

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL045-149	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/07/2024
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NAME OF PROVIDER OR SUPPLIER THE WILLOWS AT RED OAK RECOVERY	STREET ADDRESS, CITY, STATE, ZIP CODE 67 RACKING HORSE LANE FLETCHER, NC 28732
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on June 7, 2024. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .3400 Residential Treatment/Rehabilitation for Individuals with Substance Abuse Disorders.</p> <p>This facility is licensed for 16 and has a current census of 16. The survey sample consisted of audits of 5 current clients and 3 former clients.</p>	V 000		
V 117	<p>27G .0209 (B) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(b) Medication packaging and labeling:</p> <p>(1) Non-prescription drug containers not dispensed by a pharmacist shall retain the manufacturer's label with expiration dates clearly visible;</p> <p>(2) Prescription medications, whether purchased or obtained as samples, shall be dispensed in tamper-resistant packaging that will minimize the risk of accidental ingestion by children. Such packaging includes plastic or glass bottles/vials with tamper-resistant caps, or in the case of unit-of-use packaged drugs, a zip-lock plastic bag may be adequate;</p> <p>(3) The packaging label of each prescription drug dispensed must include the following:</p> <p>(A) the client's name;</p> <p>(B) the prescriber's name;</p> <p>(C) the current dispensing date;</p> <p>(D) clear directions for self-administration;</p> <p>(E) the name, strength, quantity, and expiration date of the prescribed drug; and</p> <p>(F) the name, address, and phone number of the pharmacy or dispensing location (e.g., mh/dd/sa</p>	V 117		

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

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V 117	<p>Continued From page 1</p> <p>center), and the name of the dispensing practitioner.</p> <p>This Rule is not met as evidenced by: Based on record review, interview, and observation, the facility failed to ensure the packaging label of each prescription drug dispensed included clear directions for administration affecting 1 of 5 audited clients (#1). The findings are:</p> <p>Review on 6/5/24 of Client #1's record revealed: -Date of admission: 5/16/24. -Diagnoses: Obsessive Compulsive Disorder related to self-harm; Severe Major Depressive Disorder, Recurrent episode, with chronic suicidality; Generalized Anxiety Disorder; and Unspecified Trauma and Stressor Related Disorder. -Physician's Orders: -5/28/24 - Gabapentin (anxiety) 300 milligram (mg) capsule (cap), take 2 caps in the morning, take 1 cap in the afternoon, take 2 caps at bedtime. -6/4/24 - Trazadone (insomnia) 50 mg tablet (tab), take 1 tab at bedtime as needed (PRN).</p> <p>Observation on 6/5/24 at 1:00pm of Client #1's medications revealed: -2 bubble packs of Gabapentin 300 mg cap both listed 1 cap three times daily. -1 bubble pack had "three" scratched out and handwritten in was "two." -1 bubble pack listed 1 cap three times daily.</p>	V 117		

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V 117	Continued From page 2 -Trazadone 50 mg tab, 1 tab at bedtime (Pharmacy label did not indicate PRN). -Medication prescription labels did not match the current physician orders. Interview on 6/5/24 and 6/7/24 with the Director of Nursing revealed: -Pharmacy "would not update the medication label" when changes with the medication administration instructions were made. -"...did not want to waste the medicine." -Would start asking the pharmacy to update the medication labels due to it being "a licensing issue."	V 117		
V 123	27G .0209 (H) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (h) Medication errors. Drug administration errors and significant adverse drug reactions shall be reported immediately to a physician or pharmacist. An entry of the drug administered and the drug reaction shall be properly recorded in the drug record. A client's refusal of a drug shall be charted. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure all medication administration errors were reported immediately to a physician or pharmacist affecting 3 of 3 audited former clients (FC #7, #8, and #9). The findings are:	V 123		

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V 123	<p>Continued From page 3</p> <p>Review on 6/5/24 of FC #7's record revealed: -Date of admission: 3/1/24. -Date of discharge: 5/3/24. -Diagnoses: Severe Opioid Use Disorder , Bipolar II Disorder, and Post Traumatic Stress Disorder. -Physician's Order: -3/5/24 - Gabapentin 300 mg 1 tab by mouth three times daily.</p> <p>Review on 6/5/24 of FC #8's record revealed: -Date of admission: 3/30/24. -Date of discharge: 5/27/24. -Diagnoses: Severe Opioid Use Disorder, Generalized Anxiety Disorder, and Dissociative Identity Disorder. -Physician's Order: -4/9/24 - Seroquel (quetiapine) 100mg one and a half tabs by mouth at bedtime for insomnia. -Seroquel 50 mg - one tab at bedtime as needed.</p> <p>Review on 6/5/24 of FC #9's record revealed: -Date of admission: 4/29/24. -Date of discharge: 5/23/24. -Diagnoses: Severe Major Depressive Disorder, recurrent episode; Generalized Anxiety Disorder; Attention Deficit Hyperactivity Disorder predominantly inattentive presentation; and Parent-Child Relational Problem. -Physician's Order: -4/30/24 - Latuda (anxiety/depression) 60mg 1 tab by mouth after dinner.</p> <p>Review on 6/5/24 of facility's level I incident reports dated 3/5/24-6/5/24 revealed: -3/11/24 -FC #7, "Client (FC #7) was reminded of afternoon med (medication) window and forgot. Went to group/session and forgot to come back and get afternoon meds in time."</p>	V 123		

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V 123	<p>Continued From page 4</p> <p>-5/2/24 -FC #8, "...given PRN dosage of quetiapine (50 mg) for her (FC #8's) scheduled. Scheduled dose of 150 mg was not given..."</p> <p>-5/8/24 -FC #9, "...did not receive dosage of their lurasidone (60 mg) medication yesterday."</p> <p>-No documentation the above medication administration errors were reported immediately to a physician or pharmacist.</p> <p>Interview on 6/5/24 with the Director of Nursing revealed: -She was "told" that she had to contact a physician or pharmacist for medication refusals only.</p>	V 123		
V 227	<p>27G .3401 Res. Sub. Abuse - Scope</p> <p>10A NCAC 27G .3401 SCOPE</p> <p>(a) A residential treatment or rehabilitation facility for alcohol or other drug abuse disorders is a 24-hour residential service which provides active treatment and a structured living environment for individuals with substance abuse disorders in a group setting.</p> <p>(b) Individuals must have been detoxified prior to entering the facility.</p> <p>(c) Services include individual, group and family counseling and education.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide services within the scope of their license affecting 3 of 5 audited clients (#1, #4, and #5). The findings are:</p> <p>Review on 6/5/24 of Client #1's record revealed:</p>	V 227		

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V 227	<p>Continued From page 5</p> <ul style="list-style-type: none"> -Date of admission: 5/16/24. -Diagnoses: Obsessive Compulsive Disorder related to self-harm; Severe Major Depressive Disorder Recurrent episode, with chronic suicidality; Generalized Anxiety Disorder; and Unspecified Trauma and Stressor Related Disorder. -Intake Assessment dated 5/15/24: <ul style="list-style-type: none"> -Presenting problem/crisis in client's own words: "Self-harm for 5ish years." -Substance use history: None listed. -"Are there other addictive behaviors that the client has a problem with? Yes, self-harm, uses razor blades." -"Does the client smoke and/or use other nicotine products? No." -"Are there any other addictive disorders that will need to be addressed in treatment? No." -Drug craving: "0." -"How is the client supporting his/her alcohol/drug usage? N/A (not applicable)." -"Is there a recommendation to admit the client? Yes." -No Substance Use Disorder diagnosis listed. Attempted interviews on 6/5/24 and 6/6/24 with Client #1 was unsuccessful as the client refused. Review on 6/6/24 of Client #4's record revealed: <ul style="list-style-type: none"> -Date of admission: 5/11/24. -Diagnoses: Generalized Anxiety Disorder; Moderate Major Depressive Disorder, Recurrent episode; and Obsessive-Compulsive Disorder. -Intake Assessment dated 5/9/24: <ul style="list-style-type: none"> -Presenting problem/crisis in client's own words: "The school that I am currently working at is the same place I experienced trauma and it has now impeded my progress and the trauma work that I was doing." -Substance use history: None listed. 	V 227		

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V 227	<p>Continued From page 6</p> <p>- "Does the client smoke and/or use other nicotine products? No."</p> <p>- "Are there any other addictive disorders that will need to be addressed in treatment? No."</p> <p>- Drug craving: "0."</p> <p>- "How is the client supporting his/her alcohol/drug usage? N/A (not applicable)."</p> <p>- "Is there a recommendation to admit the client? Yes."</p> <p>- No Substance Use Disorder diagnosis listed.</p> <p>Review on 6/6/24 of Client #5's record revealed:</p> <p>- Date of admission: 4/24/24.</p> <p>- Diagnoses: Moderate Major Depressive Disorder, Recurrent episode; Generalized Anxiety Disorder; Adjustment Disorders, With Mixed Anxiety and Depressed Mood; and Parent-Child Relational Problem.</p> <p>- Intake Assessment dated 4/23/24:</p> <p>- Substance use history: None listed.</p> <p>- "Are there other addictive behaviors that the client has a problem with? No."</p> <p>- "Does the client smoke and/or use other nicotine products? No."</p> <p>- "Are there any other addictive disorders that will need to be addressed in treatment? No."</p> <p>- Drug craving: "0."</p> <p>- "How is the client supporting his/her alcohol/drug usage? N/A."</p> <p>- "Is there a recommendation to admit the client? Yes."</p> <p>- No Substance Use Disorder diagnosis listed.</p> <p>Interview on 6/7/24 with the Quality Assurance Officer revealed:</p> <p>- "Thought" Clients #1, #4 and #5 had substance use history.</p> <p>Interview on 6/6/24 with the Executive Director revealed:</p>	V 227		

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V 227	<p>Continued From page 7</p> <ul style="list-style-type: none"> -Clients with "dual diagnoses" were appropriate for admissions. -Clients were admitted with "mental health" as a primary diagnosis. -"...even if just a little bit of substance abuse (as a diagnosis) we will admit." -Was not sure if Clients #1, #4 and #5 had a Substance Use Disorder. -Would check on this with the Clinical Director. <p>Interview on 6/6/24 with the Clinical Director revealed:</p> <ul style="list-style-type: none"> -Started at the facility within the last 2 months. -Was not a part of the admissions process for Clients #1, #4 and #5. -The criteria for admission to the facility was substance use disorder and co-occurring mental health diagnoses. 	V 227		
V 228	<p>27G .3402 Res. Sub. Abuse - Staff</p> <p>10A NCAC 27G .3402 STAFF</p> <p>(a) Each facility shall have full-time staff as follows:</p> <ol style="list-style-type: none"> (1) One full-time certified alcoholism, drug abuse or substance abuse counselor for a facility having up to 30 occupied beds, and for every 30 occupied bed increment or portion thereafter. (2) One full-time qualified alcoholism, drug abuse or substance abuse professional as defined in Paragraphs (14), (17) and (19) of 10A NCAC 27G .0104 for facilities having 11 or more occupied beds, and for every additional occupied 10-bed increment or portion thereafter. (3) The remaining full-time staff members required by Subparagraph (a)(1) of this Rule may be either qualified alcoholism, drug abuse, or substance abuse counselors. <p>(b) A minimum of one staff member shall be</p>	V 228		

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V 228	<p>Continued From page 8</p> <p>present in the facility when clients are present in the facility.</p> <p>(c) In facilities that serve minors, a minimum of one staff member for each five or fewer minor clients shall be on duty during waking hours when minor clients are present.</p> <p>(d) Any qualified alcoholism, drug abuse or substance abuse professional who is not certified shall become certified by the North Carolina Substance Abuse Professional Certification Board within 26 months from the date of employment, or from the date an unqualified person meets the requirements to be qualified, whichever is later.</p> <p>(e) Each direct care staff member shall receive annual continuing education to include understanding of the nature of addiction, the withdrawal syndrome, group therapy, and family therapy through in-service training, academic course work, or training approved by the North Carolina Substance Abuse Professional Certification Board.</p> <p>(f) Each direct care staff member in a facility that serves minors shall receive training in youth development and therapeutic techniques in working with youth.</p> <p>(g) Each facility shall have at least one staff member on duty trained in the following areas:</p> <p>(1) alcohol and other drug withdrawal symptoms; and</p> <p>(2) symptoms of secondary complications to alcoholism and drug addiction.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure direct care staff received the required annual continuing education affecting 1</p>	V 228		

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V 228	<p>Continued From page 9</p> <p>of 3 audited staff (#2). The findings are:</p> <p>Review on 6/6/24 of Staff #2's personnel record revealed: -Date of Hire: 8/15/22. -Job title: Recovery Support Specialist. -No documentation of the required annual continuing education to include understanding of the nature of addiction, the withdrawal syndrome, group therapy and family therapy.</p> <p>Interview on 6/5/24 with Staff #2 revealed: -Worked at the facility for 2 years. -Worked 3rd shift (overnight awake staff). -3rd shift staff typically didn't go to the weekly in-service trainings during the day. -She would receive a "print out" of the trainings, "...read over it and turn it in."</p> <p>Interview on 6/7/24 with the Quality Assurance Officer revealed: -The facility held weekly in-service trainings. -"[Staff #2] started out as an overnight staff, so she typically did not attend the in-service trainings."</p>	V 228		