STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER COMPLETED A. BUILDING: MHL067-091 B. WING 03/27/2024 RECEIVED NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 109 LINDSEY DRIVE AFK 4 5 2024 NANTUCKET JACKSONVILLE, NC 28540 PROVIDER'S PLAN OF CORRECTION (X5)
(EACH CORRECTIVE ACTION MIND LICE SECTOMPLETE SUMMARY STATEMENT OF DEFICIENCIES (X4) ID ID PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DATE TAG DEFICIENCY) V 000 INITIAL COMMENTS V 000 736 **Facility** Grounds Maintenance An annual, complaint and follow up survey was As evidenced from the review on completed on March 27, 2024. The complaint 03/27/2024, it was determined that was unsubstantiated (intake #NC00214548). Nantucket Residential did fail to follow Deficiencies were cited. the instructions for maintaining the rules as set forth for minor maintenance for This facility is licensed for the following service the home. category: 10A NCAC 27G .5600C, Supervised The plan has been put in place: Living for Adults with Developmental Disabilities. The kitchen floor had a small, ripped area in the vinyl at the The facility is licensed for 4 and currently has a threshold of the den area. census of 2. The survey sample consisted of Hobb's flooring was contacted audits of 2 current clients. and was scheduled for repair. President decided to have the V 736 27G .0303(c) Facility and Grounds Maintenance V 736 kitchen whole vinyl floor replaced instead of patch and 10A NCAC 27G .0303 LOCATION AND age of vinyl. Replacement is **EXTERIOR REQUIREMENTS** scheduled for April 26, 2024. (c) Each facility and its grounds shall be PLAN: Program Manager will maintained in a safe, clean, attractive and orderly put in a work order at any time manner and shall be kept free from offensive there is a small tear or rip in odor. flooring to keep from turning into a hazard or safety concern in This Rule is not met as evidenced by: the long run. Based on observation and interview, the facility The den had a small hole in the was not maintained in a safe, clean, attractive carpet. Hobb's flooring was and orderly manner. The findings are: contacted and was scheduled for repair. Hobb's Flooring Observation on 03/27/24 at approximately indicated the hole was very 10:14am and 2:00pm revealed: small enough be patch but - The kitchen linoleum floor had torn areas near President decided to have the the threshold of the den area. whole den recarpeted instead of -The den area had a hole in the carpet. patching and age of carpe. - One of the windows in client #2's bedroom Replacement is scheduled for would not stay open when lifted. April 26, 2024. Plan: Program - Client #2's tile shower had dark areas of grout. Manager will put in a work order - Client #1's bedroom had a softball sized white at any time there is a small tear unpainted patch on the wall. The corner behind or rip in flooring to keep from the chair in the room had a large white unpainted turning into a hazard or safety area. The ceiling fan had 1 of 4 light bulbs that concern. Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE (X6)/ĎATE

Division of Health Service Regulation

STATE FORM

Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY (X2) MULTIPLE CONSTRUCTION STATEMENT OF DEFICIENCIES COMPLETED AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING: B. WING 03/27/2024 MHL067-091 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 109 LINDSEY DRIVE NANTUCKET JACKSONVILLE, NC 28540 PROVIDER'S PLAN OF CORRECTION (X5)SUMMARY STATEMENT OF DEFICIENCIES (X4) ID COMPLETE (EACH CORRECTIVE ACTION SHOULD BE (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** PREFIX CROSS-REFERENCED TO THE APPROPRIATE DATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) V 774 V 774 Continued From page 2 The items in two vacant rooms have been removed and bedding and pillow. furnished as/for bedrooms. Explanation: CRS has always Interview on 03/27/24 the Program Manager wanted clients to have their stated: choice furnishings. We had - The facility had 2 vacant rooms. always wanted to let clients - One of the previous clients took their personal choose their own furnishings for bed with them at discharge. their personal space. Clients have always toured the facility Interview on 03/27/24 the Qualified Professional before moving in. If clients did stated she was not aware vacant licensed client not have furnishings before rooms were required to be furnished. moving in, CRS shopped with them prior to them moving in & they chose what they liked and we would have everything prepared for them upon arrival. Plan: Corrected. Rooms have been furnished. QP purchased furniture for both rooms 4/17/2024. Rooms will always remain furnished by Admin and QP's. V 744 Facility Design & Equipment One client had just recently moved and had taken belonging with them. The two vacant rooms have been furnished with all requirements as stated in the rules. Explanation as stated above (f) for the reason. All rooms will always remain furnished. Plan: At any time, a client moves out and chooses to take the furnishings with them, CRS with purchase new furnishings within 30 days in case the client does not return to the facility. QP purchased furniture for both rooms on 4/17/2024. Rooms will always remain furnished by QP and Admin. OP will monitor house checks monthly with Program Manager

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FORM APPROVED Division of Health Service Regulation (X3) DATE SURVEY STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: \_ R B. WING MHL067-091 03/27/2024 STREET ADDRESS, CITY, STATE, ZIP CODE NAME OF PROVIDER OR SUPPLIER 109 LINDSEY DRIVE NANTUCKET JACKSONVILLE, NC 28540 PROVIDER'S PLAN OF CORRECTION SUMMARY STATEMENT OF DEFICIENCIES (X5) COMPLETE (X4) ID (EACH CORRECTIVE ACTION SHOULD BE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX PREFIX DATE CROSS-REFERENCED TO THE APPROPRIATE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) V 736 V 736 Continued From page 1 c. Client # 2 bedroom window would not stay lifted. President did not work. contacted - The 2 vacant client bedrooms held storage Contractor, on 4/16/2024. came and inspected the window on 4/23/2024. On Interview on 03/27/24 the Qualified Professional 4/24/2024 a window stated she had no additional questions regarding ordered for replacement. the items identified for maintanence. ndicated depending on shipment, the window should be V 774 27G .0304(d)(7) Minimum Furnishings V 774 received and replaced by May 10th, 2024. Plan: Program will 10A NCAC 27G .0304 FACILITY DESIGN AND check windows in clients rooms **EQUIPMENT** during monthly house checks for (d) Indoor space requirements: Facilities licensed safety & notify admin if needed. prior to October 1, 1988 shall satisfy the minimum d. Client # 2 bathroom shower square footage requirements in effect at that stall grout discolored. There is time. Unless otherwise provided in these Rules, no mold or bacteria and is just residential facilities licensed after October 1. aged over time. We tried all 1988 shall meet the following indoor space types of cleaners and there was requirements: no change. President chose to (7) Minimum furnishings for client bedrooms shall just pay someone to come in include a separate bed, bedding, pillow, bedside and put a recoat of top grout table, and storage for personal belongings for over the old grout. This is each client. scheduled for 4/27/2024 by Plan: maintenance man. Program Manager will continue to inform landlord of complaint. e. Client 1 bedroom paint areas are scheduled to be painted This Rule is not met as evidenced by: maintenance man on 4/27/2024. Based on observation and interview the facility Plan: At any time, repairs failed to have minimum furnishings for a client (holes, scrapes, etc.) are done bedroom which included a separate bed. on a wall, Program Manager will bedding, pillow and bedside table. The findings assure painting of the wall is completed as well and if

Observation on 03/27/24 at approximately

- Various items for storage.

10:14am of 2 vacant client rooms revealed:

- No minimum furnishings to include a bed,

5899

assistance is needed contact

admin. One Light bulb replaced

in ceiling fan and Program

Manager will ensure all bulbs

are up and always working.