

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL079-129	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 03/09/2022
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NAME OF PROVIDER OR SUPPLIER LAVERNE'S HAVEN RESIDENTIAL HOME SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 195 BROOKSIDE DRIVE EDEN, NC 27288
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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 3/9/2022. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 5 and has a census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000	<p><i>Fire and disaster drills will be conducted at least quarterly for each shift and documented. The fire and disaster drills will be conducted by the facility staff for each shift and the facility director, Jeff Wemack will ensure staff are conducting these drills.</i></p>	
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 on each shift at least quarterly. The findings are:</p> <p>Review on 3/9/2022 of the facility's fire and disaster drill log revealed:</p>	V 114	<p><i>Fire and disaster drills will be conducted at least quarterly for each shift and documented. The fire and disaster drills will be conducted by the facility staff for each shift and the facility director, Jeff Wemack will ensure staff are conducting these drills.</i></p>	

RECEIVED
By cvhicks at 1:58 pm, Apr 27, 2022

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Jeffrey L Wemack - Owner</i>	TITLE Owner	(X6) DATE 4-27-22
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V 114	<p>Continued From page 1</p> <ul style="list-style-type: none"> - No documentation of fire or disaster drills from March 2021 through August 2021. <p>Interview on 3/9/2022 with the Director revealed:</p> <ul style="list-style-type: none"> - Due to the Covid-19 pandemic, the facility had stopped conducting fire and disaster drills for several months. - Fire and disaster drills were resumed after a sister facility was cited for failing to conduct fire and disaster drills there. - Fire and disaster drills were now conducted on each shift every month. 	V 114		