

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601300</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>01/07/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>ANUVIA PREVENTION AND RECOVERY CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>429 BILLINGSLEY ROAD</b> <b>CHARLOTTE, NC 28211</b>		
(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>INITIAL COMMENTS</p> <p>A complaint and follow up survey was completed on 1-7-25. The complaint was unsubstantiated (#NC00224279). Deficiencies were cited.</p> <p>This facility is licensed for 76 and has a current census of 38. The 27G .3200 Social Setting Detoxification for Substance Abuse has a current census of 12. The 27G .3400 Residential Treatment-Individuals with Substance Abuse Disorders has a current census of 8. The 27G .5600 E Supervised Living for Adults with Substance Abuse Dependency has a current census of 18.</p> <p>The survey sample consisted of audits of 1 current client and 1 former client.</p>	V 000		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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:</p>	V 118		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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V 118	<p>Continued From page 1</p> <p>(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 interview and record review, observation and interviews the facility failed to ensure that medications were only administered by a written order signed by a physician, effecting 1 of 1 current client (Client #1). The findings are:</p> <p>Review on 1-7-25 of Client #2's record revealed: -Admitted 11-3-24. -Diagnoses include: Cocaine Dependence with Withdrawal. Cannabis Use Disorder Moderate, Schizoaffective Disorder, Common Bipolar type, Anxiety Disorder Unspecified.</p> <p>Review on 1-7-25 of Client #2's MAR for January 2025 revealed: -Aripiprazole 20 mg (milligrams) 1 tab daily, Sertraline hcl 100 mg 1 tab daily, Trazadone 50mg 1 tablet PRN (as needed), and Benzotropine Mesylate .5 mg 1 tab 2 times daily.</p> <p>Observation on 1-7-25 at approximate 11:00am</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>of Client #2's medications revealed:</p> <ul style="list-style-type: none"> <li>-Aripiprazole 20 mg (milligrams) 1 tab daily,</li> <li>Sertraline hcl 100 mg 1 tab daily, and Trazadone 50mg 1 tablet PRN (as needed), and</li> <li>Benzotropine Mesylate .5 mg 1 tab 2 times daily.</li> </ul> <p>Review on 1-5-25 of Client #2's Physician's orders revealed:</p> <ul style="list-style-type: none"> <li>-Benzotropine Mesylate .5 mg 1 tab 2 times daily signed 1-3-25.</li> <li>-No orders for the other medications.</li> </ul> <p>Interview on 1-3-25 with Client #2 revealed:</p> <ul style="list-style-type: none"> <li>-She always got her medications and their were no problems with them.</li> </ul> <p>Interview on 1-7-25 with the Quality Director revealed:</p> <ul style="list-style-type: none"> <li>-There is a protocol for insuring that all clients had signed medications orders.</li> <li>-She would make sure that all clients had signed medication orders going forward.</li> </ul> <p>This deficiency constitutes a recited deficiency and must be corrected within 30 days.</p>	V 118		