

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL0601520</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>02/24/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>BYNUM6 CARE HOME</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3800 COOPERSDALE ROAD CHARLOTTE, NC 28273</b>		
(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 February 24, 2025. Deficiencies were 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 5 and has a current 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 reviews and interviews, the facility failed to conduct fire and disaster drills once per shift per quarter. The findings are:</p> <p>Review on 2/21/25 of the facility's fire and disaster drills from February 2024 to February 2025 revealed: -The facility did not conduct fire and disaster drills during the 10pm to 9:00am weekday shift or the day and night weekend shifts during 1st, 2nd, 3rd and 4th quarters.</p> <p>Interviews on 2/24/25 with clients #2 and #3 revealed: -Had not participated in fire or disaster drills during sleep hours.</p> <p>Interview on 2/21/25 with the Director/Licensee #1 revealed: -There were two shifts during the week, 2pm to 10pm and 10pm to 9am, and two shifts on the weekend, 9am to 9pm and 9pm to 9am. -"The majority of drills are done during the day and not during sleep hours." -Would immediately start conducting fire and disaster drills each shift every quarter.</p>	V 114		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files.</p>	V 131		

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V 131	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to access the Health Care Personnel Registry (HCPR) prior to hire and failed to note each incident of access in the appropriate business records for 3 of 6 audited staff (staff #1, the Qualified Professional (QP) and the Director/Licensee #1 (D/L #1)). The findings are:</p> <p>Review on 2/21/25 of staff #1's record revealed: -A hire date of 9/19/24. -A job description of Direct Support Professional. -No documentation the HCPR was accessed prior to hire.</p> <p>Review on 2/21/25 of the QP's record revealed: -A hire date of 6/10/24. -A job description of QP. -No documentation the HCPR was accessed prior to hire.</p> <p>Review on 2/21/25 of the D/L#1's record revealed: -A hire date of 4/20/22 . -A job description of Director. -No documentation the HCPR was accessed prior to hire.</p> <p>Interview on 2/21/25 with the Administrator/Licensee #2 revealed: -Was responsible for accessing the HCPR prior to hire. -Had checked the HCPR for the facility staff. -Was unable to provide any documentation the</p>	V 131		

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V 131	Continued From page 3  HCPR was accessed prior to hire. -"If I had known that (the initial access of the HCPR checks were needed in each record), I would have printed them off and kept them."	V 131		