

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-259	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/23/2025
NAME OF PROVIDER OR SUPPLIER FAIRVIEW HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 6 LANNING DRIVE FAIRVIEW, NC 28730		
(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 survey was completed on July 23, 2025. A deficiency wase cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 3 and has a current census of 3. 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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AUG 07 2025
DHSR-MH Licensure Sect

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DocuSigned by:
Nanta Poochinski

Quality Assurance Coordinator

8/4/2025

STATE FORM
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If continuation sheet 1 of 3

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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 ensure fire and disaster drills were held at least quarterly and repeated for each shift. The findings are:</p> <p>Review on 7/23/25 of facility fire and disaster drills revealed: -No fire drills on second shift for first quarter 2025 (January, February, March). -No fire drills on second shift for second quarter 2025 (April, May, June). -No disaster drills on first shift for first quarter 2025 (January, February, March). -No disaster drills on first shift for second quarter 2025 (April, May, June).</p> <p>Interviews on 7/23/25 with Clients #1 and #2 revealed: -Participated in fire and disaster drills. -Knew where to go during drills.</p> <p>Interview on 7/23/25 with Staff #1 revealed: -Fire and disaster drills were completed monthly.</p> <p>Interview on 7/23/25 with Staff #2 revealed: -Fire and disaster drills were done once or twice a month.</p> <p>Interview on 7/23/25 with the House Manager revealed: -Was not aware that drills needed to be done on each shift ... "if I did, would have had them done that way." -Would complete them on each shift moving forward</p> <p>Interview on 7/23/25 with the Qualified Professional revealed: -"We have all staff doing them. Thought we were</p>	V 114		

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V 114	Continued From page 2 rotating them ...everyone is responsible." -She and the House Manager provided oversight for the drills -"We even practice going out of different exits." -"Communication got a little broken down."	V 114	To ensure there are no future discrepancies with how and when drills are conducted in our licensed programs, we have adjusted our process. Going forward, whenever a drill is completed, our Director of Quality & Compliance (DQC) is notified. The DQC passes that information along to the regional Quality Assurance Coordinator (QAC) responsible for the group home or day program. When there are two weeks left in a quarter, the QAC will identify which types of drill(s) still need to be conducted and by which shift. The QAC will work with the residential coordinator to get the drills scheduled and completed. This will ensure no future gaps in reporting. All drill data will be stored in Smartsheet and can be shared with any DHSR reviewers in the licensed program review. This process will be explained to all licensed program directors and leads in an upcoming training that is scheduled for August 8th.	Licensed program coordinators and lead staff will be trained about this process on 8/8/2025 and to put into practice ongoingly