

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL026-619	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/24/2022
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NAME OF PROVIDER OR SUPPLIER SUNNY ACRES GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 611 COUNTRY CLUB DRIVE FAYETTEVILLE, NC 28301
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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 INITIAL COMMENTS

An annual survey was completed on February 24, 2022. Deficiencies were cited.

This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.

The survey sample consisted of audits of 3 current clients.

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

V 108

See Attachment

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

TITLE

(X6) DATE

Fayhamy A. ... BSOP 3/9/22

Sunny Acres Plan of Correction

V108: By April 25, 2022, the Deputy Director will make sure that all staff enroll and complete CPR and First Aid training. The Group Home Manager and all staff are required to make sure certifications remain up to date. The Deputy Director will create a CPR and First Aid training log of staff who have completed the training and the date in which they will need to have their certifications updated. Staff are unable to provide direct care if their CPR and First Aid training is invalid.

V114: By April 25, 2022, the Group Home Manager will provide emergency drill training to all staff. Staff from each shift, including those on first shift, will be required to conduct evacuation drills quarterly. Once evacuation drills are complete, staff will need to sign-off on an evacuation drill report to keep on file. A copy of all emergency drills will be kept at the facility and at the main office.

V118: By April 25, 2022, the Qualified Professional and Group Home Manager will provide a review of medication administration and documentation. The Group Home Manager will ensure that the medications match the MAR and physician orders. The Group Home Manager and Qualified Professional will review the MARs weekly.

V290: By April 25, 2022, the Qualified Professional will meet with the residents/guardians to ensure that all client's PCP's are up to date. The Qualified Professional will review client's files quarterly to make sure they remain updated, and provide training to all staff on any changes that may be made. The Qualified Professional and Group Home Manager will meet and assign staff to those clients who are required to have supervision when attending school or education programs. The Qualified Professional will meet with the psychiatrist to receive input in determining if any residents are able to have any unsupervised time.

V736: By April 25, 2022, the Group Home Manager will ensure that all repair needs are addressed and/or being worked on. The Group Home Manager and Qualified Professional will complete a monthly walk through of the group home

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facility and document any repairs that need to be addressed to ensure the facility remains in a safe, clean, attractive, and orderly manner.

V752: By April, 25, 2022, the Group Home Manager will ensure that the water temperature is corrected. The Group Home Manager will conduct a routine water temperature check twice a month to ensure the correct water temperature is maintained between 100-116.

Sophia B. Pierce & Associates, Inc.
1422 Murchison Road
PO Box 2813
Fayetteville, NC 28302
Phone (910) 488-8477 Fax (910) 822-1951

March 9, 2022

Dear Keith Hughes,

Thank you for your recent visit to Sunny Acres Group Home on February 24th. We have received the list of deficiencies and have already started making adjustments to comply with state regulations and guidelines. Enclosed you will find our plan of correction for those deficiencies. If you have any questions or concerns, please contact our office at (910) 488-8477.

Sincerely,


Tiffany Harrington
Qualified Professional

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