

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL026-964</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>08/03/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>COLLEGE LAKES</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5104 FLATROCK DRIVE FAYETTEVILLE, NC 28311</b>
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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><b>INITIAL COMMENTS</b></p> <p>An annual and follow up survey was completed on August 3, 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>This facility is licensed for 4 and currently has a census of 4. 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><b>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</b> (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 was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation on 8/3/22 at approximately 10:30am during tour of the facility revealed: -There were 3 large white paint patched areas on the wall to the right of the entrance. -The center wall near the entrance had 2 large and 1 painted patched areas on one side of the wall and 1 painted patch on the other side. -The living room had 3 large painted patched areas between the two windows. -The living room floor vent was covered in brown</p>	V 736	<p style="text-align: center;"><b>RECEIVED</b> <b>AUG 29 2022</b> <b>DHSR-MH Licensure Sect</b></p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *[Signature]* TITLE *SP* (X6) DATE *8/24/22*

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V 736	<p>Continued From page 1</p> <p>spots.</p> <ul style="list-style-type: none"> <li>-The carpet had 3 lines torn approximately 6 inches to 12 inches.</li> <li>-The main hallway had large areas of white paint patches.</li> <li>-There was a square shaped hole in the hallway near client #3's bedroom.</li> <li>-There was a large painted patch area on both sides of the door behind the couch.</li> <li>-The perimeter of client #1's bedroom was missing drywall and exposed the frame and insulation.</li> <li>-There were no closet doors in client #1's bedroom.</li> <li>-Client #4 bedroom door have had 2 crack areas approximately 4 by 4 inches each.</li> <li>-The bathroom in client #4's bedroom was missing a door.</li> <li>-The bathroom in client #4's bedroom was missing a water tank lid.</li> <li>-The smoke detector in the hallway and client #3's bedroom was chirping about every minute.</li> <li>-There was a circular hole about the size of a grapefruit in client #3's bedroom near the closet.</li> <li>-The hallway bathroom bathtub facet was missing a hot water knob.</li> <li>-There was water leaking from under the sink when the water was turned on.</li> <li>-The kitchen cabinets were missing knobs, 2 cabinets were off alignment and a cabinet door was missing.</li> <li>-Client #2's bedroom closet had a missing door.</li> <li>-There were no window curtains or privacy glass in client #2's bedroom.</li> <li>-Client #2's chest dresser had 2 broken drawers and dresser had drawers off tracks.</li> <li>-The laundry room/bathroom had white paint spots near the toilet and sink.</li> </ul> <p>Interview on 8/2/22 and 8/3/22 the Director of</p>	V 736		

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V 736	<p>Continued From page 2</p> <p>Services/Qualified Professional stated: -Client #1's had caused most of the damage to the facility. -A discharge had been in place since October 2021 but no placement had been located for client #1. -Repairs needed from damage caused by client #1 was around of \$10,000. -Repairs were on hold pending client #1's discharge.</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		
V 774	<p>27G .0304(d)(7) Minimum Furnishings</p> <p>10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT</p> <p>(d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements:</p> <p>(7) Minimum furnishings for client bedrooms shall include a separate bed, bedding, pillow, bedside table, and storage for personal belongings for each client.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to provide minimum furnishings for client bedrooms. The findings are:</p>	V 774		

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V 774	<p>Continued From page 3</p> <p>Observation on 8/3/22 at approximately 10:30am during tour of the facility revealed:</p> <ul style="list-style-type: none"> <li>-Client # 1, client #2 and client #4's mattresses were on the floor. There were no bed rails or frame.</li> </ul> <p>Interview on 8/3/22 the Director of Services/Qualified Professional stated:</p> <ul style="list-style-type: none"> <li>-Client #2 broke his bed by "flopping" on his bed.</li> <li>-Client #4 intentionally broke his bed when he found out client #2 was getting a new bed.</li> <li>-Client #1 broke his bed a while ago.</li> <li>-Client #2 and client #4 beds were recently broken.</li> <li>-She planned to purchase beds for the clients this week.</li> </ul>	V 774		

Findings	Corrective Measures	Preventive Measures	Responsible Party/ How often	Time Frame
10A NCAC 27G . 0303 LOCATION AND EXTERIOR REQUIREMENTS	Meeting with staff individually or together to get ideas of better systems that may work with making sure work orders are being reported at the appropriate time frame	Work orders will be called in at the time of property destruction. Administration staff will pass work order to maintenance and work will be completed within a two week time frame depending on supplies needed for damage	Administration Staff As needed	30 Days
10A NCAC 27G . 0304 (d)(7) FACILITY DESIGN AND EQUIPMENT	Monthly inventory's and weekly check ins on individuals personal belongings	Each staff will complete an inventory that will be turned in to management to resolve any issues found within a 1-2 week time frame	Operational Manager Staff Monthly	60 Days