

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL074-142</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/24/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>WECARE RESIDENTIAL FACILITY #2</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5293 WHICHARD ROAD STOKES, NC 27884</b>
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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><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on January 24, 2020. A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700, Residential Treatment Staff Secure for Children or Adolescents.</p>	V 000		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p><b>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</b> (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 observations and interviews the facility was not maintained in a safe, clean, orderly manner. The findings are:</p> <p>Observations of the facility on 1/23/20 at approximately 10:40 am revealed: -The bathtub in the hall bathroom had a 2 1/2 inch jagged calking around the top of the bathtub. Two areas approximately 3-4 inches long had buckled with dark buildup visible. -The floor inside the closet in Client #1's bedroom was covered with soiled clothing about 2 feet high which covered the entire floor. -A round 4 inch wide plastered area covering a hole had lifted away which exposed a hole behind Client # 2's bedroom door. -There was a 2 1/2 inch hole in the closet wall of Client #3's closet.</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	Continued From page 1  Interview on 1/23/20 the Assistant Operation Manager stated: -Client #1's laundry day was Thursday. -Client # 3 displayed aggressive behaviors and would cause property damage to the walls. -They would assess the calking around the bathtub. -They would patch all holes in the clients' bedrooms.	V 736		