

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>mhl092-607</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>06/20/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>BLESSED HOME, LLC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>7005 BRECKEN RIDGE AVENUE</b> <b>RALEIGH, NC 27615</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	INITIAL COMMENTS  An annual and follow up survey was completed on June 20, 2025. A deficiency was cited.  This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.  This facility is licensed for 6 and has a current census of 5. The survey sample consisted of audits of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies  10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (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. (b) The plans 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 the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use.	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 ensure fire and disaster drills were conducted quarterly and on each shift. The findings are:</p> <p>Review on 6/19/25 of facility's fire drills log from June 2024 through June 2025 revealed: -2nd quarter (April, May, and June) 2024: There were no fire drills conducted on 2nd and 3rd shift. -3rd quarter (July, August, and September) 2024: No fire drill conducted on 3rd shift. -4th quarter (October, November, and December) 2024: No fire drill conducted on 3rd shift. -1st quarter (January, February, and March) 2025: No fire drills conducted on 1st and 3rd shift.</p> <p>Review on 6/19/25 of facility's disaster drills log from June 2024 through June 2025 revealed: -There was no disaster drills documented.</p> <p>Interview on 6/19/25 with Client #1 revealed: -"We haven't done any disaster drills."</p> <p>Interview on 6/19/25 with Client #2 revealed: -"I don't remember doing any disaster drills."</p> <p>Interview on 6/19/25 with the Director revealed: -"The staff were doing fire drills once every quarter." -"I didn't realize that a fire drill was supposed to be done on every shift every quarter." -"The staff didn't do any disaster drills." -"I explained to the clients where to go during a disaster drill but didn't perform any drills."</p>	V 114			