

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL032-516</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/05/2020</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ROSHAUN'S HOUSE OF CARE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4012 GUESS ROAD</b> <b>DURHAM, NC 27705</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>INITIAL COMMENTS</p> <p>An annual and follow-up survey was completed on March 5, 2020. Deficiency 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 (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 failed to ensure facility grounds were maintained in a safe and attractive manner. The findings are:</p> <p>Observation on 3/4/20 at 9:00 a.m. revealed: -The kitchen floor tile was ripped and torn. -There was black dust on the ceiling fans in the clients bedrooms. -The hallway vent was rusted. -There were dresser knobs missing from the dresser in the back bedroom.</p> <p>Interview on 3/4/20 with the Supervisor in Charge confirmed the issues reported. Reported the Owner was aware and was going to fix the issues.</p> <p>This deficiency constitutes a re-cited deficiency</p>	V 736		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 736	Continued From page 1  and must be corrected within 30 days.	V 736		