

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL001-093	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/04/2021
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NAME OF PROVIDER OR SUPPLIER SECOND STREET GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 700 SOUTH SECOND STREET MEBANE, NC 27302
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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 survey was completed on November 4, 2021. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600 C 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 reviews and interviews, the facility failed to conduct fire and disaster drills under conditions that simulate emergencies at least quarterly and repeated for each shift. The findings are:</p> <p>Record review on 11/4/21 of the facility's fire drill log revealed: -9/1/21- 3rd shift -8/11/21- 3rd shift</p>	V 114	<p>DHSR - Mental Health</p> <p>NOV 19 2021</p> <p>Lic. & Cert. Section</p> <p>V 114 QP/Coordinator will monitor staff monthly to ensure they are running fire and disaster drills on all 3 shifts (1st, 2nd, and 3rd). Times will be documented and rotated monthly to ensure every shift is being covered.</p>	

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

William Carr

TITLE

VP of CSS/ICF

(X6) DATE

11-16-2021

Division of Health Service Regulation

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V 114	<p>Continued From page 1</p> <ul style="list-style-type: none"> -7/14/21- 2nd shift -5/1/21- 2nd shift -4/4/21-1st shift -3/1/21-3rd shift -2/1/21- 1st shift -1/1/21- 1st shift -1/1/21- 2nd shift -12/4/20-1st shift -12/4/20- 2nd shift -11/2/20-2nd shift -11/2/20-1st shift -For the fourth quarter of 2020, there were no fire drills for 3rd shift. -For the second quarter of 2021, there were no fire drills for 3rd shift. -For the third quarter of 2021, there were no fire drills for 1st shift. <p>Record review on 11/4/21 of the facility's disaster drill log revealed:</p> <ul style="list-style-type: none"> -9/1/21-2nd shift -8/11/21- 2nd -4/14/21- 2nd -6/3/21- 2nd -6/3/21- 1st shift -5/1/21- 1st shift -4/4/21- 2nd shift -3/1/21- 1st shift -2/1/21- 2nd shift -1/1/21- 2nd shift -12/4/20-2nd shift -11/2/20- 2nd shift -For the fourth quarter of 2020, there were no disaster drills for 1st and 3rd shift. -For the first quarter of 2021, there were no disaster drills for 3rd shift. -For the second quarter of 2021, there were no disaster drills for 3rd shift. -For the third quarter of 2021, there were no disaster drills for 1st and 3rd shift. 	V 114		

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V 114	Continued From page 2 Interview with the Home Manager on 11/4/21 revealed: -Facility operated under three shifts. -He confirmed staff failed to conduct drills under conditions that simulate fire and disaster emergencies under each shift on each quarter.	V 114		