

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL065-229	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 06/30/2022
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NAME OF PROVIDER OR SUPPLIER PORT HEALTH SERVICES - STEPPING STONE	STREET ADDRESS, CITY, STATE, ZIP CODE 416 WALNUT STREET WILMINGTON, NC 28401
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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
V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on June 30, 2022. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600E, Supervised Living for Adults with Substance Abuse Dependency.</p> <p>This facility is licensed for 16 and currently has a census of 7. The survey sample consisted of an audit of 3 current clients.</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 review and interviews the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings are:</p>	V 114		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 114	<p>Continued From page 1</p> <p>Review on 6/30/22 of facility records from 7/1/21 - 6/30/22 revealed:</p> <ul style="list-style-type: none"> - 2nd quarter (10/01/21 - 12/31/21): No fire or disaster drills for 1st shift. - 3rd quarter (1/01/22 - 3/31/22): No fire or disaster drills for 2nd shift. - 4th quarter (4/01/22 - 6/30/22): No fire or disaster drills for 2nd shift. <p>Interview on 6/30/22 the Program Supervisor stated:</p> <ul style="list-style-type: none"> - Fire and disaster drills were completed monthly. - The facility switched from 3 shifts to 2 shifts due to staffing shortages. - The 2 shifts were 12 hour shifts operating from 7am - 7pm, and 7pm - 7am. 	V 114		