

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL078-317</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/16/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>COMMUNITY OUTREACH YOUTH SERVICES</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>177 CARDINAL AVENUE LUMBERTON, NC 28360</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	INITIAL COMMENTS  An annual and follow up survey was completed on July 16, 2025. Deficiencies were cited.  This facility is licensed for the following service category: 10A NCAC 27G .3400 Residential Treatment-Individuals with Substance Abuse Disorders.  This facility is licensed for 8 and has a current census of 5. 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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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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V 114	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings are:</p> <p>Review on 7/15/25 of the facility's records revealed: -No disaster drill held during 1st shift, 2nd shift or 3rd shift in the 3rd quarter (July - September) of 2024. -No disaster drill held during 1st shift, 2nd shift or 3rd shift in the 4th quarter (October - December) of 2024. -No disaster drill held during 1st shift or 3rd shift in the 1st quarter (January - March) of 2025. -No disaster drill held during 1st shift, 2nd shift or 3rd shift in the 2nd quarter (April - June) of 2024.</p> <p>Interview on 7/15/25 client #1 stated: -He had not participated in any fire or disaster drills.</p> <p>Interview on 7/15/25 client #2 stated: -He had not participated in any fire or disaster drills. -He was told where he needed to go for fire and disaster drills.</p> <p>Interview on 7/15/25 the Licensee/Qualified Professional stated: -Fire and Disaster drills were held monthly on each shift. -The shifts were: 1st - 7am-3pm, 2nd - 3pm-11pm and 3rd - 11pm-8am.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114		

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V 118	Continued From page 2	V 118		
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> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the drug.</p> <p>(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>	V 118		

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V 118	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure medications were 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 for 2 of 3 audited staff (Associate Professional and staff #4). The findings are:</p> <p>Review on 7/15/25 of the Associate Professional's personnel record revealed: -Hire date: 6/17/25. -Job: Associate Professional. -No documentation of a medication administration training.</p> <p>Interview on 7/15/25 the Associate Professional stated: -He had not been trained in medication administration. -He had administered medications.</p> <p>Review on 7/15/25 of staff #4's personnel record revealed: -Hire date: 3/12/24. -Job: Paraprofessional. -No documentation of a medication administration training.</p> <p>Attempted interview on 7/15/25 staff #4 was unavailable for interview.</p> <p>Interview on 7/15/25 the Licensee/Qualified Professional stated: -The Associate Professional and staff #4 had not been trained in medication administration.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		

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V 227	<p>27G .3401 Res. Sub. Abuse - Scope</p> <p>10A NCAC 27G .3401 SCOPE</p> <p>(a) A residential treatment or rehabilitation facility for alcohol or other drug abuse disorders is a 24-hour residential service which provides active treatment and a structured living environment for individuals with substance abuse disorders in a group setting.</p> <p>(b) Individuals must have been detoxified prior to entering the facility.</p> <p>(c) Services include individual, group and family counseling and education.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to meet licensure scope by admitting 3 of 3 audited current clients (#1, #2, #4) without a diagnosis of a substance abuse disorder and not providing substance abuse services. The findings are:</p> <p>Review on 7/15/25 of the Division of Health Service Regulation records revealed: -No evidence of a waiver to serve clients without a substance abuse disorder.</p> <p>Review on 7/15/25 of client #1's record revealed: -15 year old male. -Admitted 3/17/25. -Diagnoses of Major Depressive Disorder, Adjustment Disorder and Attention Deficit/Hyperactivity disorder (ADHD).</p> <p>Interview on 7/15/25 client #1 stated: -"I don't know" what my goals are. -He knows he needs to "be good."</p>	V 227		

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V 227	Continued From page 5  Review on 7/15/25 of client #2 record revealed: -16 year old male. -Admitted 5/13/25. -Diagnoses of Conduct Disorder, ADHD and Cannabis Use Disorder.  Interview on 7/15/25 client #2 stated: -His goals included participating with staff, accepting no and not use from cannabis and nicotine.  Review on 7/15/25 of client #4's record revealed: -16 year old male. -Admitted 2/23/25. -Diagnoses of Disruptive Mood Dysregulation Disorder, ADHD Combined Type and Conduct Disorder.  Interview on 7/15/25 client #4 stated: -I forgot most of his goals. -"I don't think I need goals, I know what I need to do to get out" of the facility.  Interview on 7/15/25 the Licensee/Qualified Professional stated: -The facility was serving clients without substance abuse diagnosis. -One client had substance abuse diagnosis but did not receive substance abuse services. -The facility did not submit a waiver to serve clients without a substance abuse diagnosis.  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 227			
V 228	27G .3402 Res. Sub. Abuse - Staff  10A NCAC 27G .3402 STAFF	V 228			

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V 228	Continued From page 6  (a) Each facility shall have full-time staff as follows: (1) One full-time certified alcoholism, drug abuse or substance abuse counselor for a facility having up to 30 occupied beds, and for every 30 occupied bed increment or portion thereafter. (2) One full-time qualified alcoholism, drug abuse or substance abuse professional as defined in Paragraphs (14), (17) and (19) of 10A NCAC 27G .0104 for facilities having 11 or more occupied beds, and for every additional occupied 10-bed increment or portion thereafter. (3) The remaining full-time staff members required by Subparagraph (a)(1) of this Rule may be either qualified alcoholism, drug abuse, or substance abuse counselors. (b) A minimum of one staff member shall be present in the facility when clients are present in the facility. (c) In facilities that serve minors, a minimum of one staff member for each five or fewer minor clients shall be on duty during waking hours when minor clients are present. (d) Any qualified alcoholism, drug abuse or substance abuse professional who is not certified shall become certified by the North Carolina Substance Abuse Professional Certification Board within 26 months from the date of employment, or from the date an unqualified person meets the requirements to be qualified, whichever is later. (e) Each direct care staff member shall receive annual continuing education to include understanding of the nature of addiction, the withdrawal syndrome, group therapy, and family therapy through in-service training, academic course work, or training approved by the North Carolina Substance Abuse Professional Certification Board.	V 228			

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V 228	<p>Continued From page 7</p> <p>(f) Each direct care staff member in a facility that serves minors shall receive training in youth development and therapeutic techniques in working with youth.</p> <p>(g) Each facility shall have at least one staff member on duty trained in the following areas:</p> <p>(1) alcohol and other drug withdrawal symptoms; and</p> <p>(2) symptoms of secondary complications to alcoholism and drug addiction.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure direct care staff received required annual continuing education to include the nature of addiction, the withdrawal syndrome, group therapy, family therapy, youth development and therapeutic technique for 2 of 3 audited staff (Associate Professional and Staff #4) , The findings are:</p> <p>Review on 7/15/25 of the Associate Professional's personnel record revealed: -Hire date: 6/17/25. -Job: Associate Professional. -No documentation staff #4 received annual education in the nature of addiction, group therapy, family therapy, youth development and therapeutic technique, training in youth development and therapeutic techniques. -No documentation of training in youth development and therapeutic techniques in working with youth. -No documentation of training in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcoholism and drug addiction.</p>	V 228		



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V 228	<p>Continued From page 8</p> <p>Interview on 7/15/25 the Associate Professional stated:</p> <ul style="list-style-type: none"> <li>-He worked at the facility for 2 months.</li> <li>-He worked part of his shift alone.</li> <li>-He had not been trained in the substance abuse training but has read through the substance abuse book.</li> </ul> <p>Review on 7/15/25 of staff #4's personnel record revealed:</p> <ul style="list-style-type: none"> <li>-Hire date: 3/12/24.</li> <li>-Job: Paraprofessional.</li> <li>-No documentation staff #4 received annual education in the nature of addiction, group therapy, family therapy, youth development and therapeutic technique, training in youth development and therapeutic techniques.</li> <li>-No documentation of training in youth development and therapeutic techniques in working with youth.</li> <li>-No documentation of training in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcoholism and drug addiction.</li> </ul> <p>Attempted interview on 7/15/25 staff #4 was unavailable for interview.</p> <p>Interview on 7/15/25 the Licensee/Qualified Professional stated:</p> <ul style="list-style-type: none"> <li>-The facility had a contracted trainer who trained staff.</li> <li>-The facility does not have documentation staff have completed training.</li> </ul> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 228		