PRINTED: 09/08/2021 FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL034-336 NAME OF PROVIDER OR SUPPLIER STREET AD			(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED 09/08/2021		
		MHL034-336					
		DDRESS, CITY, S					
	ARE SOLUTIONS AT	719 INI /	AND DRIVE				
	ARE SOLUTIONS AT	KERNEF	RSVILLE, NC 2	27284			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE AC CROSS-REFERENCED TO DEFICIENC	IVE ACTION SHOULD BE COMP ED TO THE APPROPRIATE DA		
V 000	INITIAL COMMENTS		V 000				
	An Annual Survey was completed on September 8, 2021. A deficiency was cited.						
	This facility is licens category:	sed for the following service					
	- 10A NCAC 27G .5600C: Supervised Living for Adults with Developmental Disabilities						
V 736	27G .0303(c) Facili	ity and Grounds Maintenance	V 736				
	EXTERIOR REQU (c) Each facility and maintained in a saf	303 LOCATION AND IREMENTS d its grounds shall be fe, clean, attractive and orderly be kept free from offensive	,				
	Based on interview staff failed to ensur	et as evidenced by: and record review, the facility re the facility and its grounds a safe, clean, attractive and					
	of the exterior of th - grass in front to 18 inches tall	of facility was overgrown, up					
	and unkempt	nt of facility were over grown ng and mattress stacked under					

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Division of Health Service Re STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED 09/08/2021	
		MHL034-336				
IAME OF F	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, ST	TATE, ZIP CODE		
IOME C	ARE SOLUTIONS AT		AND DRIVE RSVILLE, NC 2	7284		
(X4) ID	SUMMARY STATEMENT OF DEFICIENCIES		ID	PROVIDER'S PLAN OF		
PREFIX TAG		Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	HE APPROPRIATE	COMPLET DATE
V 736	Continued From page 1		V 736			
	 backyard of fa unkempt brush in back the entrance to a si grass/weeds and sidewalk Observation on 9-7 of the interior of the kitchen smok ceiling, smoke dete dirty dishes in scuffed wall/p hallway has s end living room ar paint scraped off wall repair in last room (cur right, end of the ha missing d door jamb 6 holes in doorway windows Interview on 9-7-21 "I know it look here" 	growing in cracks of driveway 2-21 at approximately 3:30 pm a facility revealed: e detector bracket attached to actor gone the sink aint in dining area next to desl cuffed wall/paint from end to and bedroom door frames have bathroom needs to be painted rrently unoccupied) on the ll has: loor o missing wood the wall adjacent to the				
	- the grass beir the Co-Director/Lic	why there 's a tire out here" ng overgrown was reported to ensee on 9-6-21 each out to the lawn people or				
	Interview on 9-7-21 Professional revea ealth Service Regulation					

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If continuation sheet 2 of 3

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Division of Health Service Regulation STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL034-336			(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED 09/08/2021	
		MHI 034-336				
			DDRESS, CITY, SI	TATE, ZIP CODE	1 03/	03/00/2021
	ARE SOLUTIONS AT	719 INI 4		,		
	ARE SOLUTIONS AT	KERNER	SVILLE, NC 2	.7284		
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE ACT CROSS-REFERENCED TO 1 DEFICIENC	ION SHOULD BE THE APPROPRIATE	(X5) COMPLET DATE
V 736	Continued From page 2		V 736			
	or every two weeks - the grass bein the Co-Director/Lice - the Co-Director/Lice about all those thin Interview n 9-8-21 w Owner/Director/Lice - outside yard r be done every 2 we - since the last longer than 2 week - the Co-Director "I don ' t know why on him" - the grass wou including the tall we	ng overgrown was reported to ensee 9-3-21 or/Licensee, "will take care of carport, I ' II let them know gs" with the ensee revealed: naintenance was supposed to eeks time it was done, it has been				

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