

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>MHL011-443</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>09/10/2024</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>ELIADA TREATMENT CENTER</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>882 ELIADA HOME ROAD<br/>ASHEVILLE, NC 28806</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 |
|--------------------|--|---------------|---|--------------------|
| V 000              | <p><b>INITIAL COMMENTS</b></p> <p>A complaint survey was completed on 9/10/24. The complaint was unsubstantiated (NC#00221599). A deficiency was 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> <p>This facility is licensed for 8 and currently has a census of 8. The survey sample consisted of audits of 3 current clients.</p>  | V 000         |   |                    |
| V 123              | <p><b>27G .0209 (H) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b><br/>(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.</p> <p>This Rule is not met as evidenced by:<br/>Based on record reviews and interviews, the facility failed to ensure all medication administration errors were immediately reported to a pharmacist or physician affecting 1 of 3 audited clients (#3). The findings are:</p> <p>Record review on 9/9/24 for Client #3 revealed:</p> | V 123         |   |                    |

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

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| V 123              | <p>Continued From page 1</p> <ul style="list-style-type: none"> <li>-Date of admission: 6/11/24.</li> <li>-Age: 14 years</li> <li>-Diagnoses: Disruptive Mood Dysregulation Disorder, Post Traumatic Stress Disorder, Anxiety Disorder.</li> <li>-Physician ordered medications dated 6/11/24 included:               <ul style="list-style-type: none"> <li>-Clonidine 0.1mg (milligram) (sleep) 1 tablet daily at bedtime.</li> <li>-Metformin ER (extended release) (diabetes prevention) 750mg 1 tablet daily at 6pm.</li> <li>-Omeprazole 20mg (heartburn) 1 capsule twice daily.</li> <li>-Sucralfate 1 gram (stomach acid) 1 tablet before meals and at bedtime.</li> <li>-Ziprasidone 60mg (mood) 1 capsule twice daily.</li> </ul> </li> </ul> <p>Review on 9/9/24 of MARs (medication administration record) from 7/1/24-9/8/24 revealed:</p> <ul style="list-style-type: none"> <li>-Clonidine was documented as refused on 8/17/24 and 8/24/24.</li> <li>-Metformin was documented as refused on 7/16/24.</li> <li>-Omeprazole was documented as refused on 8/17/24 (pm dose) and 8/24/24 (pm dose).</li> <li>-Sucralfate was documented as refused on 7/16/24 (5:30pm dose), 8/17/24 (12pm dose and 8pm dose), 8/24/24 (8pm dose), 8/26/24 (12pm dose) and 9/1/24 (8am dose).</li> <li>-Ziprasidone was documented as refused on 8/17/24 (pm dose) and 8/24/24 (pm dose).</li> </ul> <p>Review on 9/9/24 of medication error reports from 7/1/24-9/8/24 revealed:</p> <ul style="list-style-type: none"> <li>-There were no reports for the above dates of refusals nor documentation that a physician or pharmacist was immediately contacted regarding the refused medications.</li> </ul> | V 123         |   |                    |

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| V 123              | Continued From page 2<br><br>Interview on 9/10/24 with the Chief Compliance Officer revealed:<br>-Staff involved with passing medications were required to complete the medication error reports when a student refused medications.<br>-Several medical/medically trained staff resigned after administration increased compliance standards.<br>-A nurse, who was also a former employee, had recently returned to manage the nursing department and was in process of bringing the medication requirements back into compliance. | V 123         |   |                    |