

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-401	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/24/2019
--	---	---	---

NAME OF PROVIDER OR SUPPLIER NEW YORK HOMES 1	STREET ADDRESS, CITY, STATE, ZIP CODE 11 WAPITI COURT CANDLER, NC 28715
---	---

(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 survey was attempted on 7/24/19. According to the Licensee there are no clients being served at the facility. The last time clients were served was on 1/12/19.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Individuals of all Disability Groups/ Alternative Family Living.</p> <p>Interview on 7/24/19 with the Licensee and Alternative Family Living provider revealed the two clients in the home were transferred to a different licensed facility for the purpose of re-modeling this facility.</p> <p>Observation of the home on 7/24/19 at approximately 10:am revealed no client items present in the home.</p> <p>Reviw on 7/24/19 of the record for Client #1 revealed: -Admission of 10/29/17 and discharge on 1/12/19. -Diagnoses of Down Syndrome, Attention Deficient Hyperactivity Disorder, Autism and Severe Intellectual Disability. -Treatment Plan dated 10/1/18.</p> <p>Reviw on 7/24/19 of the record for Client #2 revealed: -Admission date of 10/29/17 and discharge on 1/12/19. -Diagnoses of Autism, Intellectual Development Disability, Seizure Disorder, Epidydymites, PICA and Migraine Headaches. -Treatment Plan dated 3/1/18.</p>	V 000		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
--	-------	-----------