Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: B. WING MHL032-263 01/11/2023 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **506 WATTS STREET** WATTS STREET GROUP HOME DURHAM, NC 27701 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual survey was completed on January 11, 2023. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 6 and currently has a census of 5. The survey sample consisted of audits of 3 current clients. V 114 27G .0207 Emergency Plans and Supplies V 114 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plan shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. **DHSR** - Mental Health (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 FEB 0 6 2023 under conditions that simulate fire emergencies. (d) Each facility shall have basic first aid supplies Lic. & Cert. Section accessible for use. See attached This Rule is not met as evidenced by: Based on record review and interview, the facility failed to conduct fire and disaster drills under conditions that simulate emergencies at least quarterly and repeated for each shift. The findings are: Division of Health Service Regulation

LABORATORY DI

TITLE

(X6) DATE

STATE FORM

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		E CONSTRUCTION	(X3) DATE SURVEY COMPLETED					
MHL032-263		B. WING		01/11/2023					
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V 114 Continued From page	Continued From page 1								
Record review on 1, log revealed: -1/12/22- 2nd shift -2/11/22- 1st shift -3/11/22- 1st shift -4/11/22- 1st shift -5/5/22- 1st shift -6/17/22- 1st shift -6/17/22- 1st shift -7/8/22- 1st shift -8/11/22- 1st shift -9/13/22- 1st shift -10/9/22- 1st shift -11/5/22- 1st shift -11/5/22- 1st shift -11/10/22- 1st shift -11/10/22- 1st shift -12/1/22- 1st shift -There was no evide conducted on the 3r 2022There was no evide conducted on the 2r quarter of 2022There was no evide conducted on the 2r quarter of 2022There was no evide conducted on the 2r quarter of 2022.	ence that fire drills had been a shift for the 1st quarter of ence that fire drills had been and 3rd shift for the 2nd ence that fire drills had been and and 3rd shift for the 3rd ence that fire drills had been and and 3rd shift for the 3rd ence that fire drills had been and and 3rd shift for the 24th 11/23 of the facility's disaster	V 114							

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED				
		MHL032-263	B. WING		01/	11/2023			
NAME OF	PROVIDER OR SUPPLIER			STATE, ZIP CODE					
WATTS STREET GROUP HOME 506 WATTS STREET DURHAM, NC 27701									
(X4) ID PREFIX TAG	FIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTI (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	ON SHOULD BE COMPLÉTE HE APPROPRIATE DATE				
V 114	Continued From page 2 -11/11/22- 2nd shift -11/28/22- 1st shift -12/8/22- 2nd shift -11/ere was no evidence that disaster drills had been conducted on the 3rd shift for the 1st quarter of 2022There was no evidence that disaster drills had been conducted on the 2nd and 3rd shift for the 2nd quarter of 2022There was no evidence that disaster drills had been conducted on the 3rd shift for the 4th quarter of 2022. Interview on 1/11/23 with the Assistant Director revealed: -Staff were confused regarding number of drills they had to conductStaff work at the house normally for 7 days and then off for 7 daysAssistant Director acknowledged that Fire and Disaster drills worksheet had three different shifts written in them to be completedFirst shift was from 7:00 am to 3:00 pm. Second shift was from 3:00 pm to 11:00 pm. Third shift was from 11:00 pm to 7:00 amThere was also a calendar of drills to be conducted at three shifts during each quartersShe confirmed staff failed to conduct drills under conditions that simulate emergencies under each shift on each quarter.		V 114						

Durham County Community Living Programs, Inc.

Post Office Box 51159 Durham, N.C. 27717-1159 (919) 489-0682

Watts Street Group Home
MHL # 032-263
Plan of Correction to Survey Completed January 11, 2023

V 114 Fire and Disaster Drills on All Shifts:

To Correct the Deficiency:

I discussed and provided training fire and disaster drills at our staff meeting on January 25, 2023. I assured that staff understands that a fire drill and disaster drill must be held monthly, with one fire drill on each shift in each quarter. We have in place a grid on which to track drills for each program, and I retrained staff to make sure that drills happen as directed from this current quarter forward.

To Prevent the Deficiency from Occurring Again:

Fire drill and disaster drill information will be submitted monthly to program supervisors to track and make sure that drills are occurring as required at each program site. A tracking grid has been developed to be posted at each program site to assure that staff are aware of the requirements of the regulation and are conducting drills appropriately. This tracking form will also be used by program supervisors and the Assistant Director to monitor drills to make sure they occur appropriately. Training will occur annually during our training on handling emergencies and health and safety, and such training will be tracked on a grid generated by our office manager.

Who will Monitor:

Managers are responsible for holding the fire and emergency drills at the proper times and frequency each month and throughout the year. Tracking of drills will occur on the tracking grid. Program supervisors will monitor the fire and disaster drills monthly to make sure that they are occurring as required, by reviewing the fire and emergency drill forms and grid, and/or by participating in the fire/emergency drills. The Assistant Director will monitor the fire and disaster drills monthly to see that they are occurring as per the regulations and will ultimately be responsible for monitoring these drills.

Training will be monitored on a training grid generated by our office manager. Program supervisors will be responsible for monitoring the training of their staff.

How Often the Monitoring will Take Place:

The monitoring will take place monthly.

Executive Director February 3, 2023