Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION (X3) DATE SURVEY IDENTIFICATION NUMBER: A. BUILDING: COMPLETED R MHL060-648 04/22/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 9709 BATTEN COURT **TURN AROUND** MINT HILL, NC 28227 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE PREFIX TAG REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 A follow up and complaint survey was completed on 4-22-24. One complaint was substantiated (Intake #NC00215128) and one was unsubstantiated (Intake #NC00215321). DHSR-MH Licensure Sect Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential BECEINED Treatment Staff Secure for Children or Adolescents This facility is licensed for four and currently has a census of two. The survey sample consisted of audits of two current clients and one former client. V 539 27F .0102 Client Rights - Living Environment V 539 10A NCAC 27F .0102 LIVING **ENVIRONMENT** (a) Each client shall be provided: (1) an atmosphere conducive to uninterrupted sleep during scheduled sleeping hours, consistent with the types of services being provided and the type of clients being served; and accessible areas for personal privacy, (2)for at least limited periods of time, unless determined inappropriate by the treatment or habilitation team. (b) Each client shall be free to suitably decorate his room, or his portion of a multi-resident room, with respect to choice, normalization principles, and with respect for the physical structure. Any restrictions on this freedom shall be carried out in accordance with governing body policy. Division of Health Service Regulation LABORATO OR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

5/13/2024

(X6) DATE

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If continuation sheet 1 of 10

	of Health Service Rec	ulation					FORM APPROVE		
	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPLE	CONSTRUCTIO	ON .	(X3)	(X3) DATE SURVEY		
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V 539	Continued From pag	e 1	V 539	alerico	see attach	01			
				Minist	Jee Cillock	æ .			
	This Dula is not mot				SEAL OF BUILD				
	This Rule is not met Based on observation	as evidenced by:							
	nersonal privacy wor	y failed to ensure areas for							
	four clients (Client #1	e accessible effecting one of							
	.our dicins (Cheff #1). The infulligs are:					100000		
	Observation of the fa	cility on 4-16-24 at							
	approximately 1:30pr								
		not have a door.			es cue				
	- and only mo did	not have a door.			Marin Assessment				
	Review on 4-1-24 of I	ncident Response							
	Improvement System	(IRIS) revealed:							
	-3-17-24 Former	Client #3 "tore up room"							
	and " kept throwing ro	ocks until she broke a	Designed and		SA PERIOD NAME OF THE				
	window."		. PASSES SEEDER	Constant of the fire	art egy de son o				
	-3-7-24 Former C	Client #3 tried to burn the							
	house down and was								
	-3-7-24 Client #1	set the garbage on fire and	lead of						
	was kicking the walls.								
	-3-6-24 Client #1	was damaging property and							
	threatening staff.								
	tan Al-Mena) is in its		la de la sectiona						
	Interview on 4-15-24 v	with Staff #1 revealed:			. 22				
	-Client #1 had rip	ped the door off a few	1000 6 200 10						
		was have a bad behavior							
	episode.								
	-She could not rer	member exactly when Client	lark-site a		1,000				
7	#1 had ripped the door		in the days.	all all yours	Piles		The second		
	- I ne racility Execu	utive Director/Qualified			Aria unt e				
		e that there was no door							
	on bedroom #3.			Francisco (
		a bathroom in the room to							
C	fress in.								
1.	ntentiew on 4 45 24	ith Client #4							
"		ith Client #1 revealed:	the first of	Water State of the	especial and the				
41	ne door off, not her.	er Client #3 that had ripped	ar a come pain fear		tech field to the man				
u	-They could dress	in the bathroom							
	-She didn't roma-	ber when the door was			T		The second second		
	One didn't remem	ber when the door was			-		36.5		

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: MHL060-648 B. WING 04/22/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 9709 BATTEN COURT TURN AROUND MINT HILL, NC 28227 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID (X5) (EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PREFIX **PREFIX** TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) see affaithed V 539 Continued From page 2 V 539 ripped off. Interview on 4-19-24 with the Executive Director/Qualified Professional revealed: -Client #1 had been upset when she was asked if she had ripped the door off. -Both Client #1 and Former Client #3 had caused a lot of destruction to the home. -They just documented that there had been damage to the facility and did not detail the damage in the incident reports. -They were in the process of making multiple repairs to the facility. -He could not remember exactly when the door was ripped off. see attached V 736 27G .0303(c) Facility and Grounds Maintenance V 736 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 interviews, record reviews, and observation, the facility was not maintained in a safe, clean, attractive, and orderly manner. The findings are: Observation of the facility on 4-16-24 at approximately 1:30pm revealed: -Kitchen: left door frame was chipped with dark substances along the edges; the light switch had paint on it; the area over light switch was patched and painted but still rough; the countertops were chipped and had one worn spot approximately 3 inches by 2 inches; the floor had

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: R B. WING MHL060-648 04/22/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 9709 BATTEN COURT **TURN AROUND** MINT HILL, NC 28227 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE PREFIX COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) V 736 Continued From page 3 attaches V 736 four completely cracked tiles and 1/4 of one tile missing; the pantry door had dark smears around the doorknob and at the bottom of the door; pantry door frame had dark smears approximately 1 foot long; the refrigerator door handle was a light brown; the side outside door had two cracks in it each approximately 6 inches long, letting in the air and the bottom of the door had a patched area that had not been painted; the inside of the side outside door frame was chipped and rough (but painted). The top of pantry door frame was dented and hanging loose; the wall beside the kitchen table had a brown stringy substance and dark spots that had dripped and dried, two dark streaks approximately 3 inches long, and more dark matter over the chair rail; the window curtain had dried, dark substances on it; and the baseboard and wall leading to the living room had dark, ground in substances on it.. -Living Room: one bent air vent on the floor; three large, dried spots (approximately 1 inch round) and four dried small dark smudges on the left wall walking into the living room; ten dried white spots on the brick fireplace; a patched hole approximately 6 inches round, unpainted, and rough on the far wall; several dark spots and smudges on the right wall walking from the kitchen; a patched hole, unpainted, on the same wall approximately 3 inches round; the bottom of the wall and baseboard had a white, dried drip approximately 2 inches long; more black smudges towards the bottom of the wall; black markings in the shape of a heart on the same wall; a patched, unpainted hole approximately 6 inches by 3 inches on the wall leading to the foyer; the door frame was missing patch of paint approximately 2 feet by 2 inches. -The Foyer: approximately 1/3 of one of the

floor tiles missing; dark streaks were on the front

	NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPL	(Va) DATE			
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V 736	Continued From page	e 4	V 736	Olease se	e attached	La res	1 - 1 - 1 - 1
	door frame approxima	ately 1 inch long; long dark					
	streak approximately	3 inches long on the wall;		21.5			The care
	cracked and peeling	paint on the door frame)			
	leading to the office; i	missing ceiling molding					
	approximately 2 inches	es long.					
	-Hallway: on the	right side a large patched	-		TOTAL TOTAL PROPERTY.		
	area approximately 1	foot by 2 feet, painted but					1
	rough; writing on the	wall with clients names;	1				
	large dark smudge an	proximately 3 inches long;			1		
	area patched and pair	nted but rough were on right					1 1 1 1 1 1 1 1 1
	side approximately 6 i	nches by 3 inches:		William Committee Committee	1		
	thermostat was handi	ng off the wall; left side had					
	a repaired patch appro	oximately 2 feet by one foot	the Charles of	diddled Lifeber			
	that was coming loose	e; more dark streaks; both					
	door frames leading to	back bedrooms had dark	4				
	substances emocrad	on the frames; the back			3 1 A		
	hallway had block mor	dinas as the sall all the	1 1 2 1 1	An interplate area	9		
	national areas both las	kings on the wall; multiple			en alega a la cale		
	patched areas both lar	ge and small.					
	-bedroom #1: a si	mall, unpainted, patched		Parket Carly AMERICA			
	area on the right wall;	a patched area on the left	1 1300				
	wall approximately 3 b	y 2 inches; two patched		and the state of the state of the			
	areas next to that one,	one approximately 3 by 3	1 100				
	inches, one approxima	itely 1 foot by 3 inches;	1				
	large patched and pain	ited, but rough, area on left		Table Burn News Sci	V chi		
	wall approximately 2 fe	eet by one foot, with	de production	Anna prose magain	A sale la second		
	scratches through it; tw	vo patches, not painted,	1 21 -	State of the same of the			
	one approximately 2 by	/ 2 inches, and one					
	approximately 1 by 1 in	nch; patched area on wall		X S. C.			
	with the window approx	kimately 3 by 3 inches, with			letterare		
	a small hole in it; windo	wsill had dark, ground in		er og år ven gre det green			
The let	substances and was br	oken; purple substance in	1 50 1.	distribution of the			
47, 48,4	the shape of a rectangle	e approximately 2 feet by		e trace in the Albert			
	1 foot; decorative painti	ing in the shapes of hearts		to the eliteration for			
	on the wall over the bed	d; area patched and	h in the state of				
	painted but rough appro	oximately 4 by 4 inches		Contract to the second		1.44	
1	next to the bed; area pa	atched, painted but rough					was a state
t	behind the bed approxing	mately 6 by 6 inches.	700000000000000000000000000000000000000				
	-Bedroom #2: on th	ne right, a large patch of					
t	paint peeled off the wall	in the closet			1/		egin er
2	approximately 2 feet by	1 foot: patched and		erapeta erapitaridi.	•		

Division of Health Service Rec			7	FORM APPROVED	
AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRU	(X3) DATE SURVEY		
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			DEFICIENCY)	RIATE DATE	
V 736 Continued From pag	e 5	V 726			
		V 736	se see attached	Bill of Medical	
painted, but rough ar	rea on wall next to closet	charles and an experience			
approximately 1 foot	by 6 inches.	Transport many	Table see to be a second of the		
-Hall bathroom:	the door frame had dark		^		
substances round int	to it; the cabinet was missing	STATE OF THE SERVICE	1		
one drawer; one cabi	inet door was missing a	el and unique service			
handle; the toilet seat	t was loose; the wall had	Hardburg Jan	s the same of the		
dark smudges on the	wall next to the sink; there	of extended the later of			
was a dark substance	e on the shower curtain.	And the second second			
-Bedroom #3: a l	arge blue substance with	March 1995			
dried drips on the wal	Il next to the left of doorway				
with the drips going to	the floor; a hole in one			in the religious profession	
closet approximately	6 by 3 inches; more blue			The second second	
substance streaked a	long wall next to the closet:			The second of the second of	
a patched hole approx	ximately 3 by 3 inches				
beside the closet; drie	ed drips of light colored	The Archer Connect .		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
substance next to and	over the patch; more blue	dae Arendada			
substance on the left v	wall; one window has	al internation reference			
opaque substance sm	eared over it, with a partial	design to be a second			
curtain hanging by one	e curtain holder, the other			ENGLISH LINE	
curtain holder is missir	ng; wall behind the 1st bed			1000	
has several purple, bi	ue, and black markings on	Park in the State of the		THE REST WAS THE PARTY	
it; one nightstand is mi	issing both of the drawers:				
one curtain is hanging	sideways and partially	hali sa Iranii			
covering second windo	ow; window over side yard				
has crack in the outer	window, which was not				
accessible to clients in	side; a patched hole on			The state of the s	
wall next to the side wi	ndow approximately 6 by 3				
inches; a tear in the pa	int approximately 3 inches				
long by the bathroom d	door; dark spots and stains				
on the wall next to the i	bathroom.			ALL STREET, ST	
-Back bathroom: th	ne shower curtain had a	are form and her have been			
black substance on it; t	the inside of the shower	leantainea la accession			
door track was filled wit	th a dark a substance				
(door had been remove	ed); grout was dark and	Selection Agreement			
cracked; area behind to	pilet had brown and black		경영계 하다는 사람이 되었다.		
substances on the floor	and wall; the sink had				
streaks of a blue and w	hite substances,was				
cracked and had hair w	rapped around the				
stopper; the cabinet had	d white streaks running	Control Indian		VS. 1 S. ASSTALLA	
down the front; chipped	drawers; a large area	tale la constant de la constant	•		

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V 736	pag		V 736	please	see attached	1939 P
		ite, which was not the color	alas de se de.	and and		Appendix a programme and
	of the rest of the bath	nroom; a patched hole on the	which is seen.			
	right wall; several sm	nall smudges on the walls;		har and		
		had multiple dark streaks	s he boots to			
	and smudges; the pa	per towel holder had broken			attack mount.	
		between the right wall and			diameter manager	
	the door approximate					Barrier Brown Barrier
		ched hole, painted, but rough		to the streets of	- Marin Company	with the large case.
	approximately 1 foot					
		side back window had an	the state of		Market to the	Para de Maria de Caración de C
	orange substance co	vering the top of the window;	4.5			
	there was writing on t	the wall stating "I (heart)				
	princess; the back de	eck had 2 broken boards,			ed the same time and	
	foot the railing was le	approximately 6 inches by 1				

	deck had several "spo	ongy boards.			778 1636 1 1110	
	Interview on 4-15-24	with Client #1 revealed:			The first things to	
		house was "OK" and didn't			in eschenic in our	
	have any problems.	nouse was OK and didn't				The state of the state of
	navo any problems.					tod (meno promotoria del
	Interview on 4-16-24	with Client #2 revealed:				
		facility were all getting				
	patched up.	and gotting				
						Se la la la Caraca de Alexanda de Caraca de Ca
	Interview on 4-15-24 v	with Client #4 revealed:				ment of the factor of
	-She kept her roo					
		es in the wall in her room.				
						in and the state of the state o
	Interview on 4-15-24 v	vith Staff #1 revealed:	to the self-c			And the state of the state of the
	-The Executive Di		1. 16 m to			
		ntly finished fixing all the	trade de la			
	windows.		in whom has been		er et al. a de la company	AND MELLER
	-The clients had c	hores to keep things clean.	wall of Le	The section is	A PER SECTION	
	Charles and Levy British	the first of the attention of the	tech rest to	etalin time (2)		
	Interview on 4-15-24 w		Maria Cara Cara		A SECTION OF THE PERSON OF THE	
		in plain site." (referring to			of the second of the	per de la companya d
	the condition of the fac					
		d chores to help keep the				
	facility clean.	a propinski sik kali navelezakie p			V	a filologica programa de la compania

Divisio	n of Health Service Reg	ulation						10	MATROVED
	ENT OF DEFICIENCIES N OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIF		STRUCTION				
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V 73	6 Continued From pag	e 7	V 736		please	see	attachel		- 12. 12.14.15.27
	-Some staff go o	over the facility after the	1.00	dia .					dynamic way
	clients do their chore	es to make sure it is clean.		1000	e year to	grade grade			
			1.00 5.00	14					The block of
		with Staff #3 revealed:	1 1 1 1 1 1	refrants		10 L 10 L			and the second second
	-The windows ha	ad just been replaced.	lea le tra	in estal	the second	Service Co			in the second second
	, de la desarta della segli			1 300		ur was	para militira		distance est
		with Staff #4 revealed:		100		into.			a priest in
		working at the facility		of her live it	1.14, 15, 1				1 1 1 1 1 1 1 1 1 1
	approximately 2 mon								
		ws had been replaced since					1		than of the earli
	-"The place is cle	but that is all she knows.					1000		e e e e
		Director/Qualified							
		her that he would be							
		, but didn't tell her the			market the fall				
	details.								Lices point
	Interview on 4-15-24	with a local police officer	Lalan.	2000		rando.	100		
	revealed:		ha ka si	100			alest the		100
	-The facility had	multiple issues such as		1.			9 2 40 1 2		6.658.658.68
	holes in the walls.			100					
	-"The house was	dirty."		and the			-		
	145.04								
	Interview on 4-15-24 Director/Qualified Pro					100 (3)	Property of		
		g to fix the damage in the made multiple repairs.		1 1 1 1		201			Tarta Danie atta
		ney discharged at the end of							
		sed "a lot of damage."							
		I not help with repairs.		L		personal de			
		anliness at all staff meetings	a Kirkadan	Sup Hi					
		clients need to be supervised	en last e	100	the track	Same the			
	doing their chores.					4 100			de metage
			And the last		2 - 4	Ange :	STATE OF STREET		
	This deficiency has be the original cite date of	een cited four times since of 3-22-22.				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
	grant and one option of a						1		to the management
		the Plan of Protection		party.			1		archanings
	dated 4-19-24 and sig			155.00			1		The Section of
Mar per u	Director/Qualified Pro	tessional revealed:					V		Parallel Charles

Division of Health Service Regulation (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: R B. WING MHL060-648 04/22/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 9709 BATTEN COURT **TURN AROUND** MINT HILL, NC 28227 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID ID PROVIDER'S PLAN OF CORRECTION PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) V 736 Continued From page 8 V 736 "What immediate action will the facility take to ensure the safety of the consumers in your care? New Place will contact [Handyman service] on 04/19/2024 to make necessary repairs and will tape off the back deck to prevent access until rotten and broken boards and rails can be replaced and secured. Describe your plans to make sure the above happens. Executive Director will be responsible for scheduling a deep cleaning to be completed on 4-21-24 to include scrubbing the walls and molding, refrigerator, counters and etc. Executive Director [Executive Director] will contact the routinely used handyman to address the holes in the wall to be sand and painted. Broken doors to be replaced within the next five calendar days." Review on 4-22-24 of the amended Plan of Protection emailed on 4-22-24 by the Executive Director/Qualified Professional revealed: " What immediate action will the facility take to ensure the safety of the consumers in your care? New Place will contact [Handyman service] on 04/19/2024 to make necessary repairs and will tape off the back deck to prevent access until rotten and broken boards and rails can be replaced and secured. The deck will be roped off no later than 04/22/2024. Describe your plans to make sure the above happens. Executive Director will be responsible for scheduling a deep cleaning to be completed on 04/21/2024 to include scrubbing the walls and molding, refrigerator, counters and etc. Executive Director [Executive Director/Qualified

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVID IDENTIFIE		(X1) PROVIDER/SUPPLIER/GIDENTIFICATION NUMB	ER:	(X2) MULTIF	(X3) DATE SURVEY COMPLETED	
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NAME OF P	ROVIDER OR SUPPLIER		STREET ADD	RESS CITY S	STATE, ZIP CODE	1 04/22/2024
10000				EN COURT	TATE, ZIP CODE	
TURN ARG				NC 28227		
(X4) ID PREFIX TAG	(EACH DEFICIENC	TATEMENT OF DEFICIENCIES YMUST BE PRECEDED BY FUI LSC IDENTIFYING INFORMATIO	L N)	ID PREFIX TAG	PROVIDER'S PLAN OF COM (EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)	SHOULD BE COMPLE
V 736	Continued From page	e 9		V 736	please see attack	et
	Professional] will con	tact the routinely used			4	
	handyman, [Handyman,	an services] to address				
	holes in the wall to be	sand and painted. The		1.44	And the second of the second	
	holes will be sanded	and painted over by	Section 1	9-1-5		
	04/29/2024. The brok	en bedroom door is to b	e estrer.		and the state of t	
	replaced by 04/26/20	24. "				
	The facility band by		1.1101.13			
	continued to have iss	cited 5 times in a row a	nd			and the least of the same
	cleanliness damages	ues with a lack of			The state of the s	
	minimally renaired ar	that were not repaired ond safety hazards that	r	· Partie	dia - man di na taribita, e ni di di	
	included trip hazards	from broken and missing				
	floor tiles and spongy	and weak deck boards.				
o . 60	This deficiency constit	tutes a Type B rule violat	ion			
	which is detrimental to	the health, safety and	ion .			
	welfare of the clients a	and must be corrected				
	within 45 days.					6.5
					o mala Proposition and a	
					astronomic and a second	
			Salarda -			
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						The state of the s
				11111111		The second section of the second

Plan of Correction

Turnaround MHL-060-648

V 539 27F 0102 Client Rights - Living Environment 10A NCAC 27F .0102 LIVING ENVIRONMENT

This Rule is not met as evidenced by: Based on observation, record review and interviews, that facility failed to ensure areas for personal privacy were accessible effecting one of four clients.

On 05/09/2024 Executive Director privacy of clients occupying the room. Moving forward, anytime a bedroom door has been aggressively removed or torn off the hinges of any consumer it will be replaced within 72 hours or as soon as the door can be located due to specifications, whichever is sooner. During the time the door is off of the bedroom clients will be afforded with privacy to change in a bathroom that has a functioning door. Repairs to all interior doors will be made within the specified time frame and monitoring of this will be ongoing and will be reviewed semi-annually at Quality Assurance/Quality Improvement Committee meetings.

V 736 27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS

This Rule is not met as evidenced by: V 736 Based on observations, record review and interviews, the facility was not maintained in a safe, clean, attractive, and orderly manner.

Although all reported deficiencies can be considered to be opinionated, the Executive Director will be responsible for conducting weekly checks of the facility to include interior and exterior. If there are any damages identified within or outside of the facility the Executive Director will make the necessary repairs or identify appropriate personnel (electrician, handyman, pest exterminator, plumber, etc.) to assess the damage, provide a written estimate. Once the estimate is received the work order for repairs shall be fulfilled within 7 calendar days. The overall cleanliness of the facility is a team effort by clients and staff and shall be maintained accordingly. If clients fail to complete their chores it will be the responsibility of the staff to assure that the chore is completed, and it will be documented in the client's daily documentation. The monitoring of this will be ongoing and will be reviewed semi-annually at Quality Assurance/Quality Improvement Committee meetings. As of 05/10/2024 the interior of the home has been painted.

V 738 27G .0303(d) Pest Control 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (d) Buildings shall be kept free from insects and rodents.

This Rule is not met as evidenced by: V 738 Based on interviews, the facility staff failed to keep the facility free from insects and rodents.

Effective immediately all staff members shall report to House Manager if they see any pest within the facility. If there are any reports of pests the House Manager will report it to Executive

in turn will immediately request pest control services for the identified pest. Once the treatments have been completed an invoice shall be provided as verification of established treatment. Thios shall be completed at the earliest convenience not to exceed 7 calendar days. The monitoring of this will be ongoing and will be reviewed semi-annually at Quality Assurance/Quality Improvement Committee meetings.