STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL026-989	A. BUILDING: _____ B. WING _____	11/08/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THOMPSON CHILD & FAMILY FOCUS-SALLY H	162 SALLY HILL CIRCLE FAYETTEVILLE, NC 28306

(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 survey was completed on November 8, 2024. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents. This facility is licensed for 6 and has a current census of 4. The survey sample consisted of audits of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes. (b) The plans 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 the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use.	V 114		

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V 114	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure fire and disaster drills were held at least quarterly and repeated on each shift. The findings are: Review on 11/7/24 of the facility's records for fire and disaster Drills revealed: -No fire or disaster drill held on 2nd shift during the 4th Quarter of 2023 (October - December). -No fire or disaster drill held on 2nd shift during the 1st Quarter of 2024 (January - March). -No disaster drill held on 1st shift during the 2nd Quarter of 2024 (April - June). -No fire or disaster drill held on 1st shift during the 3rd Quarter of 2024 (July - September). Interview on 11/7/24 client #2 stated: -Fire drills are held monthly. -She had not participated in a disaster drill. Interview on 11/7/24 client #3 stated: -She had not participated in a fire or disaster drill since admission. Interview on 11/7/24 staff #2 stated: -Fire drills were held monthly. -She was unsure about disaster drills. Interview on 11/7/24 staff #3 stated: -There was a schedule for fire and disaster drills. -She believed drills were held monthly. Interview on 11/7/24 the Program Supervisor stated: -1st shift - 7am - 7pm and 2nd shift 7pm - 7am. -The facility held a fire drill once monthly. -The facility held a disaster drill each month or once a quarter.	V 114		

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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. This Rule is not met as evidenced by:	V 118		

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V 118	Continued From page 3 Based on record reviews, observations and interviews, the facility failed to administer medications on the written order of a physician and failed to keep the MARs current affecting three of three audited clients (#2, #3). The findings are: Finding #1 Review on 11/7/24 of client #2's record revealed: -17 year old female. -Admitted 9/11/24. -Diagnoses of Post Traumatic Stress Disorder acute, Autistic Disorder and Unspecified Intellectual Disability. -No documentation of a signed physician order for Melatonin 10 milligram (mg) and Ventolin HFA Inhaler. Review on 11/7/24 of client #2's MARs from September 11, 2024 - November 7, 2024 revealed: -Melatonin 10 mg was administered on 11/6/24 Observation on 11/7/24 at approximately 2:30pm of client #2's medications revealed: -Melatonin 10 mg was an over the counter. -Ventolin HFA Inhaler box was empty and was not available for review. Interview on 11/7/24 client #2 stated: -She received her medications daily. -Her medications were always available onsite. Finding #2 Review on 11/7/24 of client #3's record revealed: -12 year old female. -Admitted on 7/24/24. -Diagnoses of Attention-deficit hyperactivity disorder combined type and Post-traumatic stress disorder unspecified.	V 118		

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V 118	Continued From page 4 Observation on 11/7/24 at approximately 2:25 pm of client #3's medications revealed: -Vitafusion Melatonin 10 mg and Allergy Relief 25 mg available for administration. Interview on 11/7/24 client #3 stated: -She took Vyvanse daily. -She received her medications daily. Interview on 11/8/24 the Nurse stated: -Client #2 was prescribed the Ventolin Inhaler and was told by the doctor she could administer it herself. -There was no self-administration order for client #2. -Client #2 lost the Ventolin Inhaler shortly after she was prescribed. -Client #2 received an over the counter Melatonin. -She was in the process of in servicing all staff on medication administration. -She had worked since 9/27/24 and had not seen all physician orders for clients. Interview on 11/7/24 the Program Supervisor stated: -Client #2 "loves" her inhaler and kept her inhaler with her. -He was unsure who prescribed Melatonin to the clients. -He understood all medications should only be administered on a written order of a physician. -He understood a self administration order was needed to any client who self administered a medication and the medication needed to be locked .	V 118		