

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL011-203</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/13/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>REUTER COTTAGE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>111 COMPTON DRIVE ASHEVILLE, NC 28806</b>
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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><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on May 13, 2024. The complaint was substantiated (Intake #NC00216640). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p> <p>This facility is licensed for 6 and has a current census of 6. The survey sample consisted of audits of 4 current clients.</p>	V 000	<p>V114 - Correction - Residential Director will initiate fire and disaster drills in the current quarter during each shift.</p> <p>V114 - Prevention - Quality Assurance Manager will create a calendar with automated reminders prompting fire and disaster drills with a minimum of once per shift per quarter.</p> <p>V114 - Monitoring - Quality Assurance Manager will have reminders from the automated calendar system to review that a fire or disaster drill was completed. Additionally, once per quarter, the Quality Assurance Manager will complete an audit of the record of fire and disaster drills. Any deficiencies found in internal monitoring will be followed-up with a plan of correction.</p>	
V 114	<p><b>27G .0207 Emergency Plans and Supplies</b></p> <p><b>10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES</b></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 interviews and record reviews, the facility failed to hold fire and disaster drills at least</p>	V 114	<p style="text-align: center;"><b>RECEIVED</b> <b>JUL 08 2024</b> <b>DHSR-MH Licensure Sect</b></p>	

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Division of Health Service Regulation

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V 114	<p>Continued From page 1</p> <p>quarterly for each shift. The findings are:</p> <p>Review on 5/7/24 and 5/8/24 of the facility's fire and disaster drill log revealed:</p> <ul style="list-style-type: none"> <li>-No documentation of fire drills on first shift for third quarter 2023 (July-September).</li> <li>-No documentation of fire drills on first shift for fourth quarter 2023 (October-December).</li> <li>-No documentation of fire drills on first shift for first quarter 2024 (January-March).</li> <li>-No documentation the clients were present for disaster drills on first shift for third and fourth quarter 2023 (July-December).</li> </ul> <p>Interview on 5/9/24 with the Residential Supervisor revealed:</p> <ul style="list-style-type: none"> <li>-Staff determined when fire drills were completed.</li> <li>-Was responsible to make sure drills were completed.</li> </ul> <p>Interview on 5/13/24 with the Residential Director revealed:</p> <ul style="list-style-type: none"> <li>-"I make sure they (fire drills) are done."</li> <li>-"Documenting that it (disaster drills) is happening on campus but not necessarily in the cottage."</li> </ul> <p>Interview on 5/13/24 with the Chief Compliance Officer revealed:</p> <ul style="list-style-type: none"> <li>-Was the responsibility of the Residential Director to make sure drills were completed correctly.</li> <li>-The Quality Assurance Manager would check the fire and disaster drill logs.</li> </ul> <p>Interview on 5/13/24 with the Quality Assurance Manager revealed:</p> <ul style="list-style-type: none"> <li>-Disaster drills were completed even if no clients were present in the facility.</li> <li>-Would alternate who was responsible for completing the fire drills.</li> </ul>	V 114		