

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL029-128	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/17/2024
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NAME OF PROVIDER OR SUPPLIER THE WORKSHOP OF DAVIDSON	STREET ADDRESS, CITY, STATE, ZIP CODE 275 MONROE ROAD LEXINGTON, NC 27292
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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>A complaint survey was completed on June 17, 2024. The complaint was unsubstantiated (Intake #NC00213191). A deficiency was cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .2300 Adult Developmental and Vocational Programs for Individuals with Developmental Disability and 10A NCAC 27G .5400 Day Activity for Individuals of All Disability Groups.</p> <p>This facility has a current census of 51. The .2300 Adult Developmental and Vocational Programs for Individuals with Developmental Disability has a current census of 15 and the .5400 Day Activity for Individuals of All Disability Groups has a current census of 13 clients.</p>	V 000		
V 738	<p>27G .0303(d) Pest Control</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (d) Buildings shall be kept free from insects and rodents.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to keep the building free from insects, affecting 3 of 3 audited clients (#1, #2, and #3). The findings are:</p> <p>Review on 3/21/24 of client #1's record revealed: -Date of Admission: 11/1/04; -Diagnosis: Moderate Mental Retardation.</p>	V 738		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 738	<p>Continued From page 1</p> <p>Review on 3/20/24 of client #2's record revealed: -Date of Admission: 6/5/95; -Diagnosis: Moderate Mental Retardation.</p> <p>Review on 3/21/24 of client #3's record revealed: -Date of Admission: 3/20/19; -Diagnoses: Autistic Disorder, Moderate Intellectual Disability, and Depressive Disorder NOS.</p> <p>Interview on 6/17/24 with client #3 revealed: -" ...the Workshop had bed bugs and I could not attend, it was one day; -Sometimes the Workshop gets bed bugs."</p> <p>Interview on 3/18/24 with the complainant revealed: -"She thought the Workshop was closed for that day and the client returned the next day." From the information the facility received this was not the first episode of bed bugs; -The facility was notified about the bed bugs from the legal guardian. The legal guardian wanted the facility to call in a complaint.</p> <p>Interview on 6/17/24 with staff #1 revealed: -She did not remember the date but she was notified about the bed bugs from the Assistant Director; -The licensee had an exterminator to treat the facility. Clients would clean out their lockers, and the licensee would notify the group homes to do their part.</p> <p>Interview on 6/17/24 with the Qualified Professional revealed: -She was aware of the bed bugs in the building; -The exterminator came out and came on a regular basis; -"They (licensee) sent a note home", to state the</p>	V 738		

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V 738	<p>Continued From page 2</p> <p>facility would be closed for maintenance; -The licensee would also contact caregivers via phone.</p> <p>Interview with the Executive Director revealed: -"He (exterminator) was here back in February and closed for the whole day ...returned on 2/7/24 to treat. -It was a very light showing of bed bugs, 2 bugs on one coach and 3 on the other coach."</p>	V 738		