

**Statement of Deficiencies
and Plan of Correction**

Inspection begin date 8/15/2012
Inspection end date: 8/15/2012

Name of Provider or Supplier
EXTENDED WELLNESS, LLC

Street Address, City, State Zip Code
604 NORTH BROADFOOT BOULEVARD
VIDALIA, GA 30474

Inspection Results

Z 0000 INITIAL COMMENTS

At the time of the survey, Extended Wellness, LLC. was not in compliance with Chapter 290-9-12, Rules and Regulations for Narcotic Treatment Programs, as a result of the investigation of #GA00116029. The following deficiencies were cited:

Z 0903 290-9-12-.09(4) ADMINISTRATION

Fees. The program shall develop and implement a written schedule of patient fees. The schedule must identify all fees that are chargeable to patients and a copy of the current schedule shall be posted in a conspicuous place so as to inform patients and their parents, guardians, or responsible parties of such schedule of fees.

This Requirement is not met as evidenced by:

Based on review of facility policies and procedures, client records, and staff interviews, it was determined that the facility failed to develop a client fee schedule which describes the type of payment the facility would accepted for three of three sampled clients (#1- #3). Finding were:

A review of the facility policies and procedures on 8/15/2012, revealed that the facility policies and procedures for its facility fee schedule did not state that the clients had to pay the exact cost of services in cash.

A review of client records on 8/15/2012, revealed that all three sample clients did not have any document that the facility would only accept the exact amount for services in cash.

An interview on 8/15/2012 at 9:00 a.m., with the administrator, stated that the facility's bank would not provide change and that the clients needed to make their payments with the exact fee amount in cash.

Z 1100 290-9-12-.11(1) PHYSICAL PLANT AND SAFETY

A program shall be in compliance with all applicable local health, safety, sanitation, building, and zoning requirements.

This Requirement is not met as evidenced by:

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Based on observation, inspection, and interview of the facility on 8/15/2012, it was determined that the facility failed to ensure that used Methadone containers were discarded in a manner that would ensure a safe and sanitary environment for all clients enrolled in the program. Findings were:

An observation of the employee break room 8/15/2012 at 7:45 a.m., revealed a cardboard box that appeared to be used as a trash receptacle with a black garbage bag inside. The garbage bag was observed to contain approximately 100 + stained and used Methadone dispensing containers. Further inspection of the black garbage bag confirmed that the containers were used Methadone dosing containers. The containers were not stored in a red biohazard bag, and still contained residual amounts of Methadone, and labels with patient confidential information on the outside of the containers.

An interview on 8/15/2012 at 7:55 a.m., with the clinical director, confirmed that the above findings were used Methadone containers. The clinical director further stated, "The containers should be rinsed out, and disposed of properly in a red biohazard bag per policy and procedure."

Z 1232 290-9-12-.12(2) PATIENT SCREENING, ASSESSMENT, & ADMISSION

Drug dependent pregnant females must be given priority for admission and services when a program has a waiting list for admissions and it is determined that the health of the mother and unborn child is more endangered than are the health of other patients awaiting services. The program must coordinate the treatment of the pregnant female with appropriate health care providers monitoring the progress of the pregnancy. Pregnancy tests for females must be conducted at admission, unless otherwise indicated.

This Requirement is not met as evidenced by:

Based on observation, a review of facility records, policies and procedures, client and staff interviews, it was determined that the facility failed to coordinate the treatment of one of one sampled pregnant female (client #3), with the appropriate health care providers to monitor the progress of the pregnancy. Findings were:

On 8/15/2012 at 8:20 a.m., an observation in the area where Methadone (a narcotic used for the treatment of Opioid withdrawal symptoms) was being dispensed. Client #3 complained that he/she was having Methadone withdrawal symptoms. Client # 3 asked the nurse if the Methadone was effecting her baby.

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A review of the medical records for client #3 revealed documentation that the client reported her pregnancy to her counselor on 7/13/2012. The record also revealed documentation that the client was seen by the medical director on 8/10/2012.

The facility lacked documented evidence that the program coordinated the treatment of the pregnant patient with appropriate health care providers (OB/GYN provider), to monitor the progress of the pregnancy. No documented evidence that the client was educated on Methadone withdrawal symptoms during pregnancy. There was no documentary evidence in the current treatment plan that addressed the client's pregnancy, treatment goals, or plan of care

An interview was conducted with client #3 on 08/15/2012 at 8:30 a.m. She stated that she was in her third trimester of pregnancy, and was thought that she and her baby was experiencing Methadone withdrawal symptoms. The client also stated that she has reported her concerns of withdrawal to her counselor, and to the medical director with no supportive intervention, education, or increase of dosage provided.

Interview on 8/15/2012 at 9:00 a.m., with the administrator confirmed that the client's record lacked evidence that the 90 day reviews were completed as scheduled and did not address the clients changing needs during her pregnancy.

Z 1302 290-9-12-.13(b) INDIVIDUAL TREATMENT PLAN

In recognition of the varied medical needs of patients, the case history and individual treatment plans must be reviewed at least every 90 days for patients in treatment less than one year and at least annually for patient in treatment more that one year. This review will be conducted by the medical director or program physician along with the primary counselor and other appropriate members of the treatment team for general quality controls and evaluation of the appropriateness of continuing the form of treatment on an on-going basis. This review must also include an assessment of the current dosage and schedule and the rehabilitative progress of the patient, as part of determination of whether additional medical services are indicated. If such review results in a determination that additional or different medical services are indicated, the program must ensure that such services are made available to the patient and appropriate referrals for additional care are made.

This Requirement is not met as evidenced by:

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Based on review of client records and interviews, it was determined that the facility failed to ensure that a 90 day review of the individual treatment plan (ITP) was completed for one of one sampled patients (#3), who were admitted less than one year ago. Findings were:

Review of client #3 records revealed that she was admitted 10/25/2011. The client records lacked documented evidence that ITP's was reviewed within 90 days of admission and were on going. The client's records also failed to show evidence that the facility coordinated the treatment of the pregnant client with the appropriate health care providers to monitor the progress of the pregnancy.

Cross Reference: Z1232 - Failure of the facility to coordinate the health care of a pregnant client with the appropriate healthcare providers.

Z 1500 290-9-12-.15 NARCOTIC DRUGS

Programs shall develop and implement written policies and procedures for prescription and administration of narcotic drugs and their security. ...

This Requirement is not met as evidenced by:

Based on observation, inspection, review of policy and procedure, and interview with the facility clinical director on 8/15/2012, it was determined that the facility failed to ensure a safe and sanitary environment to carry out the provided services. Findings were:

An observation of the employee break room 8/15/2012 at 7:45 a.m. revealed a cardboard box that appeared to be used as a trash receptacle with a black garbage bag inside. The garbage bag was observed to contain approximately 100 + clear bottles with a residual red liquid present inside the bottles. Further inspection of the bottles confirmed that the containers were labeled with dosing information as used methadone treatment bottles.

Review of the facility policy and procedure # 1038 Hazardous Waste Materials outlines, "All returned used medication bottles are rinsed and placed in an appropriate waste receptacle." These bottles are designated per policy and procedure to be disposed of in a safe disposal manner via the facility sharps/non-sharps bio hazardous waste agreement.

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An interview on 8/15/2012 at 7:55 a.m. with the Clinical Director, confirmed the above findings. The clinical director stated, " The containers should be rinsed out, and disposed of properly in a red biohazard bag per policy and procedure."