STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL063-089	A. BUILDING: _____ B. WING _____	R 02/27/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LINDEN LODGE	2251 LINDEN ROAD ABERDEEN, NC 28315

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on February 27, 2025. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness. This facility is licensed for 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.	V 000		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.	V 112		

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V 112	Continued From page 1	V 112		

This Rule is not met as evidenced by:
Based on record reviews and interviews, the facility failed to have an annually updated treatment plan with written consent or agreement by the client or responsible party affecting one of three clients (#2). The findings are:

Review on 2/27/25 of client #2's record revealed:
-Admission dated of 5/10/10.
-Diagnosis of Schizoaffective Disorder, Bipolar Type.
-Treatment plan was last signed on 11/9/22.
-There was not an updated signature or written consent from the guardian or responsible party on client #2's treatment plan.

Interview on 2/27/25 the Executive Director revealed:
-Facility contracted a Qualified Professional to complete the client's treatment plans annually.
-He was completing his Bachelors in Social Work and plan was for him to become the Qualified Professional once he graduated.
-He knew that Client #2's legal guardian and the Qualified Professional had been discussing to update the treatment plan, but was not able to inform on why it was never finalized.
-He acknowledged client #2's treatment plan had not been completed and updated annually.

This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.

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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, observation and interviews, the facility failed to: A) administer medications on the written order of a physician affecting 1 of 3 audited clients (#2) and B) ensure medications were administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person affecting 3 of 3 audited staff (#4, #5 and #6). The findings are: A. Review on 2/27/25 of Client #2's record revealed: -Admisison date of 5/1/10. -Diagnosis of Schizoaffective Disorder, Bipolar Type. -There were no physician orders for: -Mupirocin 2% ointment- Apply to affected area twice a day until healed. -Doxycycline 50 milligrams (mg)- take one tablet daily. Observation on 2/27/25 of Client #2's medications revealed: -Mupirocin 2% ointment was available. -Doxycycline 50 mg was available. Review on 2/27/25 of Client #2's February 2025 MAR revealed: -Mupirocin 2% ointment was marked by staff as administered. -Doxycycline 50 mg was marked by staff as administered. Review on 2/27/25 of www.webmd.com revealed: -Mupirocin 2% ointment was used to treat bacterial skin infections. -Doxycycline was used to treat infections. B. Review on 2/27/25 of Staff #4's personnel	V 118		

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V 118	Continued From page 4 record revealed: -Hire date of 1/21/25. -She was hired as a Executive Director- Direct Support Professional. -There was a certificate dated 1/29/25 from RELIAS- "Managing Medications in AFLs: Helping Self- Administration." -Certificated indicated that it was a 1 hour training. Review on 2/27/25 of Staff #5's personnel record revealed: -Hire date of 6/17/24. -She was hired as a Direct Support Professional. -There was a certificate dated 2/13/25 from RELIAS- "Managing Medications in AFLs: Helping Self- Administration." -Certificated indicated that it was a 1 hour training. Review on 2/27/25 of Staff #6's personnel record revealed: -Hire date of 12/6/23 -She was hired as a Direct Support Professional. -There was a certificate dated 2/13/25 from RELIAS- "Managing Medications in AFLs: Helping Self- Administration." -Certificated indicated that it was a 1 hour training. Interview on 2/27/25 with Staff #4 revealed: -She completed an online "Relias" training when she was first completing her trainings after being hired to work at the facility. -This course was only online. There was not a live instructor. There was also no live observations. -This training was about one hour long. Interview on 2/27/25 with Staff #6 revealed: -She completed the "Relias" online training.	V 118		

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V 118	Continued From page 5 -She did not complete any medications training that involved direct interactions with an instructor nor did it include observations. Interview on 2/27/25 with the Executive Director revealed: -Client #2 had been taken to his doctor by his mother/legal guardian and the scripts were sent directly to his pharmacy. -His mother never brought the scripts to the facility. -He would make sure that all clients' medication scripts were placed in their folder. -He acknowledged Client #'2's medication scripts for Mupirocin 2% ointment and the Doxycycline were not in his record. -Facility staff had always been doing the online Relias training. -He was surprised that it was never noted before about the training not being the correct one that they need to take. -He was not aware that the medication administration training was more complex than the one offered by Relias. -He would let the board know about and contact a trainer to complete the required training.	V 118		