

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL096-078</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/20/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PINEVIEW</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>304 SOUTH PINEVIEW AVENUE GOLDSBORO, NC 27530</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on November 20, 2019. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C, Supervised Living for Adults with Developmental Disabilities.</p>	V 000		
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></p> <p><b>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</b></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 reviews and interviews the facility failed to ensure disaster drills were held quarterly and repeated on each shift. The findings are:</p> <p>During interview on 11/14/19 the Director of Developmental Care stated the facility had three shifts: 1st 8:00 am - 4:00 pm, 2nd 4:00 pm - 12:00 midnight, and 3rd 12:00 midnight - 8:00 am.</p>	V 114	<p>The system used for fire and disaster drills will be modified to ensure that fire and disaster drills are completed each quarter for each shift. To meet the rule, drills for tornado and hurricanes will be considered disaster drills. This will prevent other emergency drills performed being counted as a "disaster" drill which is what happened this past year. Drill exercises will continue to be discussed with residents and staff as a part of on-going training but may not always be remembered by residents due to TBI. The Health and Safety Director will continue to ensure all drills are completed as required.</p>	01/01/20

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

*Jeani Hanna*

TITLE

*CEO*

(X6) DATE

*12-3-19*

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V 114	<p>Continued From page 1</p> <p>Review on 11/14/19 of facility records revealed: - Disaster drills included hurricane/tornado, bomb threat, violence in the workplace, utility failure, medical emergency, and "other." - Staff documented discussion with clients about what to do in the event of specific emergency situations as listed above. - No disaster drill exercises documented for 1st, 2nd, or 3rd shift during the third quarter (July - September) 2019, or the first quarter (January - March) 2019.</p> <p>During interview on 11/14/19 client #5 stated when tornado drills were held "we sit down and talk about it, we don't run down to the basement or anything like that."</p> <p>During interview on 11/20/19 the President stated she felt like staff completed drills as required, but did not document the drills in a manner that reflected an actual drill exercise. Other regulatory bodies suggested the use of workplace violence, utility failure, medical emergency, and bomb threats in drills.</p>	V 114		
V 290	<p>27G .5602 Supervised Living - Staff</p> <p>10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. (b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community</p>	V 290		

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V 290	<p>Continued From page 2</p> <p>without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time.</p> <p>(c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present:</p> <p>(1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or</p> <p>(2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body.</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:</p> <p>(1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and</p> <p>(2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure a client's treatment or</p>	V 290	<p>The QPs will ensure that clients receiving any unsupervised time will have it documented in their treatment plan and signed by their physician. The QP will also review annually, or as needed, to ensure the resident is capable of having unsupervised time.</p>	01/19/20

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V 290	<p>Continued From page 3</p> <p>habilitation plan documented the client was capable of remaining in the community for specified periods of time affecting 2 of 3 audited clients (#2 and #5). The findings are:</p> <p>Review on 11/14/19 of client #2's record revealed:</p> <ul style="list-style-type: none"> <li>- 34 year old male admitted 5/27/11.</li> <li>- Diagnoses included Intracranial injury, Traumatic Brain Injury.</li> <li>- Treatment plan dated 4/1/19 with no goals or strategies for unsupervised time in the community.</li> </ul> <p>During interview on 11/14/19 client #2 state he could be without staff supervision for 30 - 40 minutes each day. He liked to use his unsupervised time to go for a walk around the block. He felt safe in the neighborhood.</p> <p>Review on 11/14/19 of client #5's record revealed:</p> <ul style="list-style-type: none"> <li>- 66 year old male admitted 8/26/13.</li> <li>- Diagnoses included Traumatic Brain Injury, Korsakoff's Syndrome, Alcoholism, Diabetes, and Hepatitis C.</li> <li>- Treatment plan effective 10/5/19 with no goals or strategies for unsupervised time in the community.</li> </ul> <p>During interview on 11/14/19 client #5 stated he could go for a walk around his neighborhood if he "signed out;" he could be away from the facility unsupervised for "around 1/2 hour." The neighborhood was safe.</p> <p>During interview on 11/14/19 the House Lead stated clients #2 and #5 could go for walks around the block without staff supervision if they signed out when they left the facility.</p> <p>During interview on 11/14/19 the Director of</p>	V 290		

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V 290	<p>Continued From page 4</p> <p>Developmental Care stated there had been no elopement attempts at the facility.</p> <p>During interview on 11/20/19 the President stated she understood the requirement for unsupervised time to be included in the treatment or habilitation plan. She would have the Qualified Professional speak with the Care Coordinators for clients #2 and #5 about revising their treatment plans to include unsupervised time.</p>	V 290		