

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL040-027	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 02/28/2019
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NAME OF PROVIDER OR SUPPLIER EDWARDS GROUP HOME #4	STREET ADDRESS, CITY, STATE, ZIP CODE 1269 APPLETREE ROAD STANTONSBURG, NC 27883
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(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 and a follow up survey was completed on February 28, 2019. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p>	V 000		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(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.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility was not maintained in a safe, clean, attractive and orderly manner, free of offensive odor. The findings are:</p> <p>Observations on 2/27/19 between 11 am and 12 noon revealed: -Strong sour odor upon entering the facility and throughout the facility. -Kitchen: 1 broken floor tile; Paint on walls and under the cabinets was stained and worn; counter top surface worn away; paint in cabinets work and stained around the cabinet knobs; baked on spatter inside the stove; the cabinet door under the sink was broken; torn floor vinyl at the air vent beside the back door in the dining area; the bottom of the back door in the dining area had a rotted area. -The vinyl floor covering in the living room was</p>	V 736		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 736	<p>Continued From page 1</p> <p>worn in several places.</p> <ul style="list-style-type: none"> -House flies throughout the facility. -Client #4's bathroom: Rust spots pitted the over sink light fixture; tub surface stained; shower curtain secured with only 3 rings; inside cabinet cluttered with rags, dirt, and brown/black staining. -Client #6's room/bathroom: Bathroom tub surface stained; shower curtain secured with only 4 rings; inside cabinet cluttered with dirt/debris particles, and brown/black staining; brown particles of debris on floor; urine odor present. -Clients #2 and #5's room: Strong pungent odor in room; rust spots pitted the over sink light fixture; trash discarded under the sink to include cup, spoon, plastic bag, cigarette pack, build up of dust/dirt and stains on bottom of the cabinet and back of the door; water leaking on floor when faucet turned on. -Client #1's room/bathroom: Trash, cloths and sock discarded under the bathroom sink, build up of dust/dirt and stains on bottom of the cabinet and back of the door; tub stained. Side chair in room had sunken seat cushion and torn upholstery on both chair arms. -Brown dust buildup on base boards throughout the home. -Outside the front of the home cigarette butts littered the lawn. No receptacle in the area for discarded smoking material. <p>Interview on 2/27/19 the Qualified Professional/Licensee stated:</p> <ul style="list-style-type: none"> -She had made many repairs in the past year. -She had a repairman on staff to help maintain and make repairs as needed. -She would follow up with staff on the cleanliness issues. -Clients were heavy smokers and discarded their old butts on the ground. 	V 736		

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V 736	Continued From page 2 This deficiency has been cited 6 times since the original cite on 6/4/14 and must be corrected within 30 days.	V 736		
V 774	27G .0304(d)(7) Minimum Furnishings 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements: (7) Minimum furnishings for client bedrooms shall include a separate bed, bedding, pillow, bedside table, and storage for personal belongings for each client. This Rule is not met as evidenced by: Based on observation, record review, and interviews, the facility failed to provided minimum furnishings for client bedrooms. The findings are: Observations on 2/27/19 between 11 am and 12 noon revealed: -No bedside tables for clients #2, #3, #4, #5, and #6. -Client #1 had a night stand at the end of his bed used for storage. Interview on 2/17/19 the Qualified Professional/Licensee stated: -She had not understood this was a requirement	V 774		

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V 774	Continued From page 3 if they had other means of storage for clients. -She would make sure clients had a bedside table.	V 774		