

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL019-026	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/15/2022
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NAME OF PROVIDER OR SUPPLIER CHATHAM COUNTY GROUP HOME #1	STREET ADDRESS, CITY, STATE, ZIP CODE 320 MARTIN LUTHER KING BLVD SILER CITY, NC 27344
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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 survey was completed on February 15, 2022. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.</p> <p>The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 107	<p>27G .0202 (A-E) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(a) All facilities shall have a written job description for the director and each staff position which:</p> <ul style="list-style-type: none"> (1) specifies the minimum level of education, competency, work experience and other qualifications for the position; (2) specifies the duties and responsibilities of the position; (3) is signed by the staff member and the supervisor; and (4) is retained in the staff member's file. <p>(b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility:</p> <ul style="list-style-type: none"> (1) is at least 18 years of age; (2) is able to read, write, understand and follow directions; (3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and (4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry. <p>(c) All facilities or services shall require that all</p>	V 107		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 107	<p>Continued From page 1</p> <p>applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on records reviews and interview, the facility failed to have a complete personnel record affecting two of three audited staff (the Group Home Manager and Staff #2.) The findings are:</p> <p>Review on 2/15/22 of the Group Home Manager's personnel records revealed: -She was hired on 2/3/20. -She was hired as the Group Home Manager. -There was no proof of education for the Group Home Manager.</p> <p>Review on 2/15/22 of Staff #2's personnel record revealed: -She was hired on 9/20/19. -She was hired as a Residential Support CAP</p>	V 107		

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V 107	Continued From page 2 Aide. -There was no proof of education for Staff #2. Interview on 2/15/22 with the Case Manager revealed: -She thought personnel files were complete. -She was not aware that the Group Home Manager and Staff #2 did not have their proof of education on their file. -She confirmed there were no proof of education for the Group Home Manager and Staff #2.	V 107		
V 736	27G .0303(c) Facility and Grounds Maintenance 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. This Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure facility grounds were maintained in a clean, safe and attractive manner. The findings are: Observation on 2/15/22 at 1:40 pm of Client #1's room (First room to the left) revealed: -Carpet was heavily stained with water damage by the entrance of the room. Observation on 2/15/22 at 1:25 pm of the handicapped accessible bathroom revealed: -Tiles at the bottom of wall next to the shower	V 736		

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V 736	<p>Continued From page 3</p> <p>were bubbling up and coming apart.</p> <ul style="list-style-type: none"> -There was significant mildew/mold on the grout between the tiles inside the shower. -Some of the caulk placed between floor tiles and wall tiles inside the shower was coming apart. <p>Interview on 2/15/22 with the Case Manager revealed:</p> <ul style="list-style-type: none"> -Home belonged to the Department of Housing and Urban Development (HUD.) -HUD was responsible for making repairs. -Agency would sometimes make the repairs and send bills to HUD. -They had had water damage from the bathroom that was outside Client #1's bedroom and the water went into his carpet. -She was not aware that the tiles inside the handicapped accessible bathroom were starting to come out. -She was not aware that the grout between the tiles inside the shower was dirty with mildew/mold as well as caulk coming apart. -She confirmed the facility failed to ensure facility grounds were maintained in a clean, safe and attractive manner. 	V 736		