

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL065-231	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/19/2024
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NAME OF PROVIDER OR SUPPLIER MCGEE-HUDSON HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1304 DUCKS BILL COURT WILMINGTON, NC 28411
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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 survey was completed on September 19, 2024. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>This facility is licensed for 4 and currently has a census of 4. The survey sample 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) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes.</p> <p>(b) The plans 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 the facility's response to fire emergencies.</p> <p>(d) Each facility shall have a first aid kit accessible for use.</p>	V 114		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 114	<p>Continued From page 1</p> <p>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:</p> <p>Review on 9/19/24 of the facility's documented fire and disaster drills for 7/01/23 - 6/30/24 revealed: -Second quarter (10/01/23 - 12/31/23); no third shift fire or disaster drills documented. -Third quarter (1/01/24 - 3/31/24); no third shift fire or disaster drills documented.</p> <p>Interview on 9/19/24 client #1 stated: -He completed fire drills and disaster drills. -He would "go outside" if there was a fire and "stay inside" if there was a disaster.</p> <p>Interview on 9/19/24 client #3 stated: -She completed fire drills and disaster drills. -She went to "the meeting place outside by the mailbox" for fire drills. -She went to the "bathroom" for disaster drills.</p> <p>Interview on 9/19/24 staff #1 stated: -She had worked at the facility since November, 2022. -Fire and disaster drills were completed monthly.</p> <p>Interview on 9/19/24 staff #2 stated: -She had worked at the facility since 7/12/24. -Fire and disaster drills were completed once a month.</p> <p>Interview on 9/19/24 the Residential Manager stated: -She had worked with the facility since 11/27/23. -Fire and disaster drills were completed each month.</p>	V 114		

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V 114	<p>Continued From page 2</p> <p>-There were three shifts that fire and disaster drills were scheduled to be completed within (7am - 3pm, 3pm - 11pm, and 11pm - 7am)</p> <p>Interview on 9/19/24 the Quality Services Director stated:</p> <p>-Fire and disaster drills were completely monthly and rotated to include each shift.</p> <p>-She would ensure that staff were educated on fire and disaster drill expectations for each shift.</p>	V 114		