

Division of Health Service Regulation

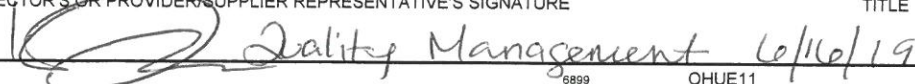
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL060-569	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING:	(X3) DATE SURVEY COMPLETED 06/06/2019

NAME OF PROVIDER OR SUPPLIER HOLT	STREET ADDRESS, CITY, STATE, ZIP CODE 2425 UMAR COURT CHARLOTTE, NC 28215
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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	INITIAL COMMENTS An annual survey was completed on June 6, 2019. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults Whose Primary Diagnosis is a Developmental Disability.	V 000	The following measures were put into place to correct the deficiency and prevent the problem from occurring again: There has been a change in Home Manager; training regarding Emergency Plans and Supplies will be provided. Direct Support Staff will also receive refresher training by QP/Manager at upcoming staff meeting. Training will emphasize shift timeframes and documentation requirements. QP will provide oversight to Home Manager by auditing Emergency Drill Forms monthly to ensure they are being conducted properly. Emergency Drill Requirements will also be covered as a refresher at the July Managers Meeting.	8/6/2019
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (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. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on interview and record review, the facility failed to hold emergency drills on a quarterly basis and repeated for each shift affecting 3 of 3 audited clients (Clients #1, #2, and #3). The findings are: Review on 6/5/19 of the facility's Emergency Drill Log revealed: -No Disaster Drills held for 2nd shift during 4th	V 114		

DHSR - Mental Health
JUN 26 2019
Lic. & Cert. Section

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Quality Management	(X6) DATE 6/16/19
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V 114	Continued From page 1 Quarter (October - December), 2018; -No Disaster Drills held for 3rd shift during 3rd Quarter (July - September), 2018 and 1st and 2nd Quarters (January - March and April - June, respectively), 2019; -Emergency Drill form revealed 1st shift ran 7am-3pm, 2nd shift ran 3pm-9pm, and 3rd shift ran 9pm-7am. Interview on 6/6/19 with the Qualified Professional revealed: -Will ensure additional 2nd and 3rd shift drills are held in the future; -Believed the disaster drills were not conducted by the former house manager.	V 114		