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: _ MHL0411031 B. WING 07/09/2021 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 5144 DUNSTAN ROAD LODGE II GREENSBORO, NC 27405 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE **PREFIX** TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual survey was completed on 7/9/2021. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .3400 Residential Treatment/Rehabilitation for Individuals with Substance Abuse Disorders. V 114 27G .0207 Emergency Plans and Supplies V 114 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 record review and interview, the facility **DHSR** - Mental Health failed to conduct fire and disaster drills on each shift at least quarterly. The findings are: JUL 2 6 2021 Review on 7/8/2021 of the facility's fire and disaster drill log revealed: Lic. & Cert. Section - No documentation of fire drills during the following shifts and quarters:

Division of Health Service Regulation

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

STATE FORM

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7/22/21

If continuation sheet 1 of 2

PRINTED: 07/13/2021 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: A. BUILDING: _ COMPLETED B. WNG MHL0411031 07/09/2021 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **5144 DUNSTAN ROAD** LODGE II GREENSBORO, NC 27405 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE COMPLETE **PREFIX** REGULATORY OR LSC IDENTIFYING INFORMATION) DATE TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DEFICIENCY) V 114 PlEASE SEE A HACKMENT Continued From page 1 V 114 - July - September 2020: 3rd shift - October - December 2020: 2nd shift - January - March 2021: 1st shift - April - June 2021: 3rd shift - Documentation of disaster drills were as follows: - July-September 2020: 1st & 3rd shift drills were documented as having been completed together on 7/14/2020 from 6:59am to 7:05am - October-December 2020: no documentation of 3rd shift disaster drill - January-March 2021: 2nd & 3rd shift drills were documented as having been completed together on 2/11/2021 from 12:00am-12:12am; and 1st & 2nd completed together on 3/18/2021 from 4:45pm-5:52pm - April-June 2021: 3rd & 1st shift drills were documented as having been completed together on 5/20/2021 from 7:04 to 7:10 (am or pm not noted) - The disaster drills that were documented as combined shifts did not clearly demonstrate that a distinct disaster drill was completed on each shift. Interview on 7/8/2021 with the Facility Services Director revealed: - He thought that the facility had been told by someone from an oversight or accrediting agency that disaster drills could be conducted at shift change while staff from the transitioning shifts

were present together.

after he left employment.

- A former staff was supposed to ensure that fire drills were conducted on each shift every quarter, but it was discovered that he had not done so

- He would ensure fire and disaster drills were completed on each shift every quarter.

Provider's Plan of Correction

Fellowship Hall, Inc., Lodge II 5144 Dunstan Road, Greensboro, NC 27405

The following is in response to deficiencies cited during the annual survey of Lodge II that was completed on July 9, 2021.

V 114 27G .0207 Emergency Plans and Supplies

© Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift.

This Rule was not met as evidenced by: Based on record review and interview, the facility failed to conduct fire and disaster drills on each shift at least quarterly.

The policy and procedure is already in place to conduct one drill per shift, per setting, per quarter. As noted in the interview portion of the report, the Facility Services Director was under the understanding that disaster drills could be conducted at shift change while staff from the transitioning shifts were present together. This practice will not continue, and each disaster drill will be completed as a distinct drill completed on each shift. Enhanced training and adherence to our policy & procedure will occur to prevent the problem from occurring again. The Director of Facility Services serves as the Safety Officer and Chairperson of the Environment of Care Committee. He has spoken with the EOC Committee and maintenance staff about the timeline for drills for each shift. A subcommittee of EOC is developing a calendar of drills for the upcoming 12 months. The calendar will indicate when the drills are completed, and by whom. The calendar will be reviewed monthly at the EOC meetings. The calendar will be completed and implemented by the September meeting of the committee scheduled for 9/1/21.