

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                |  | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>MHL026-642</b>                 | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>06/30/2022</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>C R E S T GROUP HOME #4</b> |  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>224 RANDOLPH AVENUE<br/>FAYETTEVILLE, NC 28311</b> |  |  |
| (X4) ID<br>PREFIX<br>TAG   | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)   | ID<br>PREFIX<br>TAG  | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE                               |
| V 000  | INITIAL COMMENTS<br><br>An annual survey was completed on June 30, 2022. Deficiencies were cited.<br><br>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.<br><br>This facility has a current census of 5. The survey sample consisted of audits of 3 clients.   | V 000  |  |  |
| V 114  | 27G .0207 Emergency Plans and Supplies<br><br>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES<br>(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.<br>(b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.<br>(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.<br>(d) Each facility shall have basic first aid supplies accessible for use.<br><br>This Rule is not met as evidenced by:<br>Based on record review and interview the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings are:<br><br>Review on 06/28/22 of facility records from June 2021-June 2022 revealed: | V 114  |  |  |

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

TITLE

(X6) DATE

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| V 114  | Continued From page 1<br><br>-No fire and disaster drills were documented for the months of January 2022-May 2022.<br><br>During interview on 06/30/22 clients #1, #3 and #5 all revealed they completed fire and disaster drills monthly.<br><br>During interview on 06/30/22 the Executive Director revealed he would ensure all the drills were documented in the facility.   | V 114  |  |  |
| V 752  | 27G .0304(b)(4) Hot Water Temperatures<br><br>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT<br>(b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors.<br>(4) In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit.<br><br>This Rule is not met as evidenced by:<br>Based on observation and interview, the facility water temperatures were not maintained between 100-116 degrees Fahrenheit in areas where clients were exposed to hot water. The findings are:<br><br>Observation on 06/28/22 at approximately 12:45pm revealed:<br>- The hot water temperature in the kitchen and client designated bathrooms was 121 degrees Fahrenheit.<br><br>Interview on 06/30/22 the Executive Director | V 752  |  |  |

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| V 752  | Continued From page 2<br><br>stated:<br>- He would contact the maintenance person to<br>have the hot water heater evaluated. | V 752  |  |  |