

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL092-946	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 06/10/2022
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NAME OF PROVIDER OR SUPPLIER ABSOLUTE HOME - MARCONY WAY	STREET ADDRESS, CITY, STATE, ZIP CODE 3316 MARCONY WAY RALEIGH, NC 27610
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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 6/10/22. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 6 licensed beds and currently has a census of 6. The survey sample 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 interview the facility failed to ensure the home was maintained in a safe, clean and attractive manner. The findings are:</p> <p>Observation on 6/7/22 at 9:30 AM of the home revealed:</p> <ul style="list-style-type: none"> -Kitchen - Missing the lift rod from the faucet - 2 cabinet drawers were broken and off track leaning downward and unable to close 	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>Hallway Bathroom -2 out of 4 light bulbs missing -Cracked escutcheon on the right side from the bottom to the top of the sink faucet</p> <p>Upstairs Bedroom #1 -1 of 2 broken drawer in dresser -Several slats were broken or missing</p> <p>Downstairs sitting area -Ceiling had brown stains the size of 2 large beach balls</p> <p>During interview on 6/7/22 the Qualified Professional stated: -The kitchen faucet must have just broken -Unaware the dresser in bedroom #1 was broken, will replace -Will make a list for the licensee to ensure maintenance will get these items fixed.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		