

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL078-337	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/28/2024
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NAME OF PROVIDER OR SUPPLIER SOUTHEASTERN INTEGRATED CARE, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 465 LONNIE FARM ROAD PEMBROKE, NC 28372
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on October 28, 2024. The complaint was unsubstantiated (intake #NC00222820). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1300 Residential Treatment Facilities for Children & Adolescents</p> <p>This facility is licensed for 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 111	<p>27G .0205 (A-B) Assessment/Treatment/Habilitation Plan</p> <p>10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN</p> <p>(a) An assessment shall be completed for a client, according to governing body policy, prior to the delivery of services, and shall include, but not be limited to:</p> <ol style="list-style-type: none"> (1) the client's presenting problem; (2) the client's needs and strengths; (3) a provisional or admitting diagnosis with an established diagnosis determined within 30 days of admission, except that a client admitted to a detoxification or other 24-hour medical program shall have an established diagnosis upon admission; (4) a pertinent social, family, and medical history; and (5) evaluations or assessments, such as psychiatric, substance abuse, medical, and vocational, as appropriate to the client's needs. <p>(b) When services are provided prior to the establishment and implementation of the treatment/habilitation or service plan, hereafter</p>	V 111	<p>Residential leadership team and residential care staff receive in-person MAR training. Residential staff has recieved code of conduct training on medication and the responsibility of administering medication.</p> <p>To prevent this error leadership has implemented a check in sheet at the beginning of each staff shift to ensure their knowledge of all residents medication that needs to be given that day. As well leadership reviewing camera footage at administering times to ensure cleints are receiving their medication. This will be mointored by the Residnetial House Manager daily and weekly.</p> <p>QA team will condcut quarterly audits to ensure compliance.</p>	

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

Turner Hull QA Director 11/22/2024

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V 111	<p>Continued From page 1</p> <p>referred to as the "plan," strategies to address the client's presenting problem shall be documented.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to provide documentation that an admission assessment was completed prior to the delivery of services for 1 of 3 audited clients (#1). The findings are:</p> <p>Review on 10/25/24 of client #3's record revealed: -14 year old male. -Admitted on 5/16/24. -Diagnoses of Post Traumatic Stress Disorder and Attention Deficit Hyperactivity Disorder. -No documentation of an admission assessment to include the presenting problems, client needs and strengths, provisional or admitting diagnosis, social, family and medical history.</p> <p>Interview on 10/24/24 the Quality Director stated: -The facility had not completed admission assessments. -The facility used the the client Clinical Comprehensive Assessment (CCA) to create the treatment plan. -The facility would update the CCA or use the CCA provided prior to admission.</p>	V 111	<p>Assessment resource, CAFAS was purchased in 9/2024 to conduct within 30 days of clients admission. A CASFAS has been conducted for all current clients on or before 12/1/2024.</p> <p>Operational guideline has been created and implemented that all new clients will receive the CAFAS within 7 days of admissions. This will be monitored by the Clinical Director to ensure compliance within 4 days everytime a new client is admitted.</p>	12/24/24

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V 111	Continued From page 2 Interview on 10/24/24 the Operations Director stated: -There was no admission assessment for client #3.	V 111		
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. 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:	V 114	QA Director has re-trained all leadership staff to ensure fire and dieasater drill competency. To ensure correction that drills are being condcuted quarterly, all leadership will abide by the annual drill schedule. Once drills are condcuted leadership will upload anaylsis to the internal shared drive. QA will monitor monthly to ensure compliance	12/24/24

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V 114	Continued From page 3 Review on 10/24/24 of the facility's records for fire and disaster drills revealed: -No fire drill held on 2nd shift during the 2 quarter of 2024 (April - June). -No disaster drill held on 2nd or 3rd shift during the 2nd quarter. -No fire drill held on 3rd shift during the 3rd quarter of 2024 (July - September). -No disaster drill held on 2nd or 3rd shift during the 3rd quarter. Interview on 10/24/24 the Operations Director stated: -The facility began serving clients in April 2024. -The shifts at the facility were 1st shift 7am - 3pm, 2nd shift 3pm - 11pm and 3rd shift 11pm - 7am.	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	V 118		

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V 118	<p>Continued From page 4</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record reviews 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 (#3, #4, #6). The findings are:</p> <p>Finding #1 Review on 10/25/24 of client #3's record revealed: -14 year old male. -Admitted on 5/16/24. -Diagnoses of Post Traumatic Stress Disorder and Attention Deficit Hyperactivity Disorder (ADHD). -No signed physician orders for Smarty Pants Multivitamin 4 gummies daily (Supplement) and Multivitamins Gummies daily (Supplement) and Melatonin 3 milligram (mg).</p> <p>Review on 10/24/24 and 10/25/24 of client #3's signed physician orders revealed:</p>	V 118	<p>Residential leadership team and residential care staff will receive in-person MAR re-training. Residential staff has recieved a code of conduct training on medication and the responsibility of administering medication.</p> <p>To prevent this error leadership has implemented a check in sheet at the beginning of each staff's shift to ensure their knowledge of all residents medication that needs to be given that day. As well leadership reviewing camera footage at administering times to ensure clients are receiving their medication. This will be mointored by the Residnetial House Manager daily and weekly.</p> <p>QA team will condcut quarterly audits to ensure compliance.</p>	12/24/24
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V 118	<p>Continued From page 5</p> <p>8/13/24 - Melatonin 10 mg at bedtime (sleep).</p> <p>Review on 10/24/24 of client #3's MARs from 8/1/24 - 10/24/24 revealed: -Smarty Pants Multivitamin was administered daily from 8/10/24 - 9/12/24. -Multivitamins Gummies was administered daily from 9/12/24 - 10/9/24. -Melatonin 3 mg was documented as administered from 9/1/24 - 9/30/24.</p> <p>Observation on 10/24/24 at 3:55pm of client #3's medications revealed: -Melatonin 10 mg was not available onsite for review.</p> <p>Interview on 10/25/24 client #3 stated: -He received his medications twice daily.</p> <p>Finding #2 Review on 10/25/24 of client #4's record revealed: -15 year old male. -Admitted on 7/19/24. -Diagnoses of Oppositional Defiant Disorder Mild, ADHD and Major Depression Disorder. -No signed physician orders for Smarty Pants Multivitamin 4 gummies daily (Supplement) and Multivitamins Gummies daily (Supplement).</p> <p>Review on 10/24/24 and 10/25/24 of client #4's signed physician orders revealed: 7/30/24 -Bupropion 150 mg every morning. -Clonidine 0.1 mg every night. 8/22/24 -Amoxicillin 500 mg 3 times daily for 10 days. 9/16/24 -Nystatin 100000 5 milliliter 4 times daily for 10 days.</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>Review on 10/24/24 of client #4's MARs from 8/1/24 - 10/24/24 revealed: -Smarty Pants Multivitamin was administered daily from 8/10/24 - 9/9/24. -Multivitamins Gummies was administered daily from 9/17/24 - 10/9/24. -Bupropion 150 mg was not documented as administered on 9/10/24 and 9/11/24. -Clonidine 0.1 mg was not documented as administered on 9/25/24 and 9/26/24. -Amoxicillin 500 mg was documented as administered 4 times daily on 8/25/24 - 8/29/24. -Nystatin 100000 was documented as administered once daily on 9/17/24, 9/19/24 - 9/22/24 and 9/24/24 - 9/26/24, 3 times on 9/18/24 and twice on 9/23/24. -Clotrimazole was not documented as administered on 9/27/24, 9/28/24(PM).</p> <p>Interview on 10/25/24 client #4 stated: -He received his medications daily. -He took Amoxicillin a while ago. -He was taking a multivitamin but the facility had to get it prescribed by a doctor.</p> <p>Finding #3 Review on 10/25/24 of client #6's record revealed: -13 year old male. -Admitted on 7/24/24. -Diagnoses of Bipolar I Disorder, Conduct Disorder, Oppositional Defiant Disorder. -No signed physician orders for Smarty Pants Multivitamin 4 gummies daily (Supplement) and Multivitamins Gummies daily (Supplement) and Penicillin 500 mg 4 times daily until gone (antibiotic) and Chlorhexidine 0.12% Oral Rinse Rinse Mouth with 15 ml for 30 secs after toothbrushing.</p>	V 118		

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V 118	<p>Continued From page 7</p> <p>Review on 10/24/24 and 10/25/24 of client #6's signed physician orders revealed: 7/24/24 -Divalproex Extended Release 250 mg twice daily. 9/10/24 -Concerta 36 mg daily.</p> <p>Review on 10/24/24 of client #6's MARs from 8/1/24 - 10/24/24 revealed: -Smarty Pants Multivitamin was administered daily from 8/10/24 - 9/9/24. -Multivitamins Gummies was administered daily from 9/11/24 - 10/8/24. -Divalproex Extended Release 250 mg was documented as administered daily from 8/1/24 - 8/31/24. -Concerta 36 mg was not documented as administered on 10/11/24 - 10/14/24. -Penicillin 500 mg was documented as administered on 10/19/24 - 10/24/24. -Chlorhexidine 0.12% Oral Rinse was documented as administered twice daily from 10/19/24 - 10/23/24.</p> <p>Interview on 10/25/24 client #6 stated: -He received his medications daily. -He received some medications at school.</p> <p>Interview on 10/25/24 staff #1 stated: -Client #3's Melatonin 10mg was ordered and waiting to be delivered by the pharmacy. -She believed the client's received their medications as ordered. -The blanks were from staff documentation errors.</p> <p>Interview on 10/24/24 and 10/25/24 the Operations Director stated:</p>	V 118		

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V 118	Continued From page 8 -All the clients were taken a non prescribed Multivitamin. -The Multivitamin was discontinued after learning a prescription was needed. -The facility had not always received physician orders for medications.	V 118		