

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL034-207	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/21/2024
NAME OF PROVIDER OR SUPPLIER A SURE HOUSE, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 1265 ARBOR ROAD WINSTON-SALEM, NC 27104		
(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 November 21, 2024. 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 4 and has a current census of 2. The survey sample consisted of audits of 2 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 reviews and interviews, the facility failed to conduct fire and disaster drills at least quarterly and for each shift. The findings are:</p> <p>Review on 11/19/24 and 11/21/24 of the facility's fire and disaster drills from November 2023 to November 2024 revealed:</p> <ul style="list-style-type: none"> -No documentation of a fire drill having been conducted from January 2024 through June 2024 for second (3pm to 11pm) and third shifts (11pm to 8:30am); -No documentation of a disaster drill having been conducted from January 2024 to June 2024 for second (3pm to 11pm) and third shifts (11pm to 8:30am); -No documentation of a fire drill having been conducted from April 2024 through June 2024 for first shift (8:30am to 3pm); -No documentation of a fire drill having been conducted from July 2024 to September 2024 for second shift (3pm to 11pm) and third shifts; -No documentation of a disaster drill having been conducted from July 2024 to September 2024 for first (8:30am to 3pm) and third shifts (11pm to 8:30am). <p>Interview on 1/19/24 with client #1 revealed: -He participated in fire and disaster drills and he thought the drills were completed on all shifts.</p> <p>Interview on 1/19/24 with client #2 revealed: -He participated in fire and disaster drills and the drills were completed at different times.</p> <p>Interview on 11/19/24 with staff #1 revealed: -He facilitated fire and disaster drills and "drills were completed quarterly."</p>	V 114		

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V 114	<p>Continued From page 2</p> <p>Interview on 11/20/24 with staff #2 revealed: -He facilitated fire and disaster drills per shift.</p> <p>Interview on 11/20/24 with the Qualified Professional revealed: -She facilitated fire and disaster drills along with regular residential duties while on the weekend shift.</p> <p>Interview on 11/21/24 with the Executive Director (ED) revealed: -"We're missing some documentation;" -She could not say what happened to the documentation for the fire and disaster drills; -Staff completed the drills and "some staff leave the documentation for her (ED) to review and sign off." Other staff sign off on the documentation themselves.</p>	V 114			