STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL084-078	A. BUILDING: _____ B. WING _____	R 02/26/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WAVERLY GROUP HOME	2215 WAVERLY STREET ALBEMARLE, NC 28001

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on 2/26/20. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.	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 review and interview, the facility failed to ensure staff were currently trained in cardiopulmonary resuscitation (CPR) and first aid techniques provided by the Red Cross, the American Heart Association, or their equivalence for 1 of 1 Qualified Professional (QP). The findings are: Review on 2/25/20 of the QP's personnel record revealed: -Hire date of 4/17/14; -CPR and First Aid training documentation could not be located in the personnel file. Interview on 2/26/20 with the QP revealed: -the Human Resources Department could not locate a copy of her current CPR and First Aid certification; -had taken CPR and First Aid but could not recall when she had taken the class; -her jobs duties required her to work alone with the individuals in the group home and during medical appointments; - had reached out the CPR/First Aid Instructor for a copy of her certification but the instructor was out of the office; - would get her training updated as soon as possible.	V 108		
V 114	27G .0207 Emergency Plans and Supplies	V 114		

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V 114	Continued From page 2 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 complete fire and disaster drills at least quarterly and repeated for each shift. The findings are: Review on 2/26/20 of the facility's Fire and Disaster Drill Logs from February 2019 to January 2020 revealed: - the home operates with 3 shifts which were identified as 1st shift: 6:00am-2:00pm, 2nd shift: 2:00pm-10:00pm, and 3rd shift/overnight shift: 10:00pm-6:00am; - no 3rd shift Fire Drill completed for 2nd quarter (April - June) 2019; - no 3rd shift Disaster Drill completed for 2nd quarter (April - June) 2019. Interview on 2/26/20 with Client #1 revealed: - had lived at the facility for 7 years; - the facility had fire and disaster drills but was not	V 114		

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V 114	Continued From page 3 sure how often the drills were conducted. Interview on 2/26/20 with Client #3 revealed: - had lived at the facility for 8 years; - "the facility was required to conduct Fire and Disaster Drills monthly" and the drills were conducted as scheduled. Interview on 2/26/20 with Staff #1 revealed: - Fire and Disaster Drills are conducted once month; - Drills are conducted by the staff member on duty for the shift and/or the Qualified Professional (QP). Interview on 2/26/20 with Staff #2 revealed: - employed for 6 months; - Fire and Disaster Drills are conducted monthly, rotating shifts each month; - the drills are primarily conducted by the QP. Interview on 2/26/20 with the Qualified Professional (QP) revealed: - Fire and Disaster Drills are held once monthly; - both the QP and/or the staff member on duty for that shift is responsible for conducting the drills; - "not sure how we missed the one in June." - will make sure that the Fire and Disaster Drills get completed on each shift, each quarter.	V 114		
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.	V 736		

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V 736	Continued From page 4 This Rule is not met as evidenced by: Based on observation and interviews, the facility was not maintained in a safe, clean, attractive, and orderly manner. The findings are: Observation on 2/26/20 at 10:47am of the facility revealed: - Facility's bathroom, used by all clients: - bathtub with approximately 5-6 inches of standing water in the bottom of the tub; - the plug was positioned correctly for draining; - Staff #1 moved the drain plug up and down and the water did not drain; - the shower curtain liner had several large, light grayish/black spots on the inside of the liner. Client #4's bedroom: - strong smell of cigarettes in the room; - approximately 15-20 (already smoked) cigarette butts lying in a pile on the top of the dresser; - no cigarette ashes were found in the bedroom. Interview on 2/26/20 with Staff #1 revealed: - was unaware of the water standing in the bottom of the tub; - "no one told me about the water in the tub;" - was unaware of the (already smoked) cigarette butts located in Client #4's bedroom; - the cigarette butts "weren't there yesterday"... "he had to have done it today." Interview on 2/26/20 with the Qualified Professional (QP) revealed: - was unaware of the water standing in the bottom of the tub;	V 736		

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V 736	Continued From page 5 - was unaware of the (already smoked) cigarette butts located on top of the dresser in Client #4's bedroom. - would make sure that the issues were addressed.	V 736		