> <li>-Diphenhydramine 25mg every 6 hours PRN</li> <li>-Guaifenesin 600mg twice daily PRN</li> <li>-Acetaminophen 500mg 2 tablets every 6 hours PRN</li> <li>-Cetirizine 10mg daily PRN</li> <li>-Ibuprofen 200mg 2 tablets every 6 hours PRN</li> <li>-Meclizine 25mg daily PRN</li> <li>-Probiotic daily PRN</li> <li>-Vitamin D3 daily PRN</li> </ul> <p>Review on 2/14/24 of MARs from 1/8/24-2/14/24 revealed:</p> <ul style="list-style-type: none"> <li>-Omega 3 was initialed as administered on 1/13-1/22/24, 2/2/24, 2/4/24, 2/5/24, 2/7/24, 2/11-2/14/24. (18 doses)</li> <li>-Melatonin was initialed as administered 1/13/24, 1/14/24, 1/21-1/26/24, 1/28-1/31/24, 2/2/24, 2/3/24, 2/8-2/10/24. (15 doses)</li> <li>-Diphenhydramine was initialed as administered 2/8/24, 2/9/24, 2/13/24. (3 doses)</li> <li>-Guaifenesin was initialed as administered 1/13/24. (1 dose)</li> <li>-Acetaminophen was initialed as administered 2/10/24 (twice), 2/11/24, 2/12/24. (3 doses)</li> <li>-Cetirizine was initialed as administered 2/11/24 (twice), 2/12/24, 2/13/24. (4 doses in 3 days)</li> <li>-Ibuprofen was initialed as administered 2/11/24, 2/13/24. (2 doses)</li> <li>-Meclizine was initialed as administered 2/11/24. (1 dose)</li> <li>-Probiotic was initialed as administered 1/13-1/22/24, 2/11-2/13/24. (12 doses)</li> <li>-Vitamin D3 was initialed as administered 1/13-1/22/24. (10 doses)</li> </ul> <p>Interview on 2/14/24 with Client #1 revealed:</p> <ul style="list-style-type: none"> <li>- "I take 1 med(medication); antidepressant and melatonin."</li> <li>- Had never refused or forgot to take any</li> </ul>	V 118		



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V 118	<p>Continued From page 8</p> <p>medication.</p> <p>Interview on 2/14/24 with Client #2 revealed: -Takes sertraline, Vyvanse and abilify. "I don't take Vyvanse on the weekends"</p> <p>Interview on 2/14/24 with recovery guide (RG) #3 revealed: -Regarding Client #2's 2nd dose of cetirizine on 2/11/24, "Oh, that one's on me. I did that."</p> <p>Interview on 2/15/24 with the registered nurse (RN) revealed: -Have an OTC (over the counter) list of medications we can administer as needed. -OTCs are documented on a separate form, not the MAR. -"[Physician's assistant] doesn't sign the OTC form." -Was not aware orders were also required for OTC medications.</p>	V 118		