

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL020-079</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/14/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>THE RISIN'</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>201 HAMPTON CHURCH ROAD MURPHY, NC 28906</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on 6/14/22. The complaint (Intake #NC00188128) was substantiated. Deficiencies were 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 currently has a census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000	<p>With regards to rule 27G .0207, at Appalachian Community Services we strive to conduct fire and disaster drills on each shift a minimum of quarterly. We recognize that do to staffing challenges, some of these may not have occurred or took place during a shift when one had already been completed, leaving what appears to be a lapse.</p> <p>In order to prevent reoccurrence, all residential staff will receive supervision and training in how to properly conduct a fire and disaster drill along with instruction on appropriate documentation of drills.</p> <p>Furthermore, the Director of IDD Services will create calendar for the facility containing all shifts to assist with scheduling and completing fire and disaster drills on a quarterly basis. This will be monitored for completeness by the IDD Operations Manager, who will provide additional support if needed.</p>	7/1/2022
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></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 observations, record reviews and interviews, the facility failed to conduct fire and disaster drills on each shift at least quarterly. The findings are:</p>	V 114	<p>With regards to 27G .0404 and GS 122C-6, it is standard practice to post all required documentation including licensure, DHSR complaint hotline number, and required no-smoking signs.</p> <p>During scheduled maintenance and repairs, all documentation was removed from the walls including the DHSR complaint hotline number and no-smoking signs.</p> <p>Since completion of the survey, the hotline number and no-smoking signs have been re-posted in the facility in a public place.</p>	7/1/2022

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  
*Victoria Singley*  
STATE FORM

TITLE  
Director IDD Services  
6899 4R3B11

(X6) DATE  
7/7/2022  
If continuation sheet 1 of 9

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V 114	<p>Continued From page 1</p> <p>Review on 6/1/22 of the facility's fire and disaster drill log from 4/1/21 to 3/31/22 revealed: -there was no documentation that fire or disaster drills were conducted for the following shifts and dates: -Tour C from 4/1/21 to 6/30/21 -Tour A, B, or C from 7/1/21 to 9/30/21 -Tour A or C for 1/1/22- 3/31/22.</p> <p>Interview on 5/31/22 with Staff #1 revealed: -the facility was a "Tour house;" shifts are called tours -Tour A is Sunday-Wednesday, Tour B is Wednesday-Friday and Tour C is Friday-Sunday -she sometimes worked longer shifts to help with coverage during staff shortage -the fire and disaster drills were scheduled by the House Manager or the Operations Support Specialist emailed what drills needed to be done -she did the fire drills when they were scheduled.</p> <p>Interview on 6/3/22 with Staff #2 revealed: -he has been working at the facility for about one month -his shift was Friday at 8:00am to Sunday at 4:00pm -there was a plan for fire and disaster drills, but he hasn't had to do any drills yet.</p> <p>Interview on 5/31/22 with Client #1 revealed: -she participated in fire and disaster drills; during a drill, they walked to the well outside.</p> <p>Interview and observation on 5/31/22 at 1:27pm with Client #2 revealed: -he participated in fire and disaster drills -"go over near the trees;" Client #2 pointed to the water pump.</p> <p>Interview on 5/31/22 with Client #3 revealed:</p>	V 114	<p>With regards to 27G .0303, At Appalachian Community Services, we strive to maintain our facilities to the highest standard possible. At times, we recognize that we have failed to meet this standard and we work towards remediation as soon as possible.</p> <p>In regards to the facility exterior, all clutter and debris have been removed from the facility grounds. A smoking receptacle has been placed in the designated smoking section of the facility and missing lightbulbs have been replaced. The missing doorbell cover has been replaced. All cables that were routed through windows and prevented proper closure have been removed and rerouted where appropriate.</p> <p>With regards to the 12x14 inch area that appeared moldy with dripping water, a plumber and contractor were contacted to complete necessary repairs to remediate the leak and mold.</p> <p>In regards to the multiple windows, window sills, and damaged screens, Windows and sills have been cleaned thoroughly and any debris removed. All window screens in the facility have been inspected and repaired if needed. Window blinds have also been inspected and replaced if needed.</p> <p>In regards to the unsealed and moldy bread, it appears that facility residents were saving old bread to use as food to feed local ducks and chickens. The bread in question has been removed and staff have been provided supervision on safe food storage.</p> <p>To prevent any future facility and maintenance deficiencies, the IDD Residential Manager will conduct biweekly safety and maintenance inspections of the facility. Residential staff will be required to report any safety or maintenance issues to the IDD residential manager when they are discovered.</p>	8/1/2022

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V 114	Continued From page 2  -he participated in fire and disaster drills; "yes, go to the well."	V 114		
V 138	<p>27G .0404 (A-E) Operations During Licensed Period</p> <p>10A NCAC 27G .0404 OPERATIONS DURING LICENSED PERIOD</p> <p>(a) An initial license shall be valid for a period not to exceed 15 months from the date on which the license is issued. Each license shall be renewed annually thereafter and shall expire at the end of the calendar year.</p> <p>(b) For all facilities providing periodic and day/night services, the license shall be posted in a prominent location accessible to public view within the licensed premises.</p> <p>(c) For 24-hour facilities, the license shall be available for review upon request.</p> <p>(d) For residential facilities, the DHSR complaint hotline number shall be posted in a public place in each facility.</p> <p>(e) A facility shall accept no more clients than the number for which it is licensed.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to post the Division of Health Service Regulation (DHSR) complaint hotline number in a public place. The findings are:</p> <p>Observation at 11:53am on 5/31/22 revealed: -the DHSR complaint hotline number was not posted anywhere within the facility.</p>	V 138		

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V 138	<p>Continued From page 3</p> <p>Interview on 5/31/22 with Staff #1 revealed: -she could not find the sign with the complaint hotline phone number on it -a client punched a hole in wall; the wall was patched and repainted and the sign must not have been reposted -she will find the sign with the complaint hotline number and hang it on the wall.</p> <p>Interview on 6/14/22 with the IDD (Intellectual Developmental Disability) Operations Manager revealed: -he was not sure when the room was repainted, but he thought it was approximately 3 months ago.</p>	V 138		
V 369	<p>G.S. 122C-6 Smoking Prohibited</p> <p>§ 122C-6 SMOKING PROHIBITED; PENALTY (a) Smoking is prohibited inside facilities licensed under this Chapter. As used in this section, "smoking" means the use or possession of any lighted cigar, cigarette, pipe, or other lighted smoking product. As used in this section, "inside" means a fully enclosed area. (b) The person who owns, manages, operates, or otherwise controls a facility subject to this section shall: (1) Conspicuously post signs clearly stating that smoking is prohibited inside the facility. The signs may include the international "No Smoking" symbol, which consists of a pictorial representation of a burning cigarette enclosed in a red circle with a red bar across it. (2) Direct any person who is smoking inside the facility to extinguish the lighted smoking product. (3) Provide written notice to individuals upon admittance that smoking is prohibited inside the</p>	V 369		

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V 369	<p>Continued From page 4</p> <p>facility and obtain the signature of the individual or the individual's representative acknowledging receipt of the notice.</p> <p>(c) The Department may impose an administrative penalty not to exceed two hundred dollars (\$200.00) for each violation on any person who owns, manages, operates, or otherwise controls a facility licensed under this Chapter and fails to comply with subsection (b) of this section. A violation of this section constitutes a civil offense only and is not a crime.</p> <p>(d) This section does not apply to State psychiatric hospitals. (2007-459, s. 3.)</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to post signs that smoking is prohibited inside the facility. The findings are:</p> <p>Observation at 11:53am on 5/31/22 revealed: -there was not a No Smoking sign posted in the facility.</p> <p>Interview on 5/31/22 with Staff #1 revealed: -she could not find the No Smoking sign -a client punched a hole in the wall; the wall was patched and repainted, and the sign must not have been reposted -she will find the No Smoking sign and hang it on the wall.</p> <p>Interview on 6/14/22 with the IDD (Intellectual Developmental Disability) Operations Manager revealed: -he was not sure when the room was repainted, but he thought it was approximately 3 months</p>	V 369		

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V 369	Continued From page 5  ago.	V 369		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility was not maintained in a safe, clean, attractive and orderly manner and kept free from offensive odor. The findings are:</p> <p>Observation at 11:03am on 5/31/22 of the exterior of the facility revealed: -a small bag of garbage, 2 metal window screens, and a grill with a rust like substance on it were on the deck near the door leading to the kitchen -loose roof shingles on the ground near the heating and cooling unit -a pile of wood which included what appeared to be broken furniture in the yard near the fire pit -a red plastic container with water and cigarette butts on the front porch -missing lightbulb in the exterior light to the right of the double basement door -on the ground near an exterior basement door, there was 1 bicycle, 1 bicycle frame, 1 unattached bicycle wheel, 4 pieces of wood each approximately 2 feet long, collapsible stool, brush and rag, and a bike fender</p>	V 736		

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V 736	<p>Continued From page 6</p> <ul style="list-style-type: none"> <li>-missing doorbell cover to the left of the door leading to the kitchen</li> <li>-cables leading from the exterior through window screens to the interior of the facility in three separate locations which included window to the right of the deck, the window below the front porch and the window above the double basement doors (Client #1's bedroom, Client #4's bedroom and the common area on the ground floor); the cables prevented the windows from closing and locking.</li> </ul> <p>Observation at 11:53am on 5/31/22 of the interior of the facility revealed:</p> <ul style="list-style-type: none"> <li>-an approximately 12 x 14 inch area covered with a black mold-like substance on the ceiling located outside the bedroom door of Client #4; there was water dripping from the ceiling</li> <li>-a bi-fold door was leaning against the wall near the door of Client #4's bedroom</li> <li>-the window above the desk in the ground floor common area was clouded with dirt; the cable was running through the screen and the screen had an approximately 2 inch tear in it</li> <li>-no window screen on one window and broken window blinds on one window in Client #3's bedroom</li> <li>-the windowsill in Client #5's bedroom was covered with dust and dead bugs; the window was cloudy with dirt</li> <li>-a ripped screen on the kitchen window</li> <li>-2 of the 4 bags of bread on the kitchen counter were not sealed; one bag had a green mold like substance on the bread.</li> </ul> <p>Interview on 5/31/22 with Staff #1 revealed:</p> <ul style="list-style-type: none"> <li>-if a repair is needed, she submitted a maintenance request</li> <li>-one of the clients had just showered which was likely the reason for water dripping from the</li> </ul>	V 736		

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V 736	<p>Continued From page 7</p> <p>ceiling outside of Client #4's bedroom; the facility had a similar issue before with a water leak near the same location on the ceiling</p> <p>-she informed the IDD Operations Manager today of the leak in the basement</p> <p>-the bread on the counter was the old bread saved to feed the duck; she knew they needed a better way to store it</p> <p>-the cable company installed the cable through the window to the right of the deck at the back of the house; she thought the cables running through the window screens on the front and side of the house were done by Staff #2 and clients</p> <p>-she noticed the cables coming through the windows about one week ago.</p> <p>Interview on 6/3/22 and 6/10/22 with Staff #2 revealed:</p> <p>-he helped install the cables through the windows for 2 clients</p> <p>-he had not seen the damaged area on the ceiling near Client #4's bedroom</p> <p>-for a maintenance issue, he informed the IDD Operations Manager.</p> <p>Interview on 5/31/22 with the Qualified Professional (QP) revealed:</p> <p>-the cable coming through the window on the backside of the house was installed like that by the cable company, "that's just how they do it."</p> <p>Interview on 6/1/22 with the Director of IDD Services revealed:</p> <p>-Staff #1 informed her of the leak in the ceiling and the IDD Operations Manager had also been notified.</p> <p>Interview on 6/8/22 with IDD Operations Manager revealed:</p> <p>-he put in a ticket to corporate for the water leak</p>	V 736		

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V 736	Continued From page 8  and it was approved -he had a list of plumbers that he used for repairs, but none were available; he had a contractor scheduled to go to the facility next week -it has been difficult to get a repair person out to the facility.	V 736		