STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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V 000	INITIAL COMMENTS An annual and complaint survey was completed on December 7, 2022. The complaint was substantiated (Intake #NC00195454). Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 3 and currently has a census of 3. The survey sample consisted of audits of 3 current clients.	V 000		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications. (4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and	V 118		

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(E) name or initials of person administering the drug.
(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.

This Rule is not met as evidenced by:
Based on observation, record reviews and interviews the facility failed to document on the MARs immediately after administering medications affecting 1 of 3 clients (client #3).
The findings are:

Observation on 12/5/22 at 11:53am of a nation drug store chain's delivery man revealed:
-Client #3's MAR was delivered to the facility

Review on 12/5/22 of client #3's record revealed:
-An admission date of 10/14/22
-Diagnoses of ADHD and Intellectual Disability
-An assessment dated 10/12/22 noted "is a 23-year-old male and will be transitioned from the hospital to a residential treatment facility, has aggressive behaviors and a medical diagnosis of Chronic Kidney Disease, Seizure Disorder, Hypothyroidism and Hyperparathyroidism. Had been in the hospital since August 2022, was involuntarily committed after a verbal and physical altercation with his mother, resulting in his mother having sustained injuries to her mouth, his mother confronted him about an inappropriate relationship he was having with a former coworker who was 55 years old. This relationship

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has been exploitative, the client had given this person money and has been convinced by the person that she will become his guardian and he will live with her. While in the hospital, client had multiple phone interactions with this person, but this has since been limited. A protective order and court proceedings will ensure in the days to come ...the relationship caused tension within the family household and safety concerns have increased. In the past, when he became upset, he would bang doors and punch doors and pinned his mother's arm behind her back when mad at here, other safety concerns include him leaving the stove on, using alcohol, and taking the care, due to safety concerns, his mother is seeking out of home placement."
-A treatment plan dated 10/12/22 noted " daily, he will thoroughly complete his hygiene routine with no more than 3 verbal prompts, will participate in small meal prep weekly with no more than 3 verbal prompts, will participate in scheduled community and in-home activities throughout the plan year, will utilize coping and anger management skills when upset with no more than 2 verbal prompts by staff, will socialize appropriately with his peers and staff at home and in the community with no more than 2 verbal prompts, will follow the rules and schedules of the residential program daily, will complete a daily chore with no more than 2 verbal prompts."

Review on 12/5/22 of client #3's physician's orders, dated 10/14/22, revealed:
- Amlodipine 5 milligrams (mgs), one by mouth daily (1 po qd), Carvedilol 125 mgs, one by mouth every 12 hours (1 po q 12 hours), Clobazam 5 mgs, one by mouth every night (1 po qhs), Lacosamide 150 mgs 1 po q 12 hours, Lamotrigine 250 mgs q 12 hours, Sertraline 100 mgs, 1 po qd, Topiramate 250 mgs, 1 po q 12

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V 118	Continued From page 3 hours, Ziprasidone 50 mgs, 1 po qd and Ziprasidone 80 mgs, 1 po q 12 hours Review on 12/5/22 of client #3's MARs, from 12/1/22 to 12/5/22, revealed: -No MAR for the month of December 2022 -No documentation of prescription medication doses administered 12/1/22 through 12/5/22 Review on 12/5/22 of client #3's medication count sheets from 12/1/22 to 12/5/22 revealed: -Documentation of prescription medication doses administered on 12/1/22 and 12/5/22 Interview on 12/5/22 with staff #1 revealed: -Had been trained on medication administration -Administered medications to the clients -This was her 3rd day of work -Had documented the medications administered to client #3 on his medication count sheet -"I did that because I was not able to find his December 2022 MAR." Interview on 12/5/22 with the Director/Licensee #1 revealed: -Was not aware the pharmacy had not delivered client #3's MAR to the facility -All facility staff had been trained on medication administration -Would call the pharmacy to see where client #3's MAR for December 2022 could be delivered to the facility -Would ensure facility staff used the MAR to document administration of medications instead of the medication count sheet.	V 118		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification	V 131		

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V 131	Continued From page 4 G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to access the Health Care Personnel Registry (HCPR) prior to hiring affecting 2 of 3 audited staff (staff #2 and the Qualified Professional (QP). The findings are: Review on 12/5/22 of staff #2's record revealed: -A hire date of 2/22/22 -HCPR accessed on 5/31/22 Review on 12/5/22 of the QP's record revealed: -A hire date of 2/14/22 -HCPR accessed on 4/20/22 Interview on 12/5/22 with the Director/Licensee #2 revealed: -Was aware the HCPR was to be accessed prior to hire for staff -Was not sure why the HCPR was accessed late -Would ensure new hires had the HCPR accessed prior to hire	V 131		
V 132	G.S. 131E-256(G) HCPR-Notification, Allegations, & Protection	V 132		

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V 132	Continued From page 5 G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (g) Health care facilities shall ensure that the Department is notified of all allegations against health care personnel, including injuries of unknown source, which appear to be related to any act listed in subdivision (a)(1) of this section. (which includes: a. Neglect or abuse of a resident in a healthcare facility or a person to whom home care services as defined by G.S. 131E-136 or hospice services as defined by G.S. 131E-201 are being provided. b. Misappropriation of the property of a resident in a health care facility, as defined in subsection (b) of this section including places where home care services as defined by G.S. 131E-136 or hospice services as defined by G.S. 131E-201 are being provided. c. Misappropriation of the property of a healthcare facility. d. Diversion of drugs belonging to a health care facility or to a patient or client. e. Fraud against a health care facility or against a patient or client for whom the employee is providing services). Facilities must have evidence that all alleged acts are investigated and must make every effort to protect residents from harm while the investigation is in progress. The results of all investigations must be reported to the Department within five working days of the initial notification to the Department.	V 132		

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This Rule is not met as evidenced by:
Based on record reviews and interviews, the facility failed to report allegations of abuse to the Health Care Personnel Registry (HCPR). The findings are:

Review on 12/5/22 of the facility's level III incident reports revealed:
-No documentation the HCPR was notified of an allegation of lack of supervision by staff #2 which occurred on 10/28/22

Review on 12/5/22 of the facility's Internal Investigation, dated 10/31/22 and completed by the Qualified Professional/Program Director (QP/PD), revealed:
-"[Client #3] reported to his mother that [staff #2] left him and two other individuals in a car alone. [The QP/PD] interviewed [client #3] to get more information, after being informed by his mother. [Client #3] could not give details as to how long they were in the car or where they were located. [The QP/PD] also spoke with his mother who confirmed he did not tell her where they were or how long. [The Director/Licensee #2] was contacted."

Review on 12/5/22 of staff #2's Disciplinary Action Form, dated 10/31/22, revealed:
-"Disciplinary Suspension. Staff will display knowledge of appropriate supervision of individuals served as evidenced by not leaving

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them unattended."
-Staff #2's statement "I would never hurt the clients in any way. I need my job and I'm sorry."

Observation on 12/5/22 at 8:33am of client #1 revealed:
-Was non-verbal

Interview on 12/5/22 with client #3 revealed:
-"Staff won't let me stay alone by myself."
-"[Client #1] cannot be left alone. You know he can't."
-"[Staff #2] drove me to places. All three of us were in [staff #2]'s car. It is a sky gray color. I was left alone in his car, and he told me I was in charge. He was gone for quite some time...we were in a parking lot. A big parking lot. It was away from the house...[client #1] bit and scratched [former client #4]. I got [client #2] off of him. I took my seatbelt off. I told [staff #2] about it. I had no choice but to. He (staff #2) left us alone ..."
-Was unable to state when he and the other clients were left alone in the car by staff #2
-Was unable to state where he and the other clients were when the incident occurred.
-"You can ask my mom. She said it would be dealt with ..."

Interview on 12/6/22 with client #3's Legal Guardian revealed:
-Had knowledge of the incident that occurred with staff #2
-Stated "[client #3] told me that him and 2 other residents (client #1 and former client #4) were with a staff person (staff #2) and the staff person had them with him while running errands and the staff left them in the car. [Client #3] did not say where they were. He was really new (to the facility) and had only been there 2 months. I do

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know it happened early on when he was placed there."
-"I was told they were going to a fall festival, so it was in the month of October (2022). I was told by [client #3], there were multiple stops and during one stop something happened with one of the clients who is non-verbal (#1). That client started hitting one of the other clients and [client #3] was trying to break it up."
-"I reported the incident to [the Director/Licensee #2]. He told me he would investigate the incident and I heard back from him that he was going to terminate the young man. The staff's name was [staff #2's name] ...I am okay with it since he has been retrained so it does not happen again ..."

Interview on 12/6/22 with staff #2 revealed:
-Had not left any clients unsupervised in a car

Interview on 12/5/22 with the QP/PD revealed:
-Had not reported the incident on 10/28/22 to the HCPR
-Had conducted an internal investigation which was unsubstantiated
-Had suspended staff #2 from the schedule for 3 days
-Had retrained staff #2 on supervision of all the clients

Interview on 12/5/22 with the Director/Licensee #2 revealed:
-Had suspended staff #2 from the schedule for 3 days until the internal investigation could be completed
-The internal investigation was unsubstantiated due to lack of evidence
-The QP/PD had retrained staff #2
-Would ensure any future allegations against facility staff were reported to the HCPR

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V 133	G.S. 122C-80 Criminal History Record Check G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT. (a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter. (b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall	V 133		

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V 133	Continued From page 10 return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency. (c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant:	V 133		

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V 133	Continued From page 11 (1) The level and seriousness of the crime. (2) The date of the crime. (3) The age of the person at the time of the conviction. (4) The circumstances surrounding the commission of the crime, if known. (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled. (6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed. (7) The subsequent commission by the person of a relevant offense. The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant. (d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for: (1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual. (2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section. (e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or	V 133		

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V 133	Continued From page 12 felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A, Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.	V 133		

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V 133	Continued From page 13 (f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor. (g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met: (1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10. (2) The provider shall submit the request for a criminal history record check not later than five business days after the individual begins conditional employment. (2000-154, s. 4; 2001-155, s. 1; 2004-124, ss. 10.19D(c), (h); 2005-4, ss. 1, 2, 3, 4, 5(a); 2007-444, s. 3.) This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to request a criminal record check within 5 days of making the conditional offer of employment for 1 of 3 audited staff (The Qualified Professional/Program Director (QP/PD)). The findings are: Review on 12/5/22 of the QP/PD's record revealed: -A hire date of 2/14/22 -A criminal record was requested on 4/20/22	V 133		

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V 133	Continued From page 14 Interview on 12/5/22 with the Director/Licensee #2 revealed: -Was aware criminal record requests were to be requested within 5 business days of making the conditional offer of employment -Was not sure why the QP/PD's criminal record request was late -Would ensure new hires criminal records were requested within 5 business days	V 133		
V 367	27G .0604 Incident Reporting Requirements 10A NCAC 27G .0604 INCIDENT REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS (a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information: (1) reporting provider contact and identification information; (2) client identification information; (3) type of incident; (4) description of incident; (5) status of the effort to determine the cause of the incident; and (6) other individuals or authorities notified	V 367		

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or responding.
(b) Category A and B providers shall explain any missing or incomplete information. The provider shall submit an updated report to all required report recipients by the end of the next business day whenever:
(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or
(2) the provider obtains information required on the incident form that was previously unavailable.
(c) Category A and B providers shall submit, upon request by the LME, other information obtained regarding the incident, including:
(1) hospital records including confidential information;
(2) reports by other authorities; and
(3) the provider's response to the incident.
(d) Category A and B providers shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18).
(e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary via electronic means and shall include summary information as follows:
(1) medication errors that do not meet the

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definition of a level II or level III incident;
(2) restrictive interventions that do not meet the definition of a level II or level III incident;
(3) searches of a client or his living area;
(4) seizures of client property or property in the possession of a client;
(5) the total number of level II and level III incidents that occurred; and
(6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph.

This Rule is not met as evidenced by:
Based on record reviews and interviews the facility failed to submit Level III incident reports to the Local Management Entity (LME) within 72 hours as required. The findings are:

Review on 12/5/22 of the facility's level III incident reports revealed:
-No documentation the LME was notified of an allegation of lack of supervision by staff #2 which occurred on 10/28/22

Review on 12/5/22 of the facility's Internal Investigation, dated 10/31/22 and completed by the Qualified Professional/Program Director (QP/PD), revealed:
-"[Client #3] reported to his mother that [staff #2] left him and two other individuals in a car alone.

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[The QP/PD] interviewed [client #3] to get more information, after being informed by his mother. [Client #3] could not give details as to how long they were in the car or where they were located. [The QP/PD] also spoke with his mother who confirmed he did not tell her where they were or how long. [The Director/Licensee #2] was contacted."

Review on 12/5/22 of staff #2's Disciplinary Action Form, dated 10/31/22, revealed:
-"Disciplinary Suspension. Staff will display knowledge of appropriate supervision of individuals served as evidenced by not leaving them unattended."
-Staff #2's statement "I would never hurt the clients in any way. I need my job and I'm sorry."

Observation on 12/5/22 at 8:33am of client #1 revealed:
-Was non-verbal

Interview on 12/5/22 with client #3 revealed:
-"Staff won't let me stay alone by myself."
-"[Client #1] cannot be left alone. You know he can't."
-"[Staff #2] drove me to places. All three of us were in [staff #2]'s car. It is a sky gray color. I was left alone in his car, and he told me I was in charge. He was gone for quite some time...we were in a parking lot. A big parking lot. It was away from the house...[client #1] bit and scratched [former client #4]. I got [client #2] off of him. I took my seatbelt off. I told [staff #2] about it. I had no choice but to. He (staff #2) left us alone ..."
-Was unable to state when he and the other clients were left alone in the car by staff #2
-Was unable to state where he and the other clients were when the incident occurred.

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-"You can ask my mom. She said it would be dealt with ..."

Interview on 12/6/22 with client #3's Legal Guardian revealed:
-Had knowledge of the incident that occurred with staff #2
-Stated "[client #3] told me that him and 2 other residents (client #1 and former client #4) were with a staff person (staff #2) and the staff person had them with him while running errands and the staff left them in the car. [Client #3] did not say where they were. He was really new (to the facility) and had only been there 2 months. I do know it happened early on when he was placed there."
-"I was told they were going to a fall festival, so it was in the month of October (2022). I was told by [client #3], there were multiple stops and during one stop something happened with one of the clients who is non-verbal (#1). That client started hitting one of the other clients and [client #3] was trying to break it up."
-"I reported the incident to [the Director/Licensee #2]. He told me he would investigate the incident and I heard back from him that he was going to terminate the young man. The staff's name was [staff #2's name] ...I am okay with it since he has been retrained so it does not happen again ..."

Interview on 12/6/22 with staff #2 revealed:
-Had not left any clients unsupervised in a car

Interview on 12/5/22 with the QP/PD revealed:
-Had not submitted the incident into the Incident Response Improvement System (IRIS)
-Had conducted an internal investigation which was unsubstantiated
-Had suspended staff #2 from the schedule for 3 days

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V 367	Continued From page 19 -Had retrained staff #2 on supervision of all the clients Interview on 12/5/22 with the Director/Licensee #2 revealed: -Had suspended staff #2 from the schedule for 3 days until the internal investigation could be completed -The internal investigation was unsubstantiated due to lack of evidence -The QP/PD had retrained staff #2 -Would ensure any future allegations against facility staff were submitted within the 72-hour mandated time frame	V 367		
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 observations and interviews, the facility was not maintained in a clean, safe, attractive, and orderly manner. The findings are: Observations of the facility from 8:30am to 9:04am on 12/5/22 revealed: -A hole in the door of the staff's office -The refrigerator's right handle was loose -Inside the right side of the refrigerator, all the shelves were missing	V 736		

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-All three of the chairs at the kitchen table wobbled
-One of the three chairs was missing the back
-One of the two doors to the laundry closet was off track
-One of the lower cabinet's doors near the dishwasher would not close
-The carpeted stairs were stained
-The last drawer to client #1's dresser would not close
-1 of the lights in the hallway's bathroom vanity was burned out
-There was a towel bracket in the bathroom with no rod
-Client #2's bedroom door had a hole behind it
-The lamp in client #2's bedroom was missing the shade
-A mattress, rails and a head board was leaning against the wall in client #2's bedroom
-Client #3's bedroom had empty water bottles, a belt, shoes, and bed linen on the floor
-Client #3's bathroom had a sticky floor, stains under the light switch, red stains on the vanity
-Client #3's bathroom tub was dirty
-In and around client #3's bathroom toilet was dirty
-Client #3's bathroom had a one inch by one inch hole in the wall on the right side
-Client #3's bedroom outlet had black wires exposed with no outlet plate

Interview on 12/5/22 with client #2 revealed:
-The items leaning against his bedroom wall "was like that when I moved in."

Interview on 12/5/22 with client #3 revealed:
-"I have not cleaned up my room yet."

Interview on 12/5/22 with the Director/Licensee #1 revealed:

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V 736	Continued From page 21 -Had put in work orders to the maintenance department for the repairs -Would contact the maintenance man again to see what the status of the needed repairs were.	V 736		