STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL032-498	A. BUILDING: _____ B. WING _____	R 02/08/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MELODY HOUSE#1, LLC	3116 CEDARWOOD DRIVE DURHAM, NC 27707

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on February 8, 2019. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) A written fire plan for each facility and area-wide disaster plan shall be developed and shall be approved by the appropriate local authority. (b) The plan 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 fire emergencies. (d) Each facility shall have basic first aid supplies accessible for use. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to conduct fire and disaster drills under conditions that simulate emergencies. The findings are: Review on 2/7/19 and 2/8/19 of the facility's fire drill log revealed the following: -1/4/19-2nd shift -12/3/18-2nd shift -10/16/18-3rd shift	V 114		

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V 114	Continued From page 1 -9/7/18-3rd shift -5/24/18-2nd shift -4/19/18-2nd shift -There were no 1st or 3rd shift and weekend fire drills conducted during the 2nd quarter of 2018. -There were no 1st or 2nd and weekend fire drills conducted during the 3rd quarter of 2018. -There were no drills conducted during the weekend for the 4th quarter of 2018. Review on 2/7/19 and 2/8/19 of the facility's disaster drill log revealed the following: -12/6/18-no specific time indicated -7/12/18-2nd shift -5/1/18-3rd shift -4/23/18-3rd shift -There were no 1st or 2nd shift and weekend disaster drills conducted during the 2nd quarter of 2018. -There were no 1st or 3rd and weekend disaster drills conducted during the 3rd quarter of 2018. -There were no disaster drills conducted during 1st, 2nd or 3rd and weekend for the 4th quarter of 2018. Interview with client #1 on 2/8/19 revealed: -Staff did fire and disaster drills with them. -She thought they did fire and disaster every three months. Interview with client #2 on 2/8/19 revealed: -Staff did conduct fire and disaster drills with them. -She was not sure how often staff conducted the fire and disaster drills. Interview with client #3 on 2/8/19 revealed: -Staff conducted fire and disaster drills with them. -She thought staff conducted the fire and disaster drills every other month.	V 114		

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V 114	Continued From page 2 Interview with the Program Manager on 2/8/19 revealed: -They had three different staff shifts. -Staff worked 12 hour shifts Monday through Friday. -Staff also worked a continuous shift on the weekends. -She confirmed staff failed to conduct fire and disaster drills under conditions that simulate emergencies. Interview with the Qualified Professional on 2/8/19 confirmed: -Staff failed to conduct fire and disaster drills under conditions that simulate emergencies. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 114		
V 289	27G .5601 Supervised Living - Scope 10A NCAC 27G .5601 SCOPE (a) Supervised living is a 24-hour facility which provides residential services to individuals in a home environment where the primary purpose of these services is the care, habilitation or rehabilitation of individuals who have a mental illness, a developmental disability or disabilities, or a substance abuse disorder, and who require supervision when in the residence. (b) A supervised living facility shall be licensed if the facility serves either: (1) one or more minor clients; or (2) two or more adult clients. Minor and adult clients shall not reside in the same facility. (c) Each supervised living facility shall be licensed to serve a specific population as	V 289		

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V 289	Continued From page 3 designated below: (1) "A" designation means a facility which serves adults whose primary diagnosis is mental illness but may also have other diagnoses; (2) "B" designation means a facility which serves minors whose primary diagnosis is a developmental disability but may also have other diagnoses; (3) "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses; (4) "D" designation means a facility which serves minors whose primary diagnosis is substance abuse dependency but may also have other diagnoses; (5) "E" designation means a facility which serves adults whose primary diagnosis is substance abuse dependency but may also have other diagnoses; or (6) "F" designation means a facility in a private residence, which serves no more than three adult clients whose primary diagnoses is mental illness but may also have other disabilities, or three adult clients or three minor clients whose primary diagnoses is developmental disabilities but may also have other disabilities who live with a family and the family provides the service. This facility shall be exempt from the following rules: 10A NCAC 27G .0201 (a)(1),(2),(3),(4),(5)(A)&(B); (6); (7) (A),(B),(E),(F),(G),(H); (8); (11); (13); (15); (16); (18) and (b); 10A NCAC 27G .0202(a),(d),(g)(1) (i); 10A NCAC 27G .0203; 10A NCAC 27G .0205 (a),(b); 10A NCAC 27G .0207 (b),(c); 10A NCAC 27G .0208 (b),(e); 10A NCAC 27G .0209[(c)(1) - non-prescription medications only] (d)(2),(4); (e) (1)(A),(D),(E);(f);(g); and 10A NCAC 27G .0304 (b)(2),(d)(4). This facility shall also be known as	V 289		

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V 289	Continued From page 4 alternative family living or assisted family living (AFL). This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to meet the scope of a 5600C facility which serves adults whose primary diagnosis is a developmental disability for one of three clients (#1). The findings are: Review on 2/7/19 of the facility license revealed the facility is licensed as a 5600C Supervised Living Facility. Review of the Rules for Mental Health Developmental Disabilities and Substance Abuse Facilities and Services revealed "C" designation means a facility which serves adults whose primary diagnosis is a developmental disability but may also have other diagnoses. Review on 2/7/19 of client #1's record revealed: -Admission date of 4/16/14. -Diagnosis of Schizophrenia-Unspecified Type. -Client #1 had no documentation that indicated a diagnosis of a developmental disability. Interview on 2/8/19 with the Program Manager confirmed: -There was no documentation of client #1 having a primary diagnosis of a developmental disability. Interview with the Licensee on 2/7/19 and 2/8/19 revealed: -Client #1 had just recently gone to her medical physician. -She thought client #1 had some cognitive issues. -She did not realize there was no documentation in client #1's record to indicate a developmental	V 289		

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V 289	Continued From page 5 disability. -She confirmed there was no documentation of client #1 having a primary diagnosis of a developmental disability.	V 289		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to ensure facility grounds were maintained in a safe, clean, attractive and orderly manner. The findings are: Observation on 2/7/19 at approximately 11:25 AM of the facility revealed the following issues: -Den area-cable wire was laying on the floor. The cable wire was extended from den area into the kitchen. There were pieces of trash on the carpet. -Kitchen area-Bottom of cabinet near sink had missing panels. -Client #5 bedroom-The nightstand drawer handle was missing and front panel to the drawer was missing. The door was missing from the closet. There was a television, lamp and pile of clothes on the floor in the closet. -Client #1 bedroom-There were pieces of trash on the floor. The closet door had a hole about the size of a lemon. -Bathroom #1-One of the doors to the cabinet	V 736		

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V 736	Continued From page 6 was missing. -Client #4 bedroom-There were two sets of broken blinds. There were approximately 100 pin holes in the wall. There was a sticky tape residue on the wall. -Bathroom #2-There were approximately 70 pin holes in the wall. There was a grease like residue on the walls. There was a dirt like debris inside the toilet bowl. The door knob was missing to the bathroom door. -Clients' #2 and #3 bedroom-There was a bed sheet hanging over the window. There was peeling paint and dirt like stains on the wall. There was a hole in the wall behind bedroom door about the size of a lemon. Interview with the Program Manager on 2/8/19 confirmed: -The facility was not maintained in a safe, clean, attractive and orderly manner. Interview with Licensee on 2/7/19 revealed: -She was aware of most of the maintenance issues with the group home. -Someone was supposed to come to the home to paint and do some other repairs. -The person doing the repairs was scheduled to come out to the home tomorrow. -She confirmed the facility was not maintained in a safe, clean, attractive and orderly manner. This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 736		