If continuation sheet 1 of 2

Division	of Health Service R	egulation			FURIVI A	APPROVEL
STATEMENT OF DEFIDIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED	
	<u> </u>	MHL051-216	B. WING		02/18/2019	
NAME OF I	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY	, STATE, ZIP CODE	200	
RBC HEA	ALTH CARE SOLUTIO	JNO. INC	SSISTER RO AKS, NC 27			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOUNDER OF THE APPRIOR OF THE	JLD BE	(X5) COMPLETE DATE
V 000	INITIAL COMMEN	TS	V 000			
	An annual survey v Deficiencies were o	vas completed on 2/18/19. cited.		RECEIVED  By DHSR - Mental Health Lic. & Cert. Section at 7:45 am, Mark	07, 2019	
	This facility is licent category: 10A NCA Living for Adults wi	sed for the following service C 27G. 5600A Supervised th Mental Illness.				
V 114	27G .0207 Emerge	ency Plans and Supplies	V 114	ORC Healthror	g	
	AND SUPPLIES	207 EMERGENCY PLANS		RBC Healthour Solutions will update The disoster plan disoster plan in posted in the home. Style inmodiate y con a fire and dis		
	(a) A written fire pla	an for each facility and plan shall be developed and	2	at he The		
	shall be approved to	by the appropriate local		upaar	trut	
	authority.	pe made available to all staff		disaster Plan	,	01 1
	and evacuation pro	cedures and routes shall be		i and in Tr	-	3/18/
	posted in the facility	y.		1 CAM	1111	1 1
		er drills in a 24-hour facility st quarterly and shall be		hove, sill		
	repeated for each s	shift. Drills shall be conducted		Immed in 4 Cox	Juch	
	(d) Each facility sha	at simulate fire emergencies. all have basic first aid supplies		L'activity of the	11er	
	accessible for use.			a tire and wis	400	
				quill an dichi	AGACO.	
				lit and Keep!	N G	
	This Rule is not me	et as evidenced by:		Senerale birde	<b>3</b> √ ,	
Based on record re facility failed to con-		eviews and interviews, the aduct fire and disaster drills		State (e	view	
				Work Tarret		
	findings are:	at simulate emergencies. The	1	drill and ducum it and Keeping seperate birds upon futher se shy operations navayer divit several fire drill	> 	
	Peviou on 2/15/10	of the facility's fire dull be		maraner div t	iru .	
	revealed the following	of the facility's fire drill log ing:		se veral fire del	()	
	-6/22/18-3rd shift		1	and disaster di	(1)	
	-1/8/18-1st shift -There were no fire	drills conducted during the		after the survey	cucus :	
ision of He	ealth Service Regulation			)		
SORATORY	DIKECTOR'S OR PROVIE	DER/SUPPLIER REPRESENTATIVE'S SIC	SNATURE	AN CHAINN	<b>う</b> _	(X6) DATE
		, —			- / -	- William

STATE FORM

Division of Health Service Regulation										
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED						
		MHL051-216	B. WING		02/18/2019					
NAME OF F	ROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY,	STATE, ZIP CODE						
RBC HEALTH CARE SOLUTIONS, INC  1335 LASSISTER ROAD FOUR OAKS, NC 27524										
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES  MUST BE PRECEDED BY FULL  SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTI (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	DBE COMPLETE PRIATE DATE					
V 11 <b>4</b>	Continued From pa	ge 1	V 114	complete. Of	in !					
	3rd and 4th quarter of 2018.			were will dien	is were with					
	revealed the follow	umentation staff conducted		complete. Of a owener will discu styll at monthly and remind them the importance of the importance of the importance of	meetyp					
	-She was admitted 2018.	t #1 on 2/15/19 revealed: to the home in November ucted any fire and disaster		Fire and Disale Dulling Support St	epinore					
		t #2 on 2/15/19 revealed: if staff had conducted any fire vith them.		basic fistands	supplies 3/18/4					
	-Staff had conducte them in the past.	t #3 on 2/15/19 revealed: ed fire and disaster drills with had not conducted a drill in		Drilling Support St Will he use coppi basic first and s ove in the home QP and Support Will he responsible for maintersor	p d					
	Interview with the Support Staff on 2/15/19 and 2/18/19 revealed:  -They did not work three separate shifts in the home.  -Staff #1 would sometimes work one continuous shift.  -The Operations Manager would also work several hours in the home.  -He thought staff conducted several drills in 2018.  -He talked to the Operations Manager about the documented drills.  -He could not find the remaining documented fire and disaster drills for 2018.  -He confirmed staff failed to conduct fire and disaster drills under conditions that simulate emergencies.			for many ducine.  Veriency ducine.  Veriency ducine.  Variation of and  remainder of st  re	Jection Justines					