

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL045-133	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 12/16/2022
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NAME OF PROVIDER OR SUPPLIER TAPESTRY ADOLESCENT RESIDENTIAL PROGRAM	STREET ADDRESS, CITY, STATE, ZIP CODE 5030 HENDERSONVILLE ROAD FLETCHER, NC 28732
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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 December 16, 2022. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1300 Residential Treatment for Children or Adolescents.</p> <p>This facility is licensed for 12 and currently has a census of 11. The survey consisted of audits 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 reviews and interviews, the facility failed to conduct fire and disaster drills quarterly for each shift. The findings are:</p> <p>Review on 12-15-22 of the Fire and Disaster Drill log revealed:</p>	V 114		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 114	<p>Continued From page 1</p> <ul style="list-style-type: none"> -Third quarter of 2022 (July - September) had no fire drills for first and third shift. -Third quarter of 2022 (July - September) had no disaster drills for first and third shift. -One date during third quarter was documented as a drill being completed during first shift but it could not be determined if it was for fire or disaster. -One date during third quarter was documented as a drill being completed during second shift but it could not be determined if it was for fire or disaster. -No drills were documented as have been completed during third shift for third quarter. <p>Interview on 12-15-22 with the Executive Director (ED) revealed:</p> <ul style="list-style-type: none"> -Started as the ED in November 2022. -The facility has 3 shifts daily. -The former ED never documented drills. -Two drills were completed in October but were not documented and therefore cannot be verified. -She has only completed one drill since being ED. -She " ...will work to make sure they are being done." -She had already begun to create a monthly schedule for fire and disaster drills. <p>Interview on 12-15-22 with the Director of Compliance revealed:</p> <ul style="list-style-type: none"> -He was not responsible for oversight of fire and disaster drills. -Onsite leadership and maintenance were responsible for completing drills and uploading onto the company internal home intranet. <p>Interview on 12-16-22 with the Vice President of Operations revealed:</p> <ul style="list-style-type: none"> -The ED is responsible for fire and disaster drills. -The former ED was reporting that they had been 	V 114		

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V 114	<p>Continued From page 2</p> <p>completed but documentation could not be found. -"I will provide oversight at the moment." -In order to prevent a lapse, the system has been changed to require monthly drills for each shift instead of quarterly.</p> <p>This deficiency has been cited 3 times since the original cite on October 27, 2021 and must be corrected within 30 days.</p>	V 114		