

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL001-165</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>07/23/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>NEW DIMENSIONS INTERVENTIONS, INC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2856 ANDERSON ROAD BURLINGTON, NC 27217</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>An annual survey was completed on July 23, 2025. A deficiency was cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 5 and has a current census of 4. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 121	<p>27G .0209 (F) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(f) Medication review:</p> <p>(1) If the client receives psychotropic drugs, the governing body or operator shall be responsible for obtaining a review of each client's drug regimen at least every six months. The review shall be to be performed by a pharmacist or physician. The on-site manager shall assure that the client's physician is informed of the results of the review when medical intervention is indicated.</p> <p>(2) The findings of the drug regimen review shall be recorded in the client record along with corrective action, if applicable.</p> <p>This Rule is not met as evidenced by: Based on records reviews and interview, the facility failed to obtain drug regimen reviews every six months for 3 of 3 clients (#1, #2 and #3) who received psychotropic drugs. The findings are:</p> <p>Review on 7/22/25 of Client #1's record revealed:</p>	V 121		

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

TITLE

(X6) DATE

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V 121	<p>Continued From page 1</p> <p>-Admission date of 4/5/13.</p> <p>-Diagnoses of Schizoaffective Disorder, Cardiac Murmur, COPD, Asthma, and Peripheral Vascular Disease (PVD)</p> <p>-Physician's order dated 6/12/25 for the following: Invega Trinza 819 milligrams (mg) (Schizophrenia), administer 2.625ml intramuscularly every 90 days Ferrous Sulfate 325mg (Iron), take 1 tablet by mouth once daily Chlorthalid 25mg (Blood pressure), take 1 tablet by mouth once daily Lisinopril 5mg (Blood pressure), take 1 tablet by mouth once daily Aspirin 81mg (Cardiovascular), take 1 tablet by mouth once daily Folic Acid 1000mcg (Anemia), take 1 tablet by mouth once daily Vitamin D2 50000 units, take 1 capsule by mouth once a week Bupropion 150mg (Antidepressant), take 1 tablet by mouth every morning Austedo XR 6mg, take 1 tablet by mouth once daily Divalproex 500mg, take 2 tablets by mouth twice daily Quetiapine 50mg (Antipsychotic), take 1 tablet by mouth at bedtime</p> <p>-Physician's order dated 4/3/25 for the following: Varenicline 1mg (Smoking), take 1 tablet by mouth once daily</p> <p>-Physician's order dated 5/12/25 for the following: Benztropine 0.5mg, take 1 tablet by mouth twice daily</p> <p>-The last time a six month psychotropic drug review was conducted was 12/30/24.</p> <p>-There was no evidence of a current six month psychotropic drug review.</p>	V 121		

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V 121	<p>Continued From page 2</p> <p>Review on 7/22/25 of the May 1, 2025 through July 22, 2025 Medication Administration Record (MAR) revealed:</p> <p>-Staff documented Client #1 was administered the above medication from May 1, 2025 through July 22, 2025.</p> <p>Review on 7/22/25 of Client #2's record revealed:</p> <p>-Admission date of 8/16/17.</p> <p>-Diagnoses of Schizoaffective Disorder, Intellectual Developmental Disability, Mild, Elevated Liver Enzymes.</p> <p>-Physician's order dated 6/12/25 for the following: Invega Trinza 819 milligrams (mg) (Schizophrenia), Inject 819mg once every 90 days Bqostrix Injection, Inject 0.5ml intramuscularly for 1 day Simvastatin 10mg (Cholesterol), take 1 tablet by mouth once daily Trelegy 200/62.5, Inhale 1 inhalation by mouth once daily Olanzapine 15mg (Schizophrenia), take 1 tablet by mouth once daily Sertraline 100mg (Antidepressant), take 1 tablet by mouth once daily Ipratropium, Inhale 1 vital via nebulizer for times daily Divalproex 500mg, take 2 tablets by mouth at bedtime</p> <p>-Physician's order dated 4/7/25 for the following: Vitamin D3 5000 units, take 1 tablet by mouth once daily Vitamin K2 100mcg, take 1 tablet by mouth once daily</p> <p>-The last time a six month psychotropic drug review was conducted was 12/30/24.</p> <p>-There was no evidence of a current six month psychotropic drug review.</p>	V 121		

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V 121	<p>Continued From page 3</p> <p>Review on 7/22/25 of the May 1, 2025 through July 22, 2025 MAR revealed: -Staff documented Client #2 was administered the above medication from May 1, 2025 through July 22, 2025.</p> <p>Review on 7/22/25 of Client #3's record revealed: -Admission date of 7/28/20. -Diagnoses of Schizoaffective Disorder, Mild Intellectual Disability, COPD, and Hypercholesterolemia -Physician's order dated 6/12/25 for the following: Omega-3 1000mg, take 1 capsule by mouth once daily Ketoconazole 2% (Shampoo), use once a day while shampooing hair Haloper Injection 100mg, inject 1 ml intramuscularly every four weeks Clozapine 100mg (Schizophrenia), take 2 ½ tablets by mouth once daily Vitamin D3 5000 units, take 1 tablet by mouth once daily Cetirizine 10mg (Allergies), take 1 tablet by mouth once daily Aspirin 81mg, take 1 tablet by mouth once daily Atorvastatin 20mg (Cholesterol), take 1 tablet by mouth once daily Mbivent Respimat 20-100, inhale 2 puffs by mouth twice daily Benztropine 2mg, take 1 tablet by mouth twice daily Clozapine 100mg (Schizophrenia), take 3 tablets by mouth at bedtime Metoprol Suc 25mg (Blood pressure), take 1 tablet by mouth at bedtime Lithium 300mg, take 2 tablets by mouth at bedtime Haloperidol 5mg (Antipsychotic), take 1 tablet by mouth every evening -The last time a six month psychotropic drug</p>	V 121		

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V 121	<p>Continued From page 4</p> <p>review was conducted was 12/30/24. -There was no evidence of a current six month psychotropic drug review.</p> <p>Review on 7/22/25 of the May 1, 2025 through July 22, 2025 MAR revealed: -Staff documented Client #3 was administered the above medication from May 1, 2025 through July 22, 2025.</p> <p>Interview on 7/22/25 with the Assistant Director revealed: -"The clients missed their pharmacy review appointment due to being out of town on vacation." -"The pharmacy has so many large group homes to complete their medication reviews, it took a while for our group home to get rescheduled." -"All the clients have been rescheduled for August 15, 2025, for their medication review." -She acknowledged the psychotropic drug reviews for clients #1, #2 and #3 had not been conducted every six months.</p>	V 121		