

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL001-237</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R-C 08/10/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ALAMANCE HOMES II</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>801 N MEBANE STREET BURLINGTON, NC 27217</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A complaint and follow up survey was completed on August 10, 2022. The complaint was unsubstantiated (intake #NC00190573). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>This facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 000		
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 record review and interviews, the facility failed to conduct fire and disaster drills under conditions that simulate emergencies. The findings are:</p>	V 114	<p><b>RECEIVED</b> <i>By cvhicks at 11:30 am, Aug 24, 2022</i></p> <p>Systematic Chance to Prevent the Out-of-Compliance Issues: The director has implemented new forms, that will give the staff more options in performing the drills and emergency evacuations. The director will review drill monthly to</p>	

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

*Jing B. Rusan*

OWNER'S SIGNATURE (X2) DATE  
**Owner 8/18/22**

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V 114	<p>Continued From page 1</p> <p>Review on 8/9/22 of the facility's fire drill log revealed: -3/23/22-1:00 pm, 4:00 pm and 11:00 pm -There was no documentation of fire drills conducted during the 2nd quarter of 2022.</p> <p>Review on 8/9/22 of the facility's disaster drill log revealed: -3/23/22-1:30 pm, 4:30 pm and 11:30 pm -There was no documentation of disaster drills conducted during the 2nd quarter of 2022.</p> <p>Interview on 8/9/22 with client #1 revealed: -Staff #1 notified them of fire and disaster drills. Staff #1 did fire and disaster drills with them.</p> <p>Interview on 8/9/22 with client #2 revealed: -When asked about staff completing fire and disaster drills with them. He answered "no" to that question.</p> <p>Interview on 8/9/22 with client #3 revealed: -They did fire and disaster drills with staff. He wasn't sure how often the drills were conducted. They had not done a fire or disaster drill since last year.</p> <p>Interview on 8/9/22 with staff #1 revealed: -The facility didn't have three separate shifts. -He had not conducted fire and disaster drills since February or March 2022. -He confirmed staff failed to conduct fire and disaster drills under conditions that simulate emergencies.</p> <p>Interview on 8/9/22 with the Director/Licensee revealed: -He just recently talked to staff about doing fire and disaster drills. He thought they were doing</p>	V 114	<p>determine and check to make sure that all staff are following the guidelines and documenting as require.</p> <p>Timetable for Implementation of Corrective Actions: The Director/ QP will retrain staff on new forms and this will be implemented on 8/11/2022.</p>	

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V 114	Continued From page 2  drills consistently. He thought staff possibly misplaced some of the fire and disaster drill documentation.	V 114		
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 observation and interviews, the facility failed to ensure facility grounds were maintained in a safe, clean, attractive, orderly manner and kept free from offensive odor. The findings are:</p> <p>Observation on 8/9/22 at approximately 9:45 am revealed: -Kitchen area-There were three grayish tiles near sink with cracks around edges of tiles exposed. There were seven cracks in the linoleum flooring. There was a hole in the wall near stove approximately 2 X 3 inches long. There were five cracks in popcorn ceiling varying in size throughout the ceiling. There were three brownish stains varying in size on the ceiling. One of the cabinet doors would not close all the way. -Bathroom near den area-The door was stained. The linoleum flooring was cracked. The baseboards were cracked and had peeling paint. The walls had peeling paint. -Clients #1 and #2's bedroom-The wooden floor</p>	V 736	<p>Systematic Change to Prevent the Out-of-Compliance Issues: The director is responsible for making sure that the grounds of the facility is kept in a presentable manor. The director will also complete and repairs all cited areas. The director and staff will do a thorough cleaning of the facility. The director will replace all stained pillows; paint/repair the walls and flooring. Director will do a thorough cleaning of the facility. The director will retrain staff on the importance of keeping the facility clean, laundry done and to report any issues that need immediate attention.</p> <p>Timetable for Implementation of</p>	

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V 736	<p>Continued From page 3</p> <p>had faded paint. The walls were stained. There were two handles missing from one dresser. There was one handle missing and a broken leg on the chest of drawers. Clothing was in a pile on top the two dressers and on the floor. There were approximately sixty nail holes in wall. Client #2's mattress cover was torn.</p> <p>-Client #5's bedroom-The wooden floor had faded paint. The desk near the bed had dishes, empty food containers, clothing and toiletries on top of it. There were 3 pairs of shoes, 3 balls, 3 skateboards, 2 water containers, an empty snack box and a towel on the floor. Table near the closet had toiletry items, a container of peanut butter and books on top of it.</p> <p>-Clients #3 and #4's bedroom-There were two twin sized beds and a full sized bed. The walls were stained. Client #3's pillow was stained. There was clothing in a pile overflowing from a plastic bin. There was a plastic in corner of room that contained pieces of trash. Client #3's mattress was stained and worn. There were two handles missing from the chest of drawers. There were soda cans, empty chip bags and empty cigarette boxes on the floor near client #3's bed. Client #3's nightstand was pushed up against the dresser.</p> <p>- Client #6's bedroom-There was musty odor. There were clothing and shoes in piles throughout the room. There were clothing in plastic bags on the floor. There was no bed linen on his bed. One of the pillows was stained. The top drawer of dresser would not close all the way. There was no cover on light bulb in the ceiling. The wooden floor had faded paint.</p> <p>-Laundry Room-The linoleum flooring was cracked. The baseboards had peeling paint. The paint of the walls was fading.</p> <p>-Outside of facility underneath shelter area-There was a grill, a chair, pieces of plywood, a piece of</p>	V 736		

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V 736	<p>Continued From page 4</p> <p>sheet rock, 8 plastic bins, a mailbox, picture and folding chair.</p> <p>-Bathroom near back of facility-There was a soft spot in the floor at entrance and a soft spot near the bathtub. The bathmat was covered in black stains. The shower curtain was stained. There were approximately eight cracks in the wall. The mirror over the sink was discolored.</p> <p>Interview on 8/9/22 with staff #1 revealed:</p> <p>-He was aware of the maintenance issues with the facility.</p> <p>-About a month ago a maintenance person came to the facility to do the repairs. He thought the maintenance person got Covid and could not continue with the repairs.</p> <p>-He was responsible for the hole in the kitchen wall. He was using a mop and the handle hit the wall and it caused the hole.</p> <p>-The landlord was supposed to fix most of the issues with the facility and he failed to complete the repairs.</p> <p>-He thought there was an extra bed in clients #3 and #4's bedroom because one of those clients got a new bed. They didn't have time to remove the extra bed.</p> <p>-He confirmed the facility failed to ensure facility grounds were maintained in a safe, clean, attractive, orderly manner and kept free from offensive odor.</p> <p>Interview on 8/9/22 with the Director/Licensee revealed:</p> <p>-He was aware of most of the maintenance issues with the facility.</p> <p>-He had the wooden floors painted throughout that facility. Staff were using bleach and cleaner on the wooden floors. The wooden floors started peeling and fading again.</p> <p>-The landlord was aware of the majority of the</p>	V 736		

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V 736	Continued From page 5  issues with that facility. He failed to fix those issues he brought to his attention. He had to pay for some of the repairs out of his pocket. -He confirmed the facility failed to ensure facility grounds were maintained in a safe, clean, attractive, orderly manner and kept free from offensive odor.	V 736		