

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>MHL011-204</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>10/26/2018</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>CUMMINGS COTTAGE</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>2 COMPTON DRIVE<br/>ASHEVILLE, NC 28806</b> |
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| (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><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on 10/26/18. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment Facility.</p>   | V 000         |   |                    |
| V 114              | <p><b>27G .0207 Emergency Plans and Supplies</b></p> <p><b>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</b></p> <p>(a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority.</p> <p>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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 fire emergencies.</p> <p>(d) Each facility shall have basic first aid supplies accessible for use.</p> <p>This Rule is not met as evidenced by:<br/>Based on record review and interviews, the facility failed to hold fire and disaster drills on each shift at least quarterly. The findings are:</p> <p>Review on 10/26/18 of fire and disaster drills from October 2017-September 2018 revealed:<br/>-No documentation of fire drill having been conducted during:<br/>--1st or 2nd shifts from April 2018 through June 2018.</p> | 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>--3rd shift from January 2018 through March 2018.</p> <p>-No documentation of disaster drill having been conducted on:<br/>--3rd shift from January 2018 through March 2018 nor April 2018 through June 2018.</p> <p>Interview on 10/26/18 with the Residential Director revealed:</p> <p>-Disaster drills were conducted campus wide by the maintenance department but each cottage was responsible for recording it in their log books.</p> <p>-Each cottage now had a Cottage Supervisor who was responsible for making sure fire drills were completed.</p> <p>-They now have an administrative staff who will be in charge of seeing that fire and disaster drills are completed as scheduled.</p> | V 114         |   |                    |