STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL067-059	A. BUILDING: _____ B. WING _____	R 04/26/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HILLSIDE COURT	108 HILLSIDE COURT JACKSONVILLE, NC 28540

(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	INITIAL COMMENTS An annual and follow up survey was completed on April 26, 2023. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C, Supervised Living for Adults with Developmental Disabilities. The facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.	V 000		
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.	V 108		

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V 108	Continued From page 1 (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients. This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to ensure staff were currently trained in cardiopulmonary resuscitation (CPR), Heimlich maneuver, and other first aid techniques provided by the American Red Cross, the American Heart Association, or their equivalence for two of five audited staff (Group Home Manager and staff #2). The findings are: Review on 4/26/23 of the Group Home Manager's personnel record revealed: -Date of hire: 7/20/06 -The last documented CPR and first aid training was completed on 6/16/20 and expired on 6/16/22. Review on 4/26/23 of staff #2's personnel record revealed: -Date of hire: 6/10/19 -The last documented CPR and first aid training was completed on 2/2/20 and expired on 2/2/22. Interview on 4/26/23 the Qualified Professional stated: -She would ensure that CPR and first aid training was completed as soon as possible for those that had expired trainings.	V 108		

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V 114	Continued From page 2	V 114		
V 114	27G .0207 Emergency Plans and Supplies 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. (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. (d) Each facility shall have basic first aid supplies accessible for use. 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: Review on 4/26/23 of facility records from 4/1/22 - 3/31/23 revealed: -There were no fire or disaster drills recorded for the 1st weekend shift 7am - 7pm. -There were no fire or disaster drills recorded for the 2nd weekend shift 7pm - 7am. Interview on 4/26/23 staff #1 stated: -1st shift was 7:00am- 3pm. -2nd shift was 3pm- 11pm. -3rd shift was 11pm- 7am. -Weekend shifts were 7am -7pm and 7pm - 7am.	V 114		

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V 114	Continued From page 3 Interview on 4/26/23 the Qualified Professional stated: -1st shift was 7:00am- 3pm. -2nd shift was 3pm- 11pm. -3rd shift was 11pm- 7am. -Weekend shifts were 7am -7pm and 7pm - 7am. -She would ensure drills were completed and documented on every shift. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 114		