

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-516	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 11/06/2020
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NAME OF PROVIDER OR SUPPLIER ROSHAUN'S HOUSE OF CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 4012 GUESS ROAD DURHAM, NC 27705
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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>A complaint and follow survey was completed on November 6, 2020. The complaint was unsubstantiated (Intake #NC00170832). 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 (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 interviews, the facility failed to ensure facility grounds were maintained in a safe, clean, attractive, orderly manner and kept free from offensive odor. The findings are:</p> <p>Observation on 11/5/20 at approximately 9:45 AM of the facility revealed the following issues: -Kitchen area-The refrigerator had a broken door handle. Both sets of blinds hanging to patio door were broken. Stove had grease stains on top and on the door. The hooded portion of the stove had grease stains and rust. The linoleum was torn. The bottom drawer to smaller file cabinet was rusty. The bigger file cabinet bottom drawer was rusty. -Clients #1 and #3's bedroom-There was a musty</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>odor. There was a broken set of blinds. There was peeling paint on the ceiling. The chest of drawers had 7 knobs missing. The door to bedroom had dirt stains no it.</p> <p>-Den area-Both sets of blinds were broken and the floor vent was rusty.</p> <p>-Client #2's bedroom-Doors to closet were off the track. There was a musty odor. The inside of door frame had a crack approximately 1 foot long. There was trash on the carpet.</p> <p>-Bathroom #1-The shower curtain was torn. The shower mat was torn and mildewed. The floor vent was rusty. There was dried feces inside of the toilet bowl.</p> <p>-Client #4's bedroom-The wall had peeling paint. There was a broken set of blinds.</p> <p>-Hallway-Both wall vents were rusty.</p> <p>Interview with staff #1 on 11/5/20 revealed:</p> <p>-He noticed the home was in that condition when he started in February 2020.</p> <p>-He knew the refrigerator, stove and file cabinets all needed to be replaced.</p> <p>-He told the Licensee about most the issues with the home.</p> <p>-The blinds, shower curtain and bath mat were supposed to be replaced this week.</p> <p>-He confirmed the facility failed to ensure facility grounds were maintained in a safe, clean, attractive, orderly manner and kept free from offensive odor.</p> <p>Interview with the Licensee on 11/6/20 revealed:</p> <p>-She was aware of most of the environmental issues with the group home.</p> <p>-They were supposed to be doing some renovations to the group home.</p> <p>-She confirmed the facility failed to ensure facility grounds were maintained in a safe, clean, attractive, orderly manner and kept free from</p>	V 736		

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V 736	Continued From page 2 offensive odor. This deficiency has been cited three times since the original cite on 3/2/18 and must be corrected within 30 days.	V 736		