Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: MHL060-166 06/04/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 5215 PINEBROOK DRIVE PINEBROOK DRIVE GROUP HOME CHARLOTTE, NC 28208 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) V 000 INITIAL COMMENTS V 000 DHSR - Mental Health An annual survey was completed on June 4. 2019. A deficiency was cited. JUN 1 1 2019 This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Lic. & Cert. Section Living for Adults Whose Primary Diagnosis is a Developmental Disability. V 114 27G .0207 Emergency Plans and Supplies The Pinebrook group V 114 home will show evidence that quarterly fire/disaster 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES drills were conducted for (a) A written fire plan for each facility and each shift as evidenced area-wide disaster plan shall be developed and through drills being held shall be approved by the appropriate local at least quarterly for each authority shift. QIDP and Program (b) The plan shall be made available to all staff Coordinator will retrain and evacuation procedures and routes shall be Direct Support posted in the facility. Professionals (DSPs) on (c) Fire and disaster drills in a 24-hour facility quidelines shall be held at least quarterly and shall be pertaining to running fire/ repeated for each shift. Drills shall be conducted disaster drills on each under conditions that simulate fire emergencies. shift quarterly by June (d) Each facility shall have basic first aid supplies 29th, 2019. Program accessible for use. Coordinator will review monthly reports to ensure drills are completed each shift within the quarter. This Rule is not met as evidenced by: Based on interview and record review, the facility failed to complete fire and disaster drills at least quarterly and repeated for each shift, affecting 3 of 3 audited clients (Clients #1, #2, and #3). The findings are: Review on 6/4/19 of the facility's Fire and Disaster Drill Log revealed: -Form indicating 1st shift ran from 6am-2pm, 2nd Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

STATE FORM

FORM APPROVED Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: __ MHL060-166 B. WING_ 06/04/2019 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 5215 PINEBROOK DRIVE PINEBROOK DRIVE GROUP HOME CHARLOTTE, NC 28208 (X4) ID PREFIX SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) V 114 Continued From page 1 V 114 shift rand from 2pm-11pm, and 3rd shift ran from 11pm-6am; -No 1st shift fire and disaster drills were completed for 1st and 2nd Quarter, 2019. Interview on 6/3/19 with the Manager revealed: -Will make sure all first shift drills are held moving forward. Interview on 6/3/19 with the Director of Residential Services revealed: -First shift runs from 6am-2pm; -It was an error that there are missing first shift drills, but they will be held in the future.

Division of Health Service Regulation