

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL081-091	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/02/2022
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NAME OF PROVIDER OR SUPPLIER KELLY'S CARE #8	STREET ADDRESS, CITY, STATE, ZIP CODE 1366 COOPER'S GAP ROAD RUTHERFORDTON, NC 28139
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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 complaint survey was completed on March 2, 2022. The complaint was unsubstantiated (intake #NC00185440). 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>This facility is licensed for 9 beds and currently has a census of 6 clients. The survey samples consisted of audits of 3 current clients.</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 was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation on 2/23/22 at approximately 12:50 pm revealed: -In bathroom #2 the bathtub had a dark brown and gray colored stain along the top rim of the tub; the paint on the wall above the tub was chipped and peeling off; the ceiling above the tub had a large gray colored stain. -The bedroom where Client #1 and Client #2</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>resided had a box fan with layers of gray dust on it; a floor fan was missing the front protective grill; a closet door had 2 areas which were dented as if they had been punched and there was splintered wood along the surface; another closet door had a white colored putty textured substance smeared across the front face of the door; there was a large amount of flakes of tobacco scattered across the top of a dresser and along the window sill.</p> <p>-There were numerous cigarette butts laying on the ground beside the outdoor patio.</p> <p>Interview on 2/23/22 with Client #1 revealed: -He stated, "Staff...make sure we do our chores..."</p> <p>Interview on 2/23/22 with Client #2 revealed: -He stated, "We do chores, but not much...I use the dresser to roll smokes..."</p> <p>Interview on 3/2/22 with Staff #1 revealed: -She notified office staff, or called maintenance if repairs were needed at the facility. -She had not noticed the hole in the closet door. -She would pay closer attention to issues that were in need of repair from now on.</p> <p>Interview on 3/2/22 with Staff #2 revealed: -Management staff always sent out maintenance to make repairs any time an issue was reported.</p> <p>Interview on 3/2/22 with the House Supervisor revealed: -She was at the facility frequently and if she noticed something that needed attention she would report it to the main office.</p> <p>Interview on 3/2/22 with the Director of Operations revealed:</p>	V 736		

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V 736	Continued From page 2 -Direct care staff usually noticed issues with maintenance and cleaning. -Supervisors visited the facility on a regular basis. -Any staff member could submit a maintenance request. -There was one full time maintenance staff and several that worked part time for the facility. -The closet doors had been replaced and the other cleaning and maintenance issues had been addressed.	V 736		