

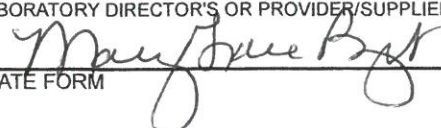
Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL074-021	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 08/13/2021
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NAME OF PROVIDER OR SUPPLIER PITT COUNTY GROUP HOME 4	STREET ADDRESS, CITY, STATE, ZIP CODE 1203 RED BANKS ROAD GREENVILLE, NC 27834
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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	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on August 13, 2021. 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>27G .0207 Emergency Plans and Supplies</p> <p>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</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 review and interviews the facility failed to have fire and disaster drills held at least quarterly, repeated on each shift and held under conditions that simulate emergencies. The findings are:</p> <p>Review on 8/12/21 of facility records from August 2020-July 2021 revealed: - No disaster drills documented between 7:30pm-7:15am.</p>	V 114	<p>A schedule for fire and emergency drills has been developed with specific times and dates to ensure drills are conducted during each "shift". When drills are completed, the results will be filed in the EOP Manual and scanned to the QP. The Lead DSP and the QP will monitor the schedule and implementation monthly. If a drill is missed, it will be made up immediately.</p> <p>DHSR - Mental Health</p> <p>SEP 08 2021</p> <p>Lic. & Cert. Section</p>	9/15/2021

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Executive Director	(X6) DATE 9-2-2021
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V 114	Continued From page 1 - 2nd quarter (11/1/20- 1/31/21) had a missing drill. - 3rd quarter (2/1/21- 4/30/21) had a missing drill. - No fire drills documented between 11:17pm-5:13pm. - 2nd quarter (11/1/20-1/31/21) had a missing drill. - 3rd quarter (2/1/21- 4/30/21) had a missing drill. - No fire or disaster drills were completed during the weekends. Interview on 7/22/21 the Qualified Professional stated: - The facility shifts were: -5:30am-8:30am during weekday's only. -3:00pm-10:00pm during weekday. -10:00pm- 5:30am as staff sleep shift. -5:30pm -8:30pm during weekday. -5:30pm-830pm as weekend shift. - All fire and disaster drills had been provided for review. - She understood fire and disaster drills were required to were to be held quarterly, repeated on each shift and simulate an emergency.	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. This Rule is not met as evidenced by:	V 736	The group home will be deep cleaned by a professional cleaner and staff/clients will maintain. A cleaning schedule has been developed and staff will be responsible for implementation. The schedule was reviewed in a staff meeting on August 30, 2021. The Lead DSP and QP will be responsible for monitoring whenever they are in the home. Knobs on all furniture has been replaced. Light bulbs have been replaced. A request has been sent to HUD for painting, wall repair and upgrading the bathroom fixtures and walls (cleaning will not totally get rid of rust stains.	8/30/21

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V 736	<p>Continued From page 2</p> <p>Based on observations and interview the facility was not maintained in a safe, clean manner. The findings are:</p> <p>Observations during facility tour 8/12/21 at approximately 12:15 pm revealed:</p> <ul style="list-style-type: none"> - Dark brown stains and streaks under a metal shelf of the wall in the bathroom #1. - Client #6 had a 3 drawer night stand with the 1st and 3rd drawer missing knobs, a 10 drawer chest with the 4th and 5th drawer on the left side missing knobs and 1 missing knob on the right side. - The window sill in Client #5's bedroom was dusty and had dead bugs. - Three drawer night stand in Client #3's bedroom missing knob on 3rd drawer and the window sill was dusty. - Client #2's bedroom window sill was dusty and had dead bugs. - Client #1's bedroom had a hole in the wall behind the tv about 2 inches in size and the window sill was dusty. - Bathroom #2 had a light out in the ceiling, 3 bulb light fixture had 2 lights out, brown stains in the bathtub and dark brown stains and streaks on the wall under the metal shelf and sink. <p>During interview on 8/12/21 the Executive Director stated she understood the requirement for the facility to be maintained in a safe and clean manner.</p>	V 736		