STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL029-103	A. BUILDING: _____ B. WING _____	R 03/13/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DREAM MAKERS ASSISTED LIVING SERVICES, INC	168 ROY LOPP ROAD LEXINGTON, NC 27292

(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 3/13/2019. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction. (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and	V 108		

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V 108	Continued From page 1 clients. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure at least one staff person on duty when clients were present was currently trained in first aid and cardiopulmonary resuscitation (CPR) affecting 2 of 3 audited staff (#2 & the Qualified Professional/President (QP/P)). The findings are: Review on 3/12/2019 of staff #2's employee record revealed: - Hire date: 8/25/2005 - Documentation that training in first aid and CPR had expired on 2/25/2019; - No documentation of recertification training in fist aid or CPR. Review on 3/12/2019 of the QP's employee record revealed: - Hire date: 7/1/2005 - Documentation that training in first aid and CPR had expired on 2/25/2019; - No documentation of recertification training in fist aid or CPR. Interview on 3/11/2019 with staff #2 revealed: - As far as he knew, all of his training was currently up to date. Interview on 3/12/2019 with the QP/P revealed: - He did not realized that his and staff #2's first aid and CPR training certifications were expired; - The Operations Manager was a certified first aid and CPR training;	V 108		

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V 108	Continued From page 2 - He spoke to the Operations Manager and refresher first aid and CPR training would be completed for the QP/P and staff #2 on 3/13/2019.	V 108		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a safe, clean, attractive ad orderly manner. The findings are: Observation at approximately 10:00AM on 3/12/2019 revealed: - The ceiling about the bathtub had a stain/discoloration approximately 8 inches x 6 inches; - The ceiling-mounted ventilation cover in the bathroom had heavy deposits of dust; - The vent return cover and disposable air filter behind the cover were thickly coated with dust; - The side entrance screen door's handle was loose; - Mildew was present across the front of the house's siding and soffit; - Approximately 13 rail spindles were hanging loose on the front porch. Interview on 3/12/2019 with staff #1 revealed:	V 736		

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V 736	Continued From page 3	V 736		

- The side door had been replaced at least three times since October of 2018;
- When repairs were needed, they were usually coordinated by the Qualified Professional/President (QP/P) or the Operations Manager.

Interview on 3/12/2019 with the QP/P revealed:
- The side door had been replaced multiple times due to damage caused by the wind;
- The last time the door was changed, licensed contractors installed it;
- The facility had been pressure washed following the Division of Health Service Regulation (DHSR) Construction Section survey in October of 2018;
- Client #1 had behaviors that included destruction of property;
- The stain on the bathroom ceiling was where the painter had used a different color of paint to cover a patched area of the ceiling drywall;
- The porch rail spindles that were loose were probably caused by client #1 damaging them;
- The QP/P would ensure the house was pressure washed and damages were repaired.

Interview on 3/12/2019 with the Operations Manager revealed:
- Following the deficiencies cited during the DHSR Construction Section biennial survey in October of 2018, all needed repairs were made and the facility was pressure washed;
- Facility staff kept making repairs to the building as they were needed;
- There had not been a water leak in the bathroom that would have caused the stain on the ceiling;
The bathroom ceiling had been painted, but the old stain continued to show through the new paint;
- The facility was pressure washed in October of

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V 736	Continued From page 4 2018 and documentation was sent to the Constructions Section to show that the issue with mildew was resolved; - The side door had just been replaced recently. This deficiency constitutes a re?cited deficiency and must be corrected within 30 days.	V 736		