

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL041-620	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/02/2025
NAME OF PROVIDER OR SUPPLIER COLTRANE'S GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 3811 REPON STREET GREENSBORO, NC 27407		
(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 July 2, 2025. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability. This facility is licensed for 6 and has a current census of 4. The survey sample consisted of audits of 4 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 review and interview, the facility failed to document disaster drills quarterly for each shift. The findings are:</p> <p>Review on 7/1/25 of the facility's fire and disaster log revealed no documentation of disaster drills for: -January-March 2025 (First Quarter): morning (am) and evening (pm). -April- June 2025 (Second Quarter): am and pm. -July-September 2024 (Third Quarter): am and pm. -October-December 2024 (Fourth Quarter): am and pm.</p> <p>Interview on 6/30/25 with Client #1 revealed: -With disaster drills, "we get on the floor, ball up and put our hands on our heads."</p> <p>Interview on 6/30/25 with Client #2 revealed: -Nodded his head up and down which indicated yes in response to whether he practiced disaster drills.</p> <p>Interview on 6/30/25 with Client #3 revealed: -Responded he had not practiced any disaster drills.</p> <p>Interview on 7/1/25 with Staff #1 revealed: -She was the only direct care staff. -"I was doing them (disaster drills) but did not document them." -"I will make sure the drills are documented from now on."</p>	V 114		