

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL014-089	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/04/2019
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NAME OF PROVIDER OR SUPPLIER FOOTHILLS REGIONAL TREATMENT CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 2415 MORGANTON BOULEVARD, SUITE 200 LENOIR, NC 28645
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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
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow-up survey was completed on March 4, 2019. A deficiency was cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .3100 Nonhospital Medical Detoxification for Individuals Who Are Substance Abusers 10A NCAC 27G .5000 Facility Based Crisis Service for Individuals of All Disability Groups</p>	V 000	<p style="text-align: center; color: blue;">DHSR - Mental Health</p> <p style="text-align: center; color: red;">MAR 19 2019</p> <p style="text-align: center; color: blue;">Lic. & Cert. Section</p>	
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</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: Based on record review and interviews, the facility failed to hold disaster drills on each shift at least quarterly. The findings are:</p> <p>Review on 3/4/19 of fire and disaster drills for April 2018 through December 2018 revealed:</p>	V 114		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Macey Urwine, MA, LPC

Director

3/18/19

Division of Health Service Regulation

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V 114	<p>Continued From page 1</p> <p>-No documentation of disaster drills having been conducted at all during the 3rd and 4th quarters of 2018.</p> <p>Interview on 3/4/19 with the Nurse Manager who was responsible for safety compliance revealed: -The facility operated two 12 hour shifts every day of the week. -There was miscommunication regarding how often disaster drills should be conducted.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 114	<ol style="list-style-type: none"> 1. Foothills Regional Treatment Center (FRTC) participated in a table top exercise on 10/3/18 "Operation Big Sneeze" which was facilitated by Trent River Safety Plans. FRTC also implemented strategies on 10/9/18 in preparation of potential impact of Hurricane Michael. Documentation of both of these are enclosed for your review. (please see enclosure A&B) 2. A disaster drill for the first quarter of 2019 for each shift has been completed and is enclosed. (please see enclosure C) 3. To ensure completion of ongoing disaster drills a calendar appointment has been developed by the Facility Director and Nurse Manager. Ongoing monitoring will be conducted on a monthly basis by the Safety Committee and quarterly by the QAPI committee. (see enclosure D) 4. To ensure staff are familiar with requirements of all drills for licensed facilities, an in service was completed using 10A NCAC 27G.0207. (see enclosure E) 	<p>Safety Manual updated 3/13/19</p> <p>3/12/19</p> <p>Calendar created 3/12/19</p> <p>Inservice held 3/12/19 & 3/18/19</p>

TRENT RIVER SAFETY PLANS CERTIFICATE OF ATTENDANCE

THIS CERTIFIES THAT

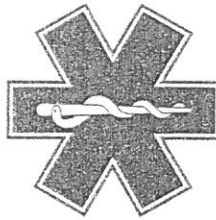
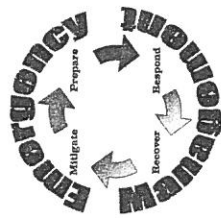


COMPLETED:

RHA HEALTH SERVICES TABLETOP EXERCISE OPERATION BIG SNEEZE

HOURS: 3.0

DATE: 3 October 2018



Enclosure A



OPERATION BIG SNEEZE

AFTER ACTION REPORT

TRENT RIVER SAFETY PLANS

October 3, 2018

Enclosure A

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Executive Summary

In response to the September 16, 2016 final rule on Emergency Preparedness for Medicare and Medicaid Participating Providers and Suppliers regarding emergency exercises and drills RHA Health Services, LLC contracted with Trent River Safety Plans to plan and facilitate a series of tabletop exercises to comply with this ruling.

On October 3, 2018, administrators and selected staff gathered in Asheville, North Carolina for the purpose of participating in a tabletop exercise. The scenario, conditions, and participants were not disclosed to attendees until the scenario developed.

The scenario was divided into multiple modules, including review, and was a plausible event that might impact the facilities and staffs represented. The drill was based on response to a worldwide pandemic of an influenza strain named H5 N3. The scenario purposely was designed to require involved staff to reach beyond normal day to day operations to respond to community needs during adverse and extreme conditions. The presented scenario was based on actual projections as issued by the United States Centers for Disease Control.

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EXERCISE OVERVIEW

Exercise Name

Operation Big Sneeze

Exercise Date & Location

October 3, 2018

Holiday Inn and Suites

Hendersonville Road

Asheville, North Carolina

Scope of Exercise

The exercise was a discussion based tabletop exercise, the exercise lasted 2 hours and 35 minutes. Participants were limited to stated exercise limitations.

Mission Areas

Planning, Response, and Recovery (limited)

Core Capabilities

Recognition of the developing crisis

Roles of organization in a larger health care community

Implementation of appropriate emergency plans

Response procedures

Communication issues

Exercise Objectives

Exercise design objectives focused on location response. The objectives were as follows:

1. Examine the ability of the location staff to recognize the scope of the emergency and implement appropriate pre-existing plan components.
2. Examine the ability of the location's staff to respond to an evolving scenario.
3. Evaluate the location's recovery actions.

Threat/Hazard

A worldwide pandemic outbreak of a Novel Influenza virus

Scenario

See attached

Exercise Sponsor

RHA Health Services, LLC

Participants

Planner and Facilitator: Mark Dail, Trent River Safety Plans

Players: Administrators and selected staff from RHA Behavioral Health locations

EVALUATION

The exercise was evaluated at the conclusion using the attached Assessment of Exercise Design and Conduct. This instrument provided for a ranking from 1 (Strongly Disagree) to 5 (Strongly Agree) on selected critical points. Each point is listed below with the overall average rating of each. Most players turned in an evaluation, n=20.

1. "The exercise was well structured and organized."
4.65 rating
2. "The exercise scenario was plausible and realistic."
4.70 rating
3. "The facilitator was knowledgeable about the material, kept the exercise on target, and was sensitive to group dynamics."
4.75 rating
4. "The Situation Manual used during the exercise was a valuable tool throughout the exercise."
4.40 rating
5. "Participation was appropriate for someone in my position."
4.70 rating
6. "The participants included the right people in terms of level and mix of disciplines."
4.60 rating
7. "The exercise was a valuable way to identify strengths and areas for improvement for local organizations' response operations."
4.70 rating

ADDITIONAL COMMENTS FROM EVALUATION SHEETS

Provided Prompt:

What changes would you make to this exercise? Please provide any recommendations on how this exercise or future exercises could be improved or enhanced.

- “Thought exercise was informative, provoked thought and was appropriate for this group.”
- “I believed that the exercise was informative and challenged your thinking.”
- “Great exercise and discussion. Facilitator provided feedback that was relevant.”
- “offer to a wider variety of staff-offer multiple sessions.”
- “informative and thought provoking”
- “This training/exercise definitely starts the process of thinking about our current protocols.”

FACILITATOR EVALUATION

Overall the exercise ran smoothly and was completed in the time allotted. All players appeared to be engaged and on task. Comments made during the module discussions were appropriate and professional. Average group dynamics were observed as typically one person in each group emerged as group leader and spokesperson.

This scenario was different in that it was global in nature and the event lasted a period of months rather than hours. The players were tasked with the mission of how their agency may be involved at the community level in time of a global crisis. The table groups were creative and thorough in their solutions to the presented crisis. Players were able to plan not only for the community issues but also the needs of their own staff.

It was interesting to note that many players thought the needed preparations for such an event were covered, but found that since a pandemic will be a long term event that other steps must be taken.

The usual issue of communication was brought up in all of its usual forms. Contact with staff, clients, and the community may be a challenge and this was recognized by the players.

NEXT STEPS

With an exercise of this type it is anticipated that the involved staff will return to their local operating locations with questions not only for their staff but also for local community health partners as to how RHA may be involved in a pandemic situation. Many players were not aware of a corporate plan for pandemic emergencies and how to prepare for and implement such a plan.

It is also recommended that pandemic preparedness plans at the corporate level be reviewed and updated to comply with latest guidance from the Centers for Disease Control and the World Health Organization.

OPERATION: BIG SNEEZE

A community Behavioral Health Organization Tabletop Exercise

THE BACKGROUND INFORMATION

Your organization is well respected in your area as a provider of community mental health services and for your ability to provide mobile mental health crisis management. As a result, your agency has been asked to serve as member of a local health services group to plan for and deal with an expected influenza pandemic.

“I doubt it will be a problem here, but let’s meet and talk about it anyway.”

Joe Headindsand, Local Health Director

September 1

CNN reports that there has been an unusual spike in influenza cases in the area around Hong Kong recently. Health officials say this is a novel strain of influenza, (H5 N3), not seen before in humans, but present in local geese and ducks. The virus has apparently mutated to become communicable to humans and appears to spread rapidly. The US CDC issues an advisory alert to all health agencies to prepare for the possible spread of this type of flu to North America.

The local group meets and your agency is asked whether or not your agency has an internal pre-plan to deal with a pandemic?

Do you?

Enclosure A

OPERATION: BIG SNEEZE

October 1

The virus has spread through Canada and now becoming a major issue in the United States. The CDC predicts that the United States will experience a 30% average community disease rate and worker absenteeism rates of 40% or greater. The mortality rate may reach 25% for the general population and 50% for at-risk populations. The local group meets again to discuss the problem and you return to your agency with the following questions.

1. Do we have protocols to deal with sick or potentially infectious service users?
2. Do we have procedures for our staff to follow with regard to PPE, infection control, coming to work sick or if members of household are sick?
 - Do we have the supplies on hand to carry out the above?
 - Are there alternative ways to meet our service user demands?
3. Is there a Business Continuity of Operations plan?
 - Who backs up who?
 - At what point can we no longer function?
4. Are we prepared to shed non-essential duties to meet the demands of the pandemic?

OCTOBER 31

The pandemic is now nationwide and has hit your community hard. Local steps have been taken to try to slow the spread of the disease.

- Social distancing is encouraged, Halloween is cancelled nationwide
- Public schools are closed, however a local private school refuses to close for religious reasons.
- Most churches are cancelling services
- There is a push for everyone to receive the seasonal influenza vaccine to help prevent the normal H1N1 from spreading, even though it is ineffective against H5N3.

In addition, the following is happening in your area:

- All local hospitals are over filled
- All residential facilities are quarantined
- There are no available ventilators
- Anti-virals such as Tamiflu are being strictly rationed to health care providers, essential service workers, and previously young, healthy individuals
- Break ins are occurring at local pharmacies as people look for anti-virals
- Some grocery stores are reporting spot outages of essential products as deliveries are impacted by sick employees elsewhere

In Your Facility

- 1/3 of your staff are out with the flu on this date with the latest one going home sick from a staff meeting yesterday.
- 2 of your staff have had deaths in the immediate family from the flu

Enclosure A

1. The big question is: Can we continue to operate and service our clients with traditional methods?
2. What might be alternatives?
3. The local health services director tasks your facility with developing a "Crisis Response" mental health plan for the community. What areas should you be prepared to address?
4. Requests for service double, what means do you have to triage clients?
5. One area of concern is grief counseling with the added problem of funeral homes not being able to, or willing to handle flu victim bodies. Families are being asked to drop bodies off at a refrigerated truck at the hospital. Emotional breakdowns are a big problem, how could set up a drive thru service?
6. If your facility is residential, you have been ordered to house overflow flu patients and must relocate your current residents? How? Where?

DECEMBER 1

The first and second wave of the pandemic have passed in your area and things are now slowly coming back to normal. You lost 3 staff members from the flu and one from suicide due to the stress. The remaining staff is physically and mentally exhausted. What sort of issues must you face to help your staff while still serving the community?

Schools are attempting to reopen with as much as a 10% drop in enrollment at each school due to deaths.

Parents are scared to send their children back to school and there are numerous calls for mobile crisis care to respond to the schools? What issues might you face in these cases?

Contact has been lost from several clients, how is this going to be managed?

What preventative steps can be taken to minimize a second outbreak at your facility?

Enclosure A



SHELTER IN PLACE DISASTER DRILL

(To be conducted monthly, alternating types of drill each month)

Shelter-in-Place procedures assume that the safest place for individuals during an emergency is inside their home or a building. However, in a real emergency, everyone should monitor radio or TV broadcasts and follow the instructions of Emergency Management officials. If re-location is advised, see the instructions in Section 700 of the RHA Safety and Health Manual.

Check type of drill conducted: Tornado Snow/Ice Thunderstorm/Lightning Flooding Hurricane

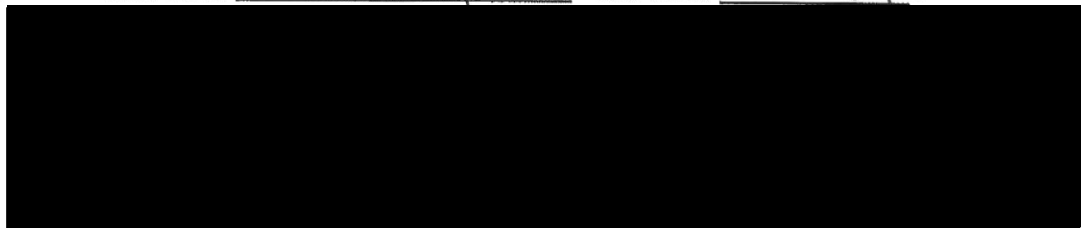
Other: _____
(Refer to the back of this form for guidelines on conducting drills)

Facility: 1083 Date: 10/9/18

Name of Residence or Voc. Center where disaster drill was conducted: FRTC

Shift 1 Shift 2 Shift 3 Start Time: 3:45 pm End Time: 4:00 pm

Names of Persons on Duty:



Number of People Supported at Location: 11 Number of People Supported Absent: 0

- Was head count taken of staff and people supported? Yes No
- Was appropriate section of Safety Manual reviewed with staff? Yes No
- Were emergency supply of food and water located? Yes No
- Were emergency items (flashlights, weatherband radio, etc.) located? Yes No
- Did staff know where emergency items are located? Yes No
- Were windows closed and exterior doors locked? Yes No
- Was heating/air conditioning unit(s) turned off? Yes No
- Was exercise of procedure satisfactory? Yes No

Procedure(s) needing improvement: 1. Continued practice
(Use back of page if necessary.) 2. emergency supply prep

Action Plan for correcting procedure: 1. Continue practicing monthly drills
2. Keep better emergency supply stock

Signature of person conducting drill: Dasha Smith LPC, LCAS, CSI
Check shift

Print Name: Dasha Smith LPC, LCAS, CSI Date: 10/9/18

Enclosure B pg 1

15 Code Green: Hurricane

Utilize the following procedures in the event of a hurricane watch and/or warning:

#	Action	Completed
1	Have a portable NOAA Weather Radio available and make sure extra batteries are available.	✓
2	Keep informed of all area weather bulletins. Monitor local radio and television stations for updates.	✓
3	HURRICANE WATCH An announcement from the National Hurricane Center that a hurricane is possible within 36 hours. Stay tuned for additional advisories.	✓
4	HURRICANE WARNING A hurricane is expected to strike land, conditions are considered imminent and effects may begin to be felt immediately with rapid strengthening expected over the next 12 to 24 hours bringing: <ul style="list-style-type: none"> • Sustained winds of 74 mph or higher • Torrential rain fall which will cause flooding • Storm surge, rising tidal sea levels of more than 10 feet above normal conditions. 	✓
5	The most qualified staff member on duty will assume the Incident Commander position.	✓
6	Keep NOAA Weather Radio, commercial radios or televisions turned on and listen for the latest advisories.	✓
7	Contact County Emergency Manager and Director/Administrators 754-610-7209 Cell for updates and to discuss best available options. <i>Butch Jordan</i>	✓
8	Keep staff members advised about location, direction and progress of the storm.	✓
9	Review Evacuation and Shelter-in-Place procedures with staff.	✓
10	Alert relocation site(s), transportation providers and vendors of the potential need for evacuation.	✓
11	Establish a list of staff members (on and off duty) who are willing to evacuate with the residents. Have them begin making preparations for evacuating.	✓
12	Contact family members/responsible parties to notify them of the potential threat from the approaching storm. Determine if they plan to take their residents home during the storm. Compile a list of those who are and begin preparing for their departure.	✓
13	Fill the fuel tank on the facility's vehicle. Encourage staff to do the same for their personal vehicles.	✓
14	When or if the forecast projects the storm's 4 to 5 day path (commonly referred to as the "cone") near your area, increase the level of preparedness and begin to take additional measures.	✓
15	Secure outdoor objects such as garbage cans, bird houses/feeders, outdoor furniture, etc., to prevent them from becoming missiles in high winds.	✓
16	Cancel all outside activities and restrict admissions.	✓

17	Continue to monitor storm updates and stay in contact with the County Emergency Management Office and the Director - Tracy Harris for recommendations concerning evacuation.	✓
18	Based on current storm path predictions and storm strength estimates, decide whether to evacuate or shelter-in-place. Keep in mind that evacuation procedures must be completed before tropical force winds arrive in the area. The estimated time for evacuation must include loading time, driving distance, as well as traffic conditions and any estimate should be multiplied times three to account for these and other factors.	N/A
19	Contact County Emergency Manager, DSS, DHSR, and Director/Administrator - Tracy Harris Jordan .. notify them of the decision to evacuate or shelter-in-place.	N/A
20	Depending on the decision, switch to either the Evacuation or Shelter-in-Place checklist:	N/A



SHELTER IN PLACE DISASTER DRILL

(To be conducted monthly, alternating types of drill each month)

Shelter-in-Place procedures assume that the safest place for individuals during an emergency is inside their home or a building. However, in a real emergency, everyone should monitor radio or TV broadcasts and follow the instructions of Emergency Management officials. If re-location is advised, see the instructions in Section 700 of the RHA Safety and Health Manual.


Check type of drill conducted: Tornado Snow/Ice Thunderstorm/Lightning Flooding Hurricane

Other: _____
(Refer to the back of this form for guidelines on conducting drills)

Facility: 1083 - FRTC Date: 3-6-19

Name of Residence or Voc. Center where disaster drill was conducted: FRTC

Shift 1 Shift 2 Shift 3 Start Time: 3:00 pm End Time: 3:30 pm

Names of Persons on Duty: 

Number of People Supported at Location: 12 Number of People Supported Absent: 0

- Was head count taken of staff and people supported? Yes No
- Was appropriate section of Safety Manual reviewed with staff? Yes No
- Were emergency supply of food and water located? Yes No
- Were emergency items (flashlights, weatherband radio, etc.) located? Yes No
- Did staff know where emergency items are located? Yes No
- Were windows closed and exterior doors locked? Yes No
- Was heating/air conditioning unit(s) turned off? Yes No
- Was exercise of procedure satisfactory? Yes No

Procedure(s) needing improvement: 1. Practice of Drill as monthly practice
(Use back of page if necessary.) 2. _____

Action Plan for correcting procedure: 1. Continue to practice Monthly
2. _____

Signature of person conducting drill: Osha Smith LPC, LCAS, CSI

Check shift

Print Name: Osha Smith LPC, LCAS, CSI Date: 3/6/19

Enclosure C P.1

13 Code Green Tornado

~~Tornado~~
Tornado Drill 3/6/19

Utilize the following procedures in the event of a tornado watch and/or warning:

#	Action	Completed
1	Keep informed of all area weather bulletins. Monitor local radio and television stations for updates.	✓
2	Have a portable NOAA Weather Radio available and make sure extra batteries are available. Batteries deplete quickly when being used in cold environments.	✓
3	TORNADO WATCH Issued when weather conditions in your area favorable to the development of tornadoes. Be prepared to act quickly.	✓
EMERGENCY ACTIONS WHEN A TORNADO WATCH IS ISSUED		
4	The most qualified staff member on duty will assume the <i>Incident Commander</i> position.	✓
5	The following announcement shall be passed over the facility's overhead paging/intercom system to alert all employees: "Code GREEN... a tornado watch has been issued for this area effective until 2:15 (time watch ends). A tornado watch means that current weather conditions may produce a tornado. Please close all draperies and blinds throughout the facility and await further instructions. Please continue with your regular activities."	✓
6	The above message should be repeated again after five (5) minutes and then hourly until the watch has ended.	✓
7	Keep NOAA Weather Radio, commercial radios or televisions turned on and listen for the latest advisories.	✓
8	Notify the Administrator if not already on the premises.	✓
9	Contact the Director – Tracey Irvine 828-610-7209, Call as soon as practical.	✓
10	Keep staff members advised about location, direction and progress of the storms.	✓
11	Review the tornado warning procedures with staff.	✓
12	When or if the storm begins to approach the vicinity of the community, increase level of preparedness and begin to take additional measures.	✓
13	Close windows and pull curtains in all areas of the long term care facility.	✓
14	Secure outdoor objects such as garbage cans, bird houses/feeders, outdoor furniture, etc., to prevent them from becoming missiles in high winds.	✓

15	Distribute flashlights, towels, pillows and blankets to residents, staff and visitors.	✓
16	Begin movement of selected residents into hallways and/or ground floor.	✓
17	Shut off lights and close doors to unoccupied rooms and service areas.	✓
18	Once the Tornado Watch has been cancelled and the Incident Commander has determined the dangerous situation has passed an "ALL CLEAR" announcement shall be delivered over the facility's intercom/loudspeaker.	✓
19	Account for ALL residents and staff members	✓
20	TORNADO WARNING A tornado has been sighted in the area, or indicated on radar. IMMEDIATELY Implement emergency shelter actions for residents, visitors and staff!	N/A
EMERGENCY ACTIONS WHEN A TORNADO WARNING IS ISSUED		
21	The most qualified staff member on duty will assume the <i>Incident Commander</i> position.	✓
22	Seek shelter immediately!	✓
23	The following announcement shall be passed over the facility's overhead paging/intercom system to alert all employees: "Code GREEN... a tornado warning has been issued for our area. Immediately implement emergency shelter actions and take cover. Repeating - a tornado warning has been issued for our area. Immediately implement emergency shelter actions and take cover."	✓
24	The above message should be repeated again after five (5) minutes and then hourly until the watch has ended.	✓
25	Notify the Administrator if not already on the premises.	✓
26	Contact the Director/Administrator – Tracey Irvine 828-610-7209, Cell as soon as practical.	✓
27	Clear all large rooms (dining room, activities room, etc.) of residents, visitors and staff personnel.	✓
28	Move residents into hallways and/or first floor of the facility and away from windows and outside walls. Small rooms or interior hallways away from doors and windows are suitable for taking cover in a situation where an immediate threat is present. If the hallway has a door or window at the end of the corridor, all persons must be kept at a distance of at least thirty feet (30') away.	✓
29	If time permits and possible, move comfortable chairs from rooms into the hallway so residents can sit. Furnish a pillow and blanket so the residents feel more secure. (They will also provide some protection from small flying debris in case of damage to the facility).	✓
30	Close doors to resident rooms.	✓
31	Shut off lights and close doors to unoccupied rooms and service areas.	✓

32	Close fire doors to form a protective envelope in the hallway for residents, visitors and staff.	✓
33	Assign staff members to each hallway.	✓
34	Keep NOAA Weather Radio, commercial radios or televisions turned on and listen for the latest advisories.	✓
35	Keep staff members advised about location, direction and progress of the storms.	✓
36	Once the Tornado Watch has been cancelled and the Incident Commander has determined the dangerous situation has passed an "ALL CLEAR" announcement shall be delivered over the facility's intercom/loudspeaker.	✓
37	Account for ALL residents and staff members	✓
AFTER THE TORNADO HAS PASSED		
38	Restore calm to the residents.	✓
39	Render first aid to residents and staff as necessary.	
40	CALL 911 if necessary.	N/A
41	Account for ALL residents and staff members.	✓
42	Inspect the facility inside and out for any damage.	N/A
43	Shut off damaged or potentially damaged utilities.	
44	Re-establish contact with the Director – Tracey Irvine 828-610-7209, Cell and provide an update on the condition of residents, staff and the facility.	
45	If necessary, activate the Staff Recall Roster (Phone Tree).	
46	Stay in contact with the County Emergency Management Office for recommendations concerning evacuation. If conditions warrant, or the situation is expected to deteriorate to the point where resident safety and welfare are threatened then the decision to evacuate must be made.	
47	If the decision to evacuate is made, switch to the <i>Emergency Evacuation Procedures Checklist</i> .	
48	Once the Tornado Warning has been cancelled and the Incident Commander has determined the dangerous situation has passed an "ALL CLEAR" announcement shall be delivered over the facility's intercom/loudspeaker.	✓



SHELTER IN PLACE DISASTER DRILL

(To be conducted monthly, alternating types of drill each month)

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Check type of drill conducted: Tornado Snow/Ice Thunderstorm/Lightning Flooding Hurricane

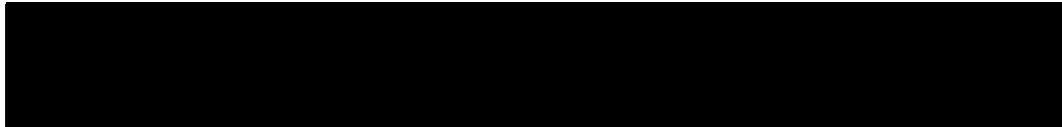
Other: _____

(Refer to the back of this form for guidelines on conducting drills)

Facility: 683-FRTC Date: 3-12-19

Name of Residence or Voc. Center where disaster drill was conducted: FRTC

Shift 1 Shift 2 Shift 3 Start Time: 8:45 am End Time: 9:15 pm

Names of Persons on Duty: 

Number of People Supported at Location: 9 Number of People Supported Absent: 0

- Was head count taken of staff and people supported? Yes No
- Was appropriate section of Safety Manual reviewed with staff? Yes No
- Were emergency supply of food and water located? Yes No
- Were emergency items (flashlights, weatherband radio, etc.) located? Yes No
- Did staff know where emergency items are located? Yes No
- Were windows closed and exterior doors locked? Yes No
- Was heating/air conditioning unit(s) turned off? Yes No
- Was exercise of procedure satisfactory? Yes No

Procedure(s) needing improvement: 1. practice of Drill as Monthly Practice
(Use back of page if necessary.) 2. _____

Action Plan for correcting procedure: 1. Continue to practice Monthly
2. _____

Signature of person conducting drill: Kara Warlick CPSS
Check shift

Print Name: Kara Warlick CPSS Date: 3-12-19

13 Code Green Tornado

Utilize the following procedures in the event of a tornado watch and/or warning:

#	Action	Completed
1	Keep informed of all area weather bulletins. Monitor local radio and television stations for updates.	✓
2	Have a portable NOAA Weather Radio available and make sure extra batteries are available. Batteries deplete quickly when being used in cold environments.	✓
3	TORNADO WATCH Issued when weather conditions in your area favorable to the development of tornadoes. Be prepared to act quickly.	✓
	EMERGENCY ACTIONS WHEN A TORNADO WATCH IS ISSUED	✓
4	The most qualified staff member on duty will assume the Incident Commander position.	✓
5	The following announcement shall be passed over the facility's overhead paging/intercom system to alert all employees: "Code GREEN...a tornado watch has been issued for this area effective until _____ (time watch ends). A tornado watch means that current weather conditions may produce a tornado. Please close all draperies and blinds throughout the facility and await further instructions. Please continue with your regular activities."	✓
6	The above message should be repeated again after five (5) minutes and then hourly until the watch has ended.	✓
7	Keep NOAA Weather Radio, commercial radios or televisions turned on and listen for the latest advisories.	✓
8	Notify the Administrator if not already on the premises.	✓
9	Contact the Director – Tracey Irvine 828-610-7209, Call as soon as practical.	✓
10	Keep staff members advised about location, direction and progress of the storms.	✓
11	Review the tornado warning procedures with staff.	✓
12	When or if the storm begins to approach the vicinity of the community, increase level of preparedness and begin to take additional measures.	✓
13	Close windows and pull curtains in all areas of the long term care facility.	✓
14	Secure outdoor objects such as garbage cans, bird houses/feeders, outdoor furniture, etc., to prevent them from becoming missiles in high winds.	✓

15	Distribute flashlights, towels, pillows and blankets to residents, staff and visitors.	✓
16	Begin movement of selected residents into hallways and/or ground floor.	✓
17	Shut off lights and close doors to unoccupied rooms and service areas.	✓
18	Once the Tornado Watch has been cancelled and the Incident Commander has determined the dangerous situation has passed an "ALL CLEAR" announcement shall be delivered over the facility's intercom/loudspeaker.	✓
19	Account for ALL residents and staff members	✓
20	TORNADO WARNING A tornado has been sighted in the area, or indicated on radar. IMMEDIATELY implement emergency shelter actions for residents, visitors and staff!	N/A
EMERGENCY ACTIONS WHEN A TORNADO WARNING IS ISSUED		
21	The most qualified staff member on duty will assume the Incident Commander position.	✓
22	Seek shelter immediately!	✓
23	The following announcement shall be passed over the facility's overhead paging/intercom system to alert all employees: "Code GREEN... a tornado warning has been issued for our area. Immediately implement emergency shelter actions and take cover. Repeating - a tornado warning has been issued for our area. Immediately implement emergency shelter actions and take cover."	✓
24	The above message should be repeated again after five (5) minutes and then hourly until the watch has ended.	✓
25	Notify the Administrator if not already on the premises.	✓
26	Contact the Director/Administrator – Tracey Irvine 828-610-7209, Call as soon as practical.	✓
27	Clear all large rooms (dining room, activities room, etc.) of residents, visitors and staff personnel.	✓
28	Move residents into hallways and/or first floor of the facility and away from windows and outside walls. Small rooms or interior hallways away from doors and windows are suitable for taking cover in a situation where an immediate threat is present. If the hallway has a door or window at the end of the corridor, all persons must be kept at a distance of at least thirty feet (30') away.	✓
29	If time permits and possible, move comfortable chairs from rooms into the hallway so residents can sit. Furnish a pillow and blanket so the residents feel more secure. (They will also provide some protection from small flying debris in case of damage to the facility).	✓
30	Close doors to resident rooms.	✓
31	Shut off lights and close doors to unoccupied rooms and service areas.	✓

32	Close fire doors to form a protective envelope in the hallway for residents, visitors and staff.	✓
33	Assign staff members to each hallway.	✓
34	Keep NOAA Weather Radio, commercial radios or televisions turned on and listen for the latest advisories.	✓
35	Keep staff members advised about location, direction and progress of the storms.	✓
36	Once the Tornado Watch has been cancelled and the Incident Commander has determined the dangerous situation has passed an "ALL CLEAR" announcement shall be delivered over the facility's intercom/loudspeaker.	✓
37	Account for ALL residents and staff members	✓
AFTER THE TORNADO HAS PASSED		
38	Restore calm to the residents.	✓
39	Render first aid to residents and staff as necessary.	✓
40	CALL 911 if necessary.	✓
41	Account for ALL residents and staff members.	✓
42	Inspect the facility inside and out for any damage.	✓
43	Shut off damaged or potentially damaged utilities.	✓
44	Re-establish contact with the Director - Tracey Irvine 828-610-7209, Cell and provide an update on the condition of residents, staff and the facility.	✓
45	If necessary, activate the Staff Recall Roster (Phone Tree).	✓
46	Stay in contact with the County Emergency Management Office for recommendations concerning evacuation. If conditions warrant, or the situation is expected to deteriorate to the point where resident safety and welfare are threatened then the decision to evacuate must be made.	✓
47	If the decision to evacuate is made, switch to the <i>Emergency Evacuation Procedures Checklist</i> .	✓
48	Once the Tornado Warning has been cancelled and the Incident Commander has determined the dangerous situation has passed an "ALL CLEAR" announcement shall be delivered over the facility's intercom/loudspeaker.	✓

Tracey Irvine

Subject: FRTC Monthly Night Shift Fire and Disaster Drill
Location: FRTC

Start: Mon 4/8/2019 9:00 PM
End: Mon 4/8/2019 9:30 PM

Recurrence: Monthly
Recurrence Pattern: the second Monday of every 1 month(s) from 9:00 PM to 9:30 PM

Meeting Status: Accepted

Organizer: Angela Norville
Required Attendees: [REDACTED]

Osha to invite Peers/Specialists after their schedules are created.

Tracey Irvine

Subject: FRTC Monthly Fire and Disaster Drill
Location: FRTC

Start: Tue 4/9/2019 2:00 PM
End: Tue 4/9/2019 2:30 PM

Recurrence: Monthly
Recurrence Pattern: the second Tuesday of every 1 month(s) from 2:00 PM to 2:30 PM

Meeting Status: Accepted

Organizer: Angela Norville
Required Attendees: [REDACTED]

Osha to invite Peers/Specialists as their schedules are created.



RHA BEHAVIORAL HEALTH SERVICES Clinical Supervision

Clinical Supervisor: Osha Smith LPC, LCAS, CSI

Type: Group Individual

Date: 3/12/19

Time: 5:00 to 6:00

Service: CPSS/FBC Specialist Location: FBC

Clinical Supervisor Signature: Osha Smith LPC, LCAS, CSI

Supervisees	
Name	Signature
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	

Topic (Please check all that apply)			
<input type="checkbox"/> Service Definition	<input type="checkbox"/> Diagnosis	<input type="checkbox"/> Symptoms	<input type="checkbox"/> Crisis
<input type="checkbox"/> Psychopharmacology	<input type="checkbox"/> Case Review	<input type="checkbox"/> Ethics	<input type="checkbox"/> Community
<input type="checkbox"/> Recovery Model	<input type="checkbox"/> Boundaries	<input type="checkbox"/> Transference	<input type="checkbox"/> Team Building
<input type="checkbox"/> Stress Management	<input type="checkbox"/> Documentation	<input type="checkbox"/> Intervention	<input type="checkbox"/> Skill Building
<input type="checkbox"/> Community Resource	<input type="checkbox"/> Legal Issues	<input type="checkbox"/> Substance Abuse Specific:	
<input type="checkbox"/> Assessment/Referral	<input type="checkbox"/> Level of Care	<input type="checkbox"/> Efficacy of Service	
<input type="checkbox"/> Risk Factors	<input type="checkbox"/> Culture	<input type="checkbox"/> EBP/Fidelity	
<input checked="" type="checkbox"/> Other: <u>Fire & Disaster Drills: 10A NCAC 27B.0201</u>		<input type="checkbox"/> Other:	

Comments (Discussion and recommendation summary): Review policy/procedure regarding Fire Drills & Disaster Drills to complete an fm service.

Follow-up/Action Needed (if any): _____

Fire and Disaster Drills: 10A NCAC 27G. 0207

NOTE: The procedures below are for state licensed facilities only; they do not apply to ICF/IID facilities. ICF/IID staff should adhere to the federal survey guidelines within CFR 483.470(i).

1. Fire and Disaster Plans

Written fire plans and area disaster plans approved by the local authority are required prior to initial licensure as outlined by 10A NCAC 27G .0207. The local authority is the local Emergency Management (EM) Office. For facilities trying to contact the "local authority," North Carolina's Division of Emergency Management has a list of phone numbers for each county's Emergency Management (EM) office on their web site. Their web site is www.ncem.org. Click the "counties" link on the left hand side of the page.

- NOTE: Although approval from the local authority is specified in rule, there are no guidelines for local EM offices to approve written fire and disaster plans however, local EM offices will review written fire and disaster plans. Therefore, initial surveyors should ensure written fire and disaster plans are reviewed by the local authority.

2. Fire Drills

Fire drills are to be conducted quarterly on each shift as stated in 10A NCAC 27G .0207 (c). Drills are to be conducted under conditions which simulate fire emergencies. This necessitates that the fire drills:

- Involve a complete evacuation of the building
- Occur quarterly on each shift.

3. Disaster Drills

Disaster drills are to be conducted quarterly on each shift as stated in 10A NCAC 27G .0207 (c). Disaster drills may be conducted on the same day provided it is clear they are two separate drills. In this case, documentation of the drills should clearly document both the Disaster and Fire.

Examples

Below are examples of possible "shift" scenarios for fire and disaster drills. Please note: these are only a few examples and are not all inclusive. Providers must ensure they are conducting and documenting drills per their shift schedule.

- If the provider reports they have one shift Monday through Friday, and one Saturday and Sunday, surveyors would expect to see two fire/disaster drills per quarter; one in the Mon-Fri time period and one in the Sat-Sun time period.
- If the provider reports they have live in staff and every two months they get a break for the weekend, surveyors would expect to see two fire/disaster drills per quarter; one during the live in shift time and one during the relief shift time.
- If the provider reports that they have three shifts per day, surveyors would expect to see three fire/disaster drills per quarter; one for each shifts time period.



RHA BEHAVIORAL HEALTH SERVICES
ADMINISTRATIVE MEETING MINUTES

Administrator: Angie Murre RN Manager PRIC Type: Group Individual

Date: 3/15/19 Time: _____ to _____ Location: PRIC

Administrator Signature: Angie Murre RN Manager

Meeting Attendees

Signature

Signature

Agenda Items

- Authorizations
- Caseloads
- Charity Care
- Community Outreach/Marketing
- Documentation
- Forms
- LME/MCO Information
- NC TOPPS
- PDO
- Policy & Procedure Updates
- Productivity
- QA/QI

- Reports
- Review of Minutes
- Scheduling
- Staffing/HR
- Team Building
- Trainings
- communication re
- discharge
-
-
-
-

Notes: Five Discharge Bills 10x NCAC 576 0207.

attached
review all staff not initial in plan of correction
in (copy) - Discharge bills quarterly - monthly
documentation - documentation appropriate

Follow-up Needed (If any): to be provided in PRIC report

Date and Time for Next Administrative Meeting: _____

Last Modified: 11/2/12

All staff to read initial by your name alone -
in get me permission via email
to initial in your report in PRIC Form#:
In initialing a giving me Angie Murre RN manager
permission to initial - please acknowledge understanding

Enclosure F p93



March 18, 2019

To: Mental Health Licensure and Certification Section, NC Division of Health Service Regulation

Re: Annual and Follow up Survey

Foothills Regional Treatment Center, 2415 Morganton Blvd SW, Suite 200, Lenoir, NC 28645
MHL #014-089

To Whom It May Concern:

Please find enclosed the Plan of Correction (POC) which addresses the deficiencies cited from the recent site visit of February 28, 2019.

We have also enclosed evidence of correction from the items on the POC.

Please do not hesitate to contact me if you have any questions or concerns.

Sincerely,

A handwritten signature in black ink that reads 'Tracey Irvine, MA, LPC'. The signature is written in a cursive style.

Tracey Irvine
Director of Operations
RHA Health Services
2415 Morganton Blvd. SW
Lenoir, NC 28645
Office: (828) 294-5563
Cell: (828) 610-7209
Email: Tracey.Clark@rhanet.org